



# BEIS YAAKOV JEWISH HIGH SCHOOL ACADEMY

## SELF-HARM POLICY AND PROCEDURES

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Signed by Chair of Committee	

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## **1. Introduction**

The Governors and leadership at BYJHS Academy (BYJHS) recognise the importance of safeguarding children and play a full and active part in protecting them from harm.

In developing the Self-Harm Policy and Procedures, due consideration has been given to the BYJHS Safeguarding and Child Protection Policy and the Salford Safeguarding Children Board (SSCB) Procedures.

We believe that our school should provide a caring, positive, safe and stimulating environment, which promotes the social, physical, emotional and moral development of each pupil.

Self-harm is an emotive and challenging issue for all concerned. Self-harm can affect people from all family backgrounds, religions and cultures. School staff can play an important role in preventing self-harm and also in supporting pupils who are engaging in self-harm behaviours, their peers and parents. Self-harm can be a short term behaviour that is triggered by particular stresses and resolves fairly quickly or it may be part of a long term pattern of behaviours that are associated with more serious emotional/mental health issues.

School staff should be aware that, where there are multiple underlying risk factors, the likelihood of further self-harm is greater.

## **2. Linked Policies**

Safeguarding and Child Protection Policy.

Health and Safety Policy.

Visits and Trips Policy

Restraining Policy

## **3. Aims of the Self-Harm Policy**

- To increase understanding and awareness of self-harm throughout the school.
- To ensure the whole school is aware of the policy and procedures.
- To help all pupils improve their self-esteem and emotional literacy.
- To look at ways of preventing self-harm from spreading within the school. (Contagion effect)
- To alert staff to warning signs and risk factors relating to self-harm.
- To provide support to pupils who self-harm, their peers and parents.
- To provide support to staff dealing with pupils who self-harm.

#### **4. Definition of Self-Harm**

Self-harm is any deliberate behaviour where the intent is to deliberately cause harm to one's own body. People self-harm to cope with emotional distress or to communicate that they are distressed. There are multiple factors that can motivate someone to self-harm including emotional distress, a desire to escape an unbearable situation, to reduce tension, to induce guilt or in some cases to increase caring attention from others.

#### **5. Examples of Self-Harm Behaviours**

There are many types of self-harm or self-injury, which can include:

- Cutting, scratching, biting, scraping or picking skin.
- Hair pulling (this can include eyelashes and eyebrows ).
- Swallowing hazardous materials or substances.
- Burning or scalding.
- Banging or hitting the head or other parts of the body.
- Scouring or scrubbing the body excessively.
- Punching, hitting, bruising
- Risk taking behaviour e.g. unsafe behaviour, substance misuse, running in front of moving vehicles.
- Taking an overdose of prescription or non-prescription drugs or under medicating, particularly in relation to prescribed medications e.g. misuse of insulin.
- Episodes of alcohol/drug abuse or over/under eating at times may also be a deliberate act of self-harm

#### **6. Risk Factors**

Children and young people often cannot explain why they self-harm. However, the following risk factors, particularly in combination, may make children and young people vulnerable to self-harm.

Individual factors:

- Depression/anxiety
- Poor communication skills
- Low self esteem
- Poor problem-solving skills
- Hopelessness
- Impulsivity
- Drug or alcohol abuse.

Family factors:

- Unreasonable expectations
- Neglect or abuse (physical, sexual or emotional)
- Poor parental relationships and arguments
- Depression, deliberate self harm or suicide in the family

Social factors:

- Difficulty in making relationships/loneliness
- Persistent bullying or peer rejection
- Easy availability of drugs, medication or other methods of self harm.

A number of factors may trigger the self harm incident, including

- Family relationship difficulties
- Difficulties with peer relationships
- Bullying
- Significant trauma
- Self-harm behaviour in other pupils or friends outside of the school setting.
- Difficult times of the year
- Trouble in school or with the police
- Feeling under pressure to conform
- Exam pressure
- Times of change

## **7. Warning Signs**

School staff are often in the best position to witness the warning signs which may indicate a pupil is experiencing difficulties that could lead to thoughts of self-harm or suicide. If staff are able to identify the warning signs, they can also play a key part in helping the pupil to begin the process of breaking the cycle of self-harm.

Possible warning signs include:

- Increased isolation from friends or family, becoming socially withdrawn.
- Lowering of academic achievement.
- Changes in appearance, wearing different clothing, changing image
- Accessing information on-line relating to self-harm including forums, YouTube.
- Reluctance to take part in activities when arms and or legs would be visible.
- Changes in eating/sleeping
- Changes in activity and mood e.g. more aggressive or introverted than usual.
- Talking or joking about self-harm or suicide.
- Abusing drugs or alcohol.
- Expressing feelings of failure, uselessness or loss of hope.
- Displaying evidence of self-harm e.g. cuts to forearms or head banging.

