

 mind Mid and North East Essex

“Let’s Talk”

...about self-harm

Southend, Essex, and Thurrock
Self-harm management toolkit
for educational settings

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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 tools** 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 to support the system and people around the individual

This toolkit has been developed in response to requests from schools and is part of the work for the Children and Young People’s Mental Health Transformation Plan, for Southend, Essex and Thurrock.

The focus of this toolkit is on spotting the signs 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. Related toolkits that are also relevant include the Southend, Essex and Thurrock suicide prevention toolkit and local safeguarding policies. Here we will address how to identify self-harm, how to assess need, how to help the individual and how to support the friends and peer group around them.

This toolkit includes information about responding to self-harm however, as usual, in the event of a medical emergency, **call 999**.

 **Mind** Mid and North East Essex

“ Let’s Talk ”

2

“How to identify 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 an emotional pain.

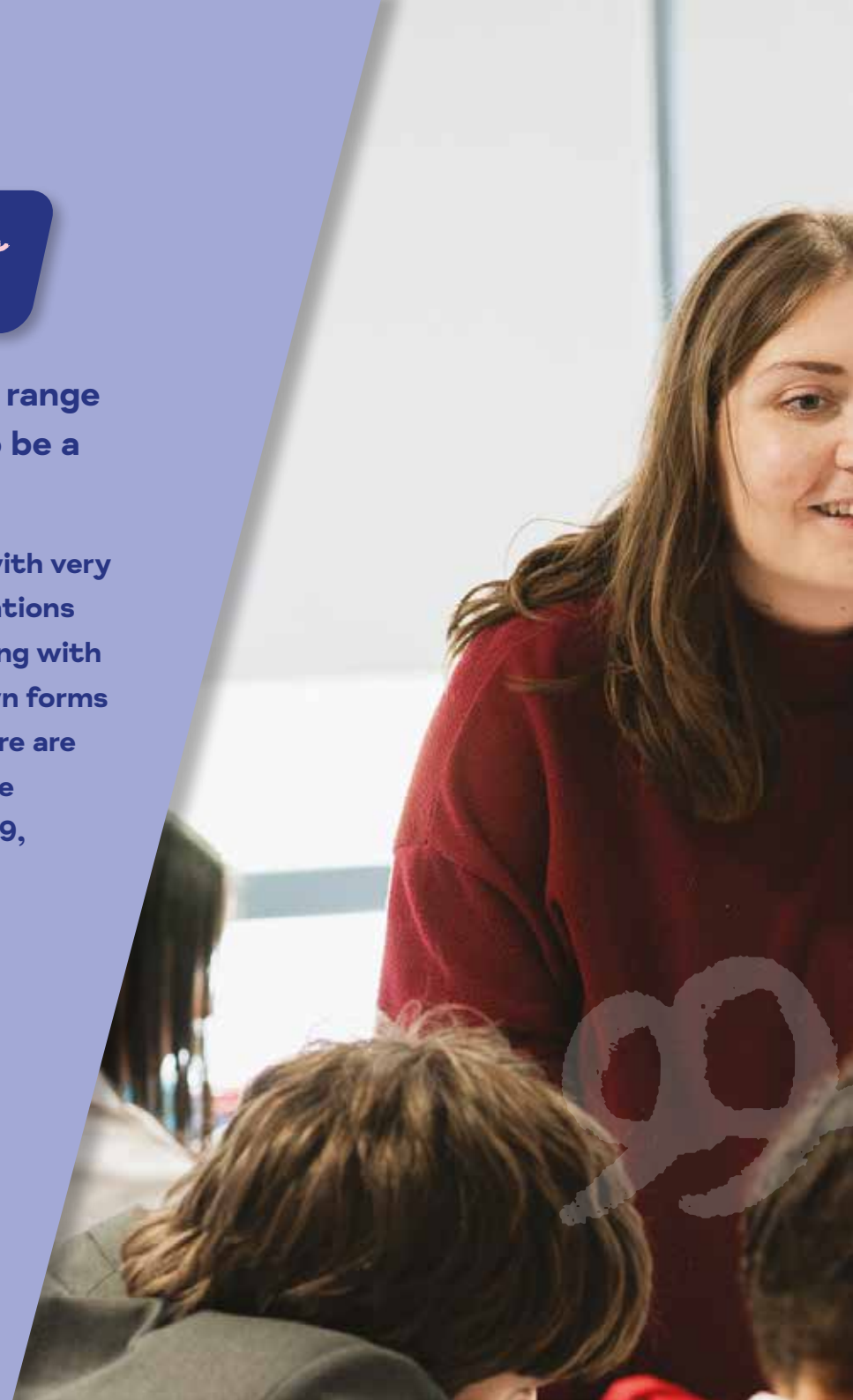
Self-harm is when you hurt yourself as a way of dealing with very difficult feelings, painful memories or overwhelming situations and experiences.¹ It is usually a way of expressing or coping with overwhelming emotional distress.² Some more well-known forms of self-harm include cutting, burning or pinching, but there are many forms of self-harm, including drug and alcohol abuse or struggling with disordered or selective eating.³ In 2018-19, 24% of 17-year-olds reported having self-harmed in the previous year, and seven per cent reported having self-harmed with suicidal intent at some point in their lives. 16% reported high levels of psychological distress.²

1. Mind.org.uk

2. Young Minds: Mental Health Statistics 2023

3. Self Harm UK The facts: What is self-harm?

Available online at: https://www.selfharm.co.uk/?gclid=EA1aIQobChMIm-GLguC91wIVSLobCh1ZRwy-SEAYASAAEgK_xfD_BwE accessed 10th February 2017



3

“How to identify who is self-harming 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 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” but connection-needing behaviour as they are expressing their need for contact with another, 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.

- **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 fit in with peers**

Creating a feeling of connection and belonging with others in a group and conform to group expectations in order to fit in.

Who self harms?

On the following page are 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 the 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.).

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)

	Risk factors	Protective factors
Characteristics of the individual	<ul style="list-style-type: none"> • Low self-esteem • Perfectionism/pressure to perform well • Poor coping, communication or problem solving skills • Social and emotional challenges • Mental health distress or illness, e.g. anxiety/depression • Alcohol/substance misuse • Poor emotional regulation • Stress or worries (that can peak at key times such as transitions, exams etc) 	<ul style="list-style-type: none"> • High self-esteem • Higher ability/attainment • Good interpersonal skills • Ability to regulate own emotions • Positive school experience • Secure attachments • Resilience • Knowledge and ability to seek support and trust in adults
Features of the immediate context	<ul style="list-style-type: none"> • Access to means of causing self-harm • Being alone 	<ul style="list-style-type: none"> • Social exclusion • Alcohol and drugs
Family factors	<ul style="list-style-type: none"> • Family members who self-harm • Family conflict • Parental separation and divorce • Parental illness • Parental alcohol/drug misuse • Parental imprisonment • Intergenerational trauma 	<ul style="list-style-type: none"> • Supportive adult relationship • Harmonious family relationships • Low level of material or social hardship • Good role models within family • Secure attachments • Good relationships with family, school and wider community

Cont..

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

3

How to identify who is self-harming and who is at risk?

	Risk factors	Protective factors
Peer group	<ul style="list-style-type: none"> • Arguments with friends • Bullying 	<ul style="list-style-type: none"> • Friends who self-harm • Loneliness/social isolation
School/college	<ul style="list-style-type: none"> • Stable and secure friendship group 	<ul style="list-style-type: none"> • Lack of organisation/feeling of chaos • Staff capacity and lack of time to provide quality support • High staff turnover and/or high number of supply staff • Punitive environment • Lack of understanding of trauma • Lack of clarity over who to go to for support • Lack of resources to manage emotional and mental health challenges • Not recognising SEND/SEMH or providing support • Undiagnosed need viewed as bad behaviour
Wider culture and community	<ul style="list-style-type: none"> • Lack of training for staff • Emotionally Based School Avoidance not supported by school • Moving on between phases and schools • The long lasting impact of COVID on mental and emotional health as well as academic achievement 	<ul style="list-style-type: none"> • Supportive adult • Inclusive/incorporative ethos • Strong commitment to PSHE mental health promotion • Establishment of peer support systems • School's commitment to Trauma Informed Practices • Whole school approach and ethos • Supportive, resilient, trained staff with the time and resources required • Understanding of SEMH challenges with the ability to put in support • Honest and open communication around self-harm and mental health • Supportive rather than reactive • Support in place for the staff • Good knowledge of SEND/SEMH issues
	<ul style="list-style-type: none"> • Being part of a minority group • Problems in relation to race, culture or religion • Problems regarding sexual orientation or identity 	<ul style="list-style-type: none"> • Media portrayals glamorise self-harm or suicide 'victims' and elicit 'copy-cat' responses by vulnerable children and young people • Wider challenges presented by race, culture, religion, sexual identify and gender • Impact of social media • Wider youth culture influences