## **8. The Cycle of Self-Harm.**

If a person inflicts pain on themselves, their body produces endorphins. These are natural pain relievers and can give temporary relieve from distress and induce a feeling of peace.

This can become an addictive sensation which in turn makes it difficult for the person to stop the self-harm behaviours. Self-harming can cause physical pain but the person may report that this is easier to manage than the emotional pain which led to the self-harm in the first instance. The cycle also results in the person feeling a sense of shame or guilt. Within the school setting staff can encourage a pupil who is self-harming to replace the self-harm behaviours with safer/coping activities.

## **9. Management of the Contagion Effect**

Staff who have been made aware that a pupil is self-harming must remain vigilant in case their peers are also self-harming. Self-harm can become an acceptable way of dealing with stress and anxiety within a friendship group and can enable pupils to have a sense of identity.

Each individual pupil may have a different reason for self-harming and pupils should generally be given the opportunity for one-to-one support. In some cases, SLT may decide in discussion with other professionals e.g. Designated Safeguarding Lead (DSL) and psychologists, that open discussions with the friendship/peer group about self-harm may be helpful in some instances.

## **10. Staff Roles and Responsibilities when Working with Pupils who Self-Harm**

Pupils may choose to confide in a member of school staff if they are concerned about their own health and wellbeing, or that of a peer.

If a pupil approaches a member of staff they should listen to them in a non-judgemental way.

It is important to maintain a supportive and open attitude to a pupil who has chosen to discuss their concerns with a member of staff and is showing a considerable amount of courage and trust.

For further advice on how to speak with a young person who has disclosed they or a friend are self-harming, please refer to Appendix 1, Do's and Don'ts.

The pupil needs to be made aware that it will not be possible for the member of staff to offer complete confidentiality. The information will need to be shared on a "need to know" basis. Staff may be concerned that this will prevent the pupil from continuing to share their concerns but it is vitally important for them to know what will happen to any information they do share.

With regards to any incidents of self-harm one of the initial judgements made by the member of staff who the pupil has approached must be whether the pupil requires first aid treatment.

If this is the case see: Management of First Aid.

If first aid is not required the member of staff who is aware of a pupil engaging in or suspected to be at risk of engaging in self-harm them should consult with the DSL as soon as possible and importantly before the pupil leaves the school site.

The DSL is:

Rabbi N Wilson

In the absence of the DSL, staff should inform one of the Deputy DSLs (DDSL):

Mrs E Levy, Mrs B Lopian.

The information should be recorded and should include any comments made by the pupil (verbatim). This report should be given directly to the DSL who will ensure the policy and procedures are followed.

School staff may experience a range of feelings in response to a pupil who is self harming such as sadness, shock, disbelief, guilt, helplessness, disgust, anger and rejection. The member of staff will be supported and if appropriate given time to compose themselves before returning to their normal duties.

The Self-Harm Care Pathway summarises the process – Appendix 2

## **11. Management of First Aid**

If the young person requires first aid they must be seen immediately, and support should be requested from a First Aider. They will assess any injuries and provide appropriate treatment if the injuries are minor.

In the case of an acutely distressed pupil, their immediate safety is paramount and a member of staff should remain with them at all times.

In the case of a serious injury or possible drugs overdose the pupil must be sent to hospital via ambulance and parents informed. In a situation where school staff believe that informing parents may place the pupil at further risk of harm, this decision must be recorded and a member of staff should accompany the pupil to hospital .

## **12. Roles and Responsibilities of the DSL and DDSL**

The DSL and DDSL are responsible for:

- Increasing understanding about self-harm among students and taking any steps they see necessary to help proactively prevent pupils getting into self-harm
- Ensuring that staff are able to identify possible signs of self-harm, know how to respond in supporting the pupil and are clear on the procedures for reporting to the DSL/DDSL.
- Following up reports of self-harm and cause for concern about possible self-harm and taking the lead for the support of and management of those pupils who self-harm.

Following a report of self-harm concerns, the DSL/DDSL will decide on the appropriate course of action. Each case will be considered on an individual basis and the actions taken may include all or some of the following:

- Immediately removing the pupil from lessons if their remaining in class is likely to cause further distress to themselves or their peers.
- Discuss the concerns with the pupil in an appropriate venue. (For further advice on how to speak to a pupil who has disclosed that they or a friend are self-harming, please refer to Appendix 1, Do's and Don'ts.
- Ensure the pupil understands the limits of confidentiality and this should include a discussion about the need to inform other agencies
- Provide accurate information with regards to signposting for National Support Helplines/ websites, crisis telephone numbers - Appendix 4 and include Information on Self-Harm for Young People – Appendix 5.
- Be clear how often and for how long they are going to see the pupil, ensuring that boundaries are clear and the pupil learns to take responsibility for their self-harm.
- Discuss with the pupil the importance of informing parents in order for them to provide support, this discussion should allow the pupil to share any fears they may have about this disclosure.
- Following the discussion with pupil, inform parents, unless it places the pupil at further risk of harm, in which case staff should refer to Safeguarding and Child Protection Policy.
- In all cases they will make a professional judgement as to whether parents should be informed of the self-harm and record their decision including the pupil's views. However, if the young person requires emergency medical assistance e.g. following a drugs overdose or significant injury, school staff, in most cases, would immediately inform parents. In all cases where school staff make the decision not to inform parents this must be recorded.
- The school recognises that in some case it may be appropriate to allow the pupil time to speak to their parents about their self-harm prior to the school making contact. It may then be helpful to invite the parents in to school to discuss concerns. A multi agency meeting should be considered, where completion of a Common Assessment Framework would be discussed.

- Advise and encourage the pupil/ parents to seek support from their GP who may refer them to a more specialised service, Child and Adolescent Mental Health Service (CAMHS).

Any meetings with the pupil, their parents/carers or their peers regarding self-harm should be recorded in writing including:

- Dates and times
- Any action plans
- Concerns raised
- Details of any conversations or meetings with other agencies / professionals. Information sharing is essential if the young person is to receive the appropriate support.

This information should be shared in school on a “need to know” basis only and the pupil should be made aware of the staff who have been provided with the information.

### **13. Increasing understanding and awareness throughout the school**

It is important to encourage pupils to inform a member of staff if one of their friends or peers is in upset or showing signs of self-harming. Friends can worry about betraying confidences, they need to know that self-harm can be very dangerous and that by seeking help and advice for a friend they are taking responsible action and being a good friend. They should also be aware that they will be treated in a caring and supportive manner.

The peer group of a pupil who self-harms may value the opportunity to talk to a member of staff either individually or in a small group see: Management of the Contagion Effect.

### **14. Suicidal Thoughts**

People who self-harm are at increased risk of future suicide. Additionally, death can occur as the result of an accident or miscalculation of the risks of the self-harming behaviour.

All talk of suicide must be taken seriously and where possible a member of staff trained in Youth Mental Health First Aid and Safetalk should speak with the pupil using the Safetalk techniques. The pupil should remain with a member of staff at all times in a safe environment.

Appropriate help and intervention must be offered at this point. The priority is to safeguard the pupil and in most cases school staff would contact parents and advise them to seek urgent medical advice from GP and /or Contact Point (CAMHS)

unless they believed that by doing so it would put the pupil at further risk (in which case, they should follow the procedure referred to above). The DSL would also consider a referral to the Bridge Partnership/ MASH - Children and Young Peoples Safeguarding and Support Services and / or Contact Point.

Where the decision is made not to contact parents, school staff must seek advice from these agencies before the pupil leaves the school site.

### **15. Responsibilities of the Pupil who is Self-Harming**

Pupils who self-harm need support from school staff but with the appropriate help they must learn to take responsibility for their own self-harm

- The pupil must be discrete
- They must cover wounds and where possible any scars
- They must not bring dangerous objects in to school which could inflict injury on themselves or others.
- They must follow any action plan and speak with the appropriate (named) member of staff if they are in emotional distress.
- They must not encourage others to self-harm.

### **16. Responsibilities of Parents**

Working in partnership with parents/carers is a key to supporting the pupil who is self-harming. Parents would be expected to:

- Support the school's approach to self-harm education of the whole school community and pastoral care.
- Work in partnership with the school and any other relevant agencies.

### **17. Monitoring and Evaluation**

It can be difficult to measure outcomes in relation to self-harm but keeping the pupil safe is the prime aim of any support. Encouraging engagement with key services is also vital. Feedback from the pupil and parents as to how the self-harm has been dealt with allows staff to ensure their wellbeing needs are being met.