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

“ How to identify the signs of self-harm ”

Self-harm may begin in response to a range of issues (see risk factors in the previous table), including the below:

- Family relationship difficulties (the most common trigger for younger adolescents)
- Difficulties with peer relationships (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/peers
- 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 family, school or peers to conform/achieve
- Exam pressure
- Times of change e.g. parental separation/divorce/change in parental care/carers

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).

Oxfordshire Adolescent self-harm forum – Self Harm: Guidance for Staff within school and residential settings in Oxfordshire (last revised August 2012)

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
- Covering parts of their bodies (ie with long sleeves/tights/trousers)
- Avoiding activities that exposes their bodies such as PE
- Risk taking behaviour (substance misuse, unprotected sexual acts)

The relevance of individual signs and risk factors may vary according to the age of the child or young person. These signs may not necessarily mean there is self-harm occurring, but they are indications that the individual requires additional support.

5a

How to assess need: Pathway of recommended actions

	Actions:
1. Deal with medical requirements	<ul style="list-style-type: none"> • Is urgent medical attention required? (e.g. heavy bleeding/overdose/unconscious/suicidal?) • If urgent medical attention required, call 999 • Administer first aid where required by appropriately trained personnel • Keep calm and be reassuring
2. Talk to child/young person and inform Designated Safeguarding Lead	<ul style="list-style-type: none"> • Inform school's Designated Safeguarding Lead • Explain confidentiality (see toolkit on page 14) • Talk to the child/young person to gather information. See conversation prompts on page 15 for support. (see prompt questions and information about talking to children or young people about self-harm on pages 15-17) • 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 for 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 (or other services), engage with social worker though this should not delay next steps if necessary

Cont..



	Actions:
<p>3. Seek advice or referral from SET CAMHS (if required) or from the School Nurse</p>	<ul style="list-style-type: none"> • If required, seek advice from or refer to Southend and Thurrock Child and Adolescent Mental Health Service (SET CAMHS) (see further information on page 27) • Advice and referrals can be discussed with the SET CAMHS single point of access on 0800 953 0222 (during working hours 9am - 5pm) • The out of hours and weekend Crisis Support Service can be contacted on 0800 995 1000 • Contact School Nurse for advice please see website for contact information for your area: www.essexfamilywellbeing.co.uk/services/school-age
<p>4. Continue conversation, log incident and agree next steps</p>	<ul style="list-style-type: none"> • Log incident and ensure Designated Safeguarding Lead has been informed. (see example incident recording form in Appendix 3B) • Ask child/young person what help they want/what they would find helpful and create a Safety Plan with the child or young person. This should be done by someone with whom they feel comfortable. Following this, a Wellbeing Plan can be formulated for the future. • Discuss best course of action with child/young person and relevant colleagues (e.g. Designated Safeguarding Lead) • 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) • 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 20) • 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), websites, phone numbers etc. These should all be at the bottom of the Safety Plan. • All actions should be in line with your safeguarding procedures.

5b

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

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.

Factors that increase the risk:⁵

- Where the child is of primary school age and presents with self-harming behaviour thus increasing the risk of developing further mental health issues in the future.
- 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 benefits⁵
- complex family dynamics and a lack of support system

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)

If the child or young person is expressing a wish to die and says they have a plan of what to do, you should contact the service between the hours of 9am-5pm, Monday or Friday you can call **SET CAMHS** on **0800 953 0222**. For out of hours support please call Mental Health Direct on **0800 995 1000**

Unless the child or young person is in obvious emotional crisis, kind and calm attention to ensure that any immediate physical wounds are treated (by an appropriate member of staff) and non-judgemental support is offered.

5b

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

Assessing risk

Questions of value in assessing severity of the injury include:⁶

- Where on your body do you typically self-harm?
- In what ways are you harming yourself?
- How long have you been feeling this way?
- What are you using to self-harm?
- Have you ever hurt yourself more than you meant to?
- What do you do to care for the wounds?
- Have your wounds ever become infected?
- Have you ever seen a doctor because you were worried about a wound?

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

Where there is any doubt about risk it is important to discuss with SET CAMHS or your Mental Health Support Team if you have one.

- Where a parent or carer is unwilling to engage with support services, a referral to the Children and Families 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 safeguarding procedures.

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)

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.
- 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 where possible. Generally speaking, 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. 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.
- It is helpful to consult the Southend, Essex and Thurrock safeguarding policies which can be accessed at the below website:
<http://www.escb.co.uk/>

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 prompts ”

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 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"> ☞ 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 worried that you may be feeling unsafe or at risk of hurting yourself, my job is to let other people who can help you know what's going on. BUT where possible I will have that discussion with you before and we can make a plan together that will keep you safe. ☞
Starting the conversation /establishing rapport	<ul style="list-style-type: none"> ☞ Let's see how we can work this out together... It may be that you need support from other people as well... ☞ ☞ Use active listening e.g. ☞ Can I just check with you that I have understood that correctly? ☞
The nature of the self-harm	<ul style="list-style-type: none"> ☞ Where on your body do you typically self-harm? ☞ ☞ In what ways are you harming yourself? ☞ ☞ How long have you been feeling this way? ☞ ☞ What are you using to self-harm? ☞ ☞ Have you ever hurt yourself more than you meant to? ☞ ☞ What do you do to care for the wounds? ☞ ☞ Have your wounds ever become infected? ☞ ☞ Have you ever seen a doctor because you were worried about a wound? ☞
Reasons for self-harm	<ul style="list-style-type: none"> ☞ I wonder if anything 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

Cont...



Topic	Possible prompt questions:
Coping strategies and support	<ul style="list-style-type: none"> •  Is there anything that you find helpful to distract you when you are feeling like self-harming...? Perhaps listening to music, playing on your phone, texting a friend, spending time with your family...reading, going for a walk... There are opportunities here to teach the young person grounding techniques, Mindfulness, breathing strategies, take-up time etc. •  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?  •  What support can we put in place for you at school?  •  What feels like it is causing you the most stress at the moment?  •  What do you think would be most helpful?  • Signpost the young person to relevant apps and websites that can offer support.
Speaking to parents (where appropriate)	<ul style="list-style-type: none"> •  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 to talk to your parents...
Ongoing support	<ul style="list-style-type: none"> •  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-this can help remind you... • Suggest they take a photo of the plan with their phone so they always have it with them if they need it.

5e

“ Dos 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-harming. 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</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 care, remain calm and non-judgmental</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>✗ Do not discuss it in a public place</p>
<p>✓ Find out how they are feeling – are there ups and downs?</p>	<p>✗ Ensure confidentiality for the young person at all times</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, where possible</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 16 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 you have someone to support you and talk things through with</p>	

6

“ Talking to children or young people who are self-harming - some possible distraction/coping strategies ”

Replacing self-harm with safer coping strategies can be a helpful way of responding to difficult feelings. The coping strategies appropriate for different children/young people are likely to vary by their age and personal preference. Talking to the child or young person about what coping strategies work for them may be useful (see conversation prompts above). Different strategies may work for different individuals and may require time to become effective. Some strategies that may be helpful include:

6

“Some possible distraction/coping strategies include: ”

Topic :	Examples of activities :
Calming/ stress relief/ distraction	<ul style="list-style-type: none"> • Going for a walk, looking at things and listening to sounds and other grounding techniques • Create something, e.g. drawing, writing, music, cooking, sculpture, crafts • Going to a public place, away from the house • Keeping a diary • Stroking or caring for a pet • Watching TV or a movie • Getting in touch with a friend or trusted person (could be a parent, sibling or peer) • Listening to soothing music • Having a relaxing bath • Breathing exercises, grounding techniques, mindfulness etc. • Use a calming app
Releasing or managing emotions e.g. aggression and anger	<ul style="list-style-type: none"> • Clenching an ice cube in the hand until it melts • Snapping an elastic band against the wrist • Drawing on the skin with a red pen or red paint instead of cutting • Sports or physical exercise, kick a football against a wall, go for a run • Using a punch bag/pillows or other soft object • Listening to or creating loud music • Tearing up newspaper
Restlessness	<ul style="list-style-type: none"> • Take some exercise e.g. walking, sports, gardening, bike ride, trampolining etc • Sing or shout loudly

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.oxfordhealth.nhs.uk/harmless/> (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 <https://www.rpsych.ac.uk/PDF/Self-Harm%20Distractions%20and%20Alternatives%20FINAL.pdf> (accessed 21/8/17)

7

“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.