## Appendix 1

### DOs and DON'Ts: Advice for Staff

- DO stay calm and do not show anxiety, disapproval or disgust. Be prepared to be shocked, then.....
  - DO listen to the pupil, just being listened to can be a brilliant support and bring great relief to someone; particularly if they have never spoken to anyone about their self-harming before.
  - DO make it clear that you cannot guarantee confidentiality.
  - DO calmly ask any relevant questions, – try and build rapport with the pupil, whilst you ascertain what is happening for them.
  - DO observe the pupil's non-verbal clues, look at their body language, does what they say and what you see match up? What is the underlying mood state, is it anger? sadness? Frustration?
  - DO reassure the pupil, they need to know that they will be supported.
  - DO report the self-injury to the DSL or a member of the SLT
- 
- DON'T Panic, self-harm is a complex issue and each pupil will have a different reason or story behind their behaviour – panicking will not help the pupil feel safe and contained.
  - DON'T send the pupil away – make some time for them – either help them find other ways of coping or support them in getting the right kind of support.
  - DON'T be judgemental - you must keep an open mind about the behaviour and don't refer to it as "attention seeking".
  - DON'T work alone: you may still see a pupil alone, but you will need to offload with an appropriate colleague and discussing with a professional from another agency can be helpful.
  - DON'T give them your mobile number or begin texting the pupil. It is more appropriate and professional for you to help the pupil identify their supportive network, than for you to take this upon yourself.

Self-harming behaviours can be extremely concerning, but you cannot offer objective support when enmeshed within the pupil's difficulties.

## **Appendix 2: Self-Harm Care Pathway**

What you should do if you discover a young person is self-harming:

- In all cases listen to pupil and follow Do's and Don'ts-Appendix 1
- First Aider to assess whether pupil requires emergency care.

If the pupil does not require emergency care:

- Inform DSL immediately
- Provide written notes on your conversation with the pupil and any other relevant information
- Discussion with pupil, provide advice sheet,

If pupil requires emergency care,

- Call 999 if necessary
- DSL to be informed—
- Consider informing parents/carers, (see: Roles and Responsibilities of DSL)
- If it safe to inform parents/carers, they must be informed as soon as possible
- Consider allowing pupil to inform parents/carers of self-harm prior to school staff speaking to parents/carers.
- If it is not safe to inform parents/carers, DSL to consider child protection referral
- DSL to provide relevant advice and liaise with parents and other professionals re: on-going support for pupil.
- All relevant documentation to be completed as soon as possible after incident.

## **Appendix 3: Checklist for Self-Harm Procedures & Practices**

<b>BYJHS: Checklist for supporting the development of effective practice</b>	
Date:	
<b>Policy and procedures</b>	
The school has a policy or protocol for supporting pupils who are self-harming or at risk of self-harming.	
The school governors have approved this policy.	
<b>Staff training</b>	
All new members of staff receive an induction on child-protection procedures and setting boundaries around confidentiality.	
All members of staff receive regular training on child-protection procedures.	
The following staff groups – office staff, first-aid staff, technicians, lunchtime supervisors – receive sufficient training and preparation for their roles.	
The DSL and deputies have access to training in identifying and supporting pupils who self-harm.	
<b>Communication</b>	
The school has clear open channels of communication that allow information to be passed up, down and across the system.	
All members of staff know to whom they can go if they discover a pupil who is self-harming	
The Senior Leadership Team is fully aware of the contact that reception, first aiders and lunchtime supervisors have with pupils and the type of issue they may come across.	
Time is made available to listen to and support the concerns of staff members on a regular basis.	
<b>Support for staff/students</b>	
Staff members know how to access support for themselves and pupils.	
Pupils know to whom they can go for help.	
<b>School ethos and culture</b>	
The school has a culture that encourages pupils to talk and adults to listen and believe.	

#### **Appendix 4: Local and National Help and Advice**

#### CHILDLINE:

24hrs helpline for children and young people under 18 providing confidential counselling.

0800 1111

[www.childline.org.uk](http://www.childline.org.uk)

#### PAPYRUS:

Offers a helpline to give support, practical advice and information to anyone who is concerned that a young person may be suicidal.

0870 170 4000

[www.papyrus-uk.org](http://www.papyrus-uk.org)

#### NCH

Provides family centres, child abuse treatment services, leaving care projects, respite etc.

Counselling for families and children.

020 7704 7000

[www.nch.org.uk](http://www.nch.org.uk)

#### NATIONAL SELFHHELP NETWORK

Support for people who self-harm, provides free information pack to service users.

[www.nshn.co.uk](http://www.nshn.co.uk)

#### SAMARITANS

Confidential emotional support for anybody who is in crisis.

08457 90 90 90

[www.samaritans.org.uk](http://www.samaritans.org.uk)

#### YOUNG MINDS

Information on a range of subjects relevant to young people and their emotional health and wellbeing

0808 8025544

[www.youngminds.org.uk](http://www.youngminds.org.uk)

MIND

Information about all aspects of mental health

0300 123 3393

[www.mind.org.uk](http://www.mind.org.uk)

Royal College of Psychiatrists

Information for everyone which aims to improve the lives of those with mental health issues.

[www.rcpsych.ac.uk](http://www.rcpsych.ac.uk)

NHS

Information and advice on all aspects of health

[www.nhs.uk](http://www.nhs.uk)