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.

8. 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)

Does this toolkit apply to children and young people with Special Educational Needs and/or disabilities?

Where children or young people with Special Educational Needs and/or Disability (SEND) 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 why some children/young people with SEND self-harm. 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.⁸

It is difficult to cover the broad range of individual needs in this toolkit however generally speaking, where the child/young person with SEND is self-harming, staff should consider:

- Informing and seeking advice from SET CAMHS and SEND specialists
- Reviewing the child's Education Health and Care plan for advice
- Seeking medical advice
- In all cases, inform the Designated Safeguarding Lead

8

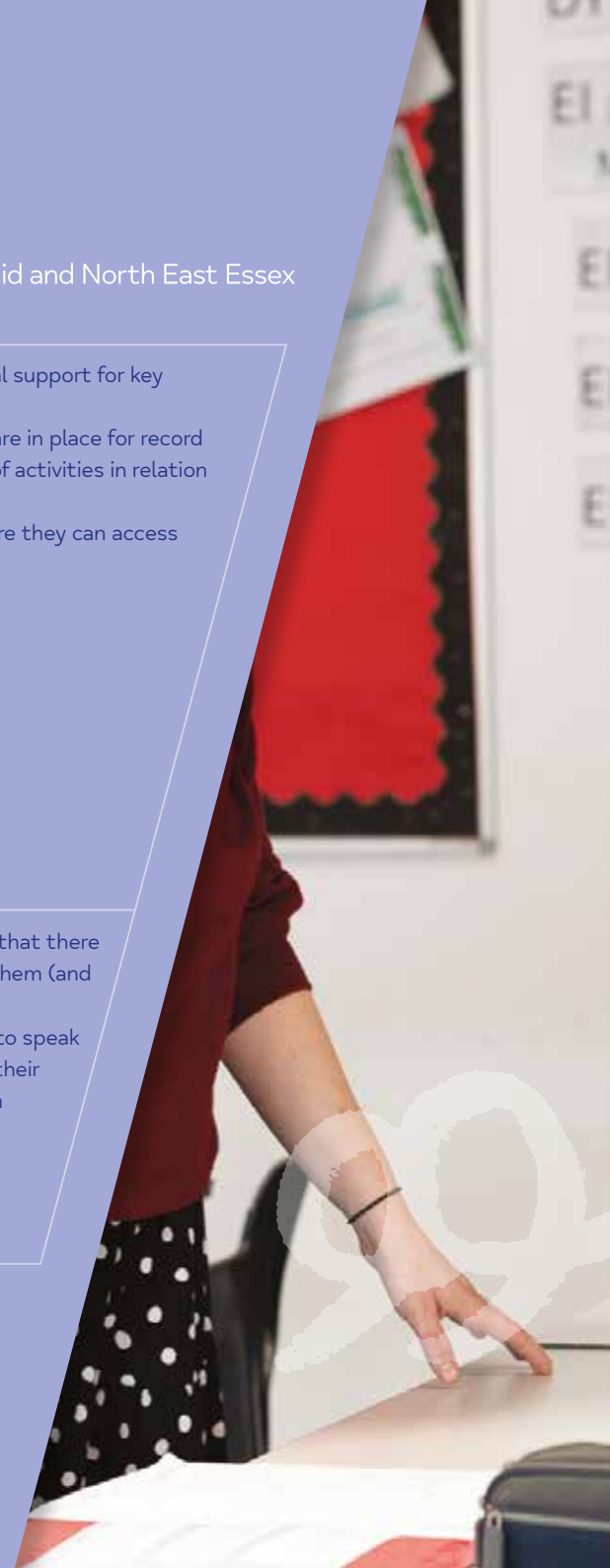
Roles and responsibilities within schools

8

Roles and responsibilities within schools

<p>Headteacher</p>	<ul style="list-style-type: none"> • 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 • PSHE 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 • Develop and implement 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. 	<ul style="list-style-type: none"> • 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
<p>To all staff and teachers</p>	<ul style="list-style-type: none"> • All incidents of self-harm should be reported to the Designated Safeguarding Lead regardless of perceived severity • 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 • Discuss an incident or disclosure of self-harm with the Designated Safeguarding Lead as soon as you become aware of it and inform the student that you are doing this 	<ul style="list-style-type: none"> • Make it known to the student that there are staff available to listen to them (and how they can be accessed) • Review the toolkit about how to speak to children, young people and their parents/carers about self-harm and confidentiality

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

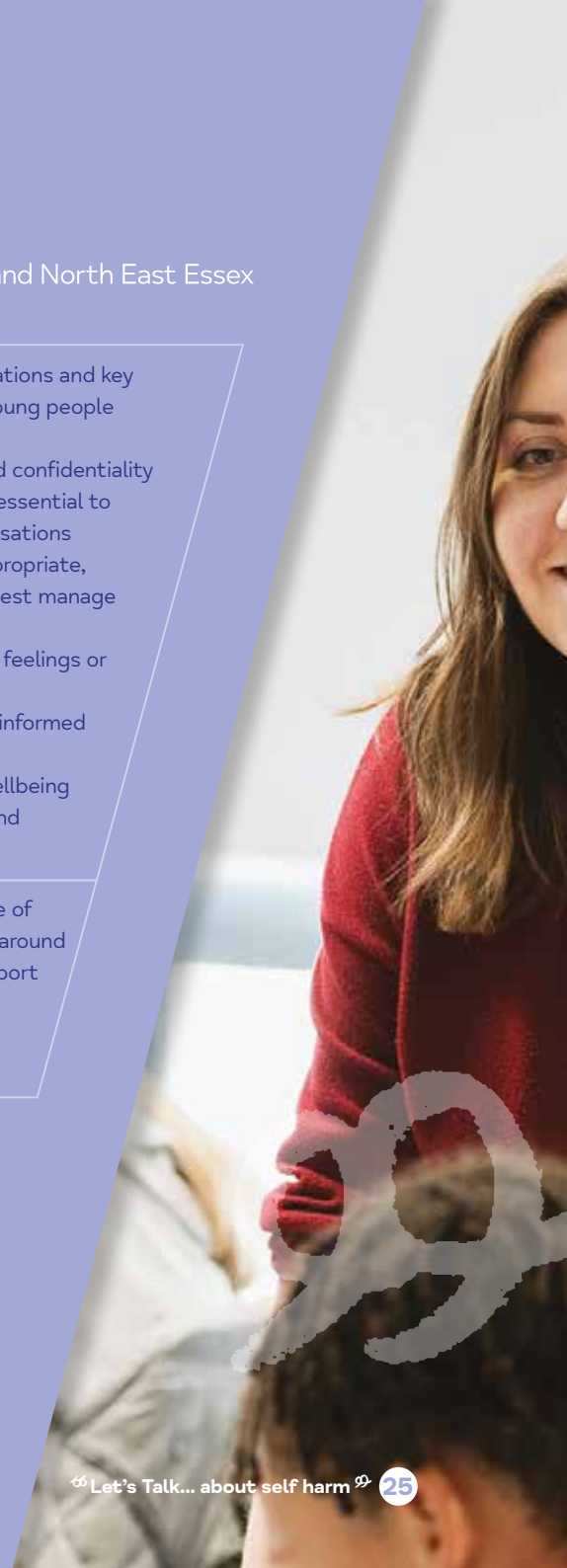


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Roles and responsibilities within schools

 Mind Mid and North East Essex

<p>Designated Safeguarding Lead</p>	<ul style="list-style-type: none"> • Ensure that all students know who the Designated Safeguarding Lead is and that they can talk to any member of staff if they are experiencing or thinking about self-harming or are aware of another student who is thinking about self-harming/has self-harmed • Ensure all students know where to access leaflets and toolkit about coping with self-harm • Maintain up to date records of students experiencing self-harm, incidents of self-harm, concerns surrounding the issue and support provided to students • Communicate, where appropriate, with the headteacher and/or other key staff, on a regular basis and keep them informed of all incidents and developments • Access to up to date and relevant training for all staff • Ensure you are confident and up to date in your understanding of self-harm including training where 	<p>required. Be aware of what organisations and key services in your area can support young people who self-harm</p> <ul style="list-style-type: none"> • Be aware of information sharing and confidentiality arrangements, including when it is essential to share information with other organisations • Inform the student's parents, if appropriate, and liaise with them as to how to best manage the situation • Respond to any mention of suicidal feelings or behaviour as a matter of urgency • Ensure that all first-aiders are well informed about self-harm • Take care of your own emotional wellbeing and seek support/ supervision as and when necessary
<p>School governors</p>	<ul style="list-style-type: none"> • 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 • Support the development of school policy around self-harm 	<ul style="list-style-type: none"> • Be assured that students are aware of who they can talk to at the school around self-harm and where to access support around coping with self-harm



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“Roles and responsibilities within schools”

Staff self-care

Staff may find it difficult or upsetting when discussing issues related to self-harm with children or young people. It is important for staff to look after themselves and seek help and support where necessary. Schools should have mechanisms in place that can provide support for their staff who are dealing with safeguarding issues. Please see page **31** for contact details for support services for school staff and/or seek advice from a GP for further support.

Some schools may have access to more specific programmes for staff support. 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.



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“ Advice and referrals ” to SET CAMHS

A referral can be made online here:

Southend, Essex and Thurrock (SET) CAMHS
NELFT NHS Foundation Trust
www.nelft.nhs.uk/set-camhs

SET CAMHS also offer a professional consultation line, this is open Monday- Thursday 10-12 on **0300 300 1996** if:

- You are unsure if a referral is appropriate
- Would like information about local services
- Would like advice about the best way to support a young person or a child.
- Need clarification about SET CAMHS criteria and clinical remit.

Please note this number is **not** to be given to parents or young people and is for professional use only.

How does this work?

SET CAMHS will ask for your name and your professional involvement they will also need details of the child or young person in question. They will not be able to share information without written consent, either the young person's or parent's, depending on the child's age.

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“ Useful information and contacts ”

Staff should be aware that when generally searching about self-harm online, some sites may be pro self-harming. Therefore care is required when finding information online. The following recommended organisations can offer further help and useful resources:

Resource/service	Contact information
Child and Adolescent Mental Health Service (CAMHS) for Southend, Essex and Thurrock	<ul style="list-style-type: none"> See section on “Advice and referral to CAMHS service” on page 27 https://www.nelft.nhs.uk/set-camhs-get-in-touch
Safeguarding Boards	<ul style="list-style-type: none"> Essex safeguarding board policies, including prevention of youth suicide toolkit http://www.escb.co.uk/ Thurrock safeguarding board: https://www.thurrocklscp.org.uk/lscp Southend local safeguarding children board: www.safeguardingsouthend.co.uk/children
Essex: Social care contact	<ul style="list-style-type: none"> https://www.essexeffectivesupport.org.uk/childrens-social-care/ https://www.essexeffectivesupport.org.uk/
Thurrock: Social care contact	<ul style="list-style-type: none"> www.thurrock.gov.uk/childrens-care-professionals/childrens-social-care
Southend: Social care contact	<ul style="list-style-type: none"> www.southend.gov.uk/info/200223/childrens_social_care
Essex - Effective Support Directory	<ul style="list-style-type: none"> The Effective Support Directory can signpost to services when the level of need in a request for support does not meet Children’s Social Care or Family Solutions https://www.essexeffectivesupport.org.uk/
Thurrock - Young people and families directory	<ul style="list-style-type: none"> ‘Ask Thurrock’ is an online directory of local services to help children, young people and families www.askthurrock.org.uk/kb5/thurrock/fis/public_shortlist.page?publicid=LpLBEhVwha4
Southend – Children and Families’ information point	<ul style="list-style-type: none"> Southend’s SHIP is an online directory of local services to support children, young people and families: http://www.southendinfopoint.org/kb5/southendonsea/fsd/home.page
MiLife website and app	<ul style="list-style-type: none"> Developed by CAMHS, this is a website designed to help young people support their own emotional and mental wellbeing. A MiLife website/app has also been launched. www.milife.org.uk
Young Minds	<ul style="list-style-type: none"> A national charity working towards improving wellbeing and mental health of children and young people www.youngminds.org.uk Young Minds Parent Helpline: 0808 802 5544 (Mon-Fri, 9.30am-4pm)
Calm Harm app	<ul style="list-style-type: none"> An award-winning app developed for teenage mental health charity stem4 in collaboration with young people.
School Nurse	<ul style="list-style-type: none"> www.essexfamilywellbeing.co.uk/services/school-age

Resource/service	Contact information
Samaritans	<ul style="list-style-type: none"> A national charity aimed at providing emotional support to anyone in emotional distress www.samaritans.org 116 123 (free phone 24 hour helpline)
Mind	<ul style="list-style-type: none"> Provides advice and support to anyone experiencing mental health problems www.mind.org.uk Understanding self-harm booklet: www.mind.org.uk/media/5133002/mind_und_self-harm_singles_4-web.pdf
Rethink	<ul style="list-style-type: none"> A national mental health charity offering information, advice and support about mental health issues www.rethink.org
Harmless	<ul style="list-style-type: none"> A national voluntary organisation for those who self-harm, their families and professionals www.harmless.org.uk
Papyrus Helpline	<ul style="list-style-type: none"> A national UK strategy aimed at the prevention of young suicide www.papyrus-uk.org HOPELineUK 0800 068 41 41
SelfHarm.co.uk	<ul style="list-style-type: none"> SelfharmUK is a project dedicated to supporting young people impacted by self-harm. It provides a space to talk, ask any questions and be honest about what's going on in their life www.selfharm.co.uk
Epic friends	<ul style="list-style-type: none"> Advice for young people on ways to help friends who may be self-harming www.epicfriends.co.uk
Lifesigns	<ul style="list-style-type: none"> An online, user-led voluntary organisation, which aids understanding of self-injury and provides information and support to people of all ages affected by self-injury www.lifesigns.org.uk
Childline	<ul style="list-style-type: none"> Trained counsellors who can talk to anyone aged under 19 about any issue they are going through www.childline.org.uk/
Family Lives	<ul style="list-style-type: none"> A charity which supports parents with all aspects of family life www.familylives.org.uk/about/
The Wish Centre	<ul style="list-style-type: none"> A charity providing advice and online support for young people to support recovery from self-harm, violence, abuse and neglect www.thewishcentre.org.uk
The Anna Freud Centre	<ul style="list-style-type: none"> Resources for schools, staff, pupils and families about managing their mental health. www.annafreud.org
SHOUT	<ul style="list-style-type: none"> Text service open 24/7 text SHOUT to 85258
Charlie Waller	<ul style="list-style-type: none"> Mental Health resources for children and young people from www.charliewaller.org



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Information and contacts

Resource/service	Contact information
Support for staff (speak to your line manager to check if there is support available through your employer)	
Staff counselling service for all schools	<ul style="list-style-type: none"> • www.educationsupport.org.uk have a fee helpline and can assist with financial support
GP	<ul style="list-style-type: none"> • For additional support or referral to counselling/mental health services, please contact your GP
Support resources for adults/parents who are self-harming	
GP	<ul style="list-style-type: none"> • Local GPs should be able to point towards appropriate help services/resources
Mind	<ul style="list-style-type: none"> • Provides advice and support to anyone experiencing mental health problems www.mind.org.uk
NHS choices	<ul style="list-style-type: none"> • Information and support services for those who self-harm http://www.nhs.uk/conditions/self-injury/Pages/Introduction.aspx

Let's Talk



Appendices

Appendix 1: Leaflet for young people about self-harm

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'.



Click PDF icon to open Young Persons Leaflet.pdf

Appendix 2: Leaflet for parents and carers about self-harm



Click PDF icon to open Parents Leaflet.pdf

Appendix 3: Templates for schools to use



Click PDF icon to open Letter Template for schools.pdf



Click PDF icon to open Template Self Harm Incident Recording Form.pdf

All PDF appendices need to be approved ... once they have been approved and hosted online please send me with an online link address so I can assign a rollover button/area on the final toolkit PDF

Appendix 4: What do we know about self-harm in Essex: presentation

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'



Click PowerPoint icon to open Self Harm in Essex.ppsx

Once this toolkit has been approved we can work on the Powerpoint document. If you could provide an order /slide numbers with which content you require on each slide, thanks