

Centre Academy East Anglia

Self-Harm Policy

Equality Statement

Centre Academy East Anglia is committed to a policy of equality and aims to ensure that no employee, job applicant, pupil or other member of the school community is treated less favourably on grounds of sex, race, colour, ethnic or national origin, marital status, age, sexual orientation, disability or religious belief. We provide a safe, supportive and welcoming environment

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Signed by Chair of Proprietor Body

Signed: Date: 10/01/25

Chair of Proprietor Body Mr R Murphy

Centre Academy East Anglia is committed to safeguarding and promoting the welfare of children and young people and expects all staff to share this commitment.

Introduction

Self-harm describes any way in which a young person might harm themselves or put themselves at risk in order to cope with difficult thoughts, feelings or experiences. Recent research indicates It affects up to 1 in 5 young people and spans the divides of gender, class, age and ethnicity. This figure is higher amongst specific populations, including young people with special educational needs.

School staff at CAEA can play an important role in preventing self-harm and also in supporting students, peers and parents of students currently engaging in self-harm.

Scope

This document describes CAEA approach to self-harm. This policy is intended as guidance for all staff including non-teaching staff and governors. This policy should be read in conjunction with the Child Protection and Safeguarding Children Policy.

Aims

As a school we have a responsibility to meet the needs of our students, and it is important that we all know how to best approach the issue of self-harm. This policy aims to:

- Increase understanding and awareness of self-harm
- Alert staff to warning signs and risk factors
- Provide support to staff dealing with students who self-harm
- Provide support to students who self-harm and their peers and parents/carers

Definition of Self-Harm

Self-harm is any behaviour where the intent is to deliberately cause harm to one's own body for example:

- Cutting, scratching, scraping or picking skin
- Swallowing inedible objects
- Taking an overdose of prescription or non-prescription drugs
- Swallowing hazardous materials or substances
- Burning or scalding
- Pulling out hair or eyelashes
- Banging or hitting the head or other parts of the body
- Scouring or scrubbing the body excessively
- Biting parts of the body
- Under medicating (Insulin)

Risk Factors

Self-harm can also be linked to high-risk behaviours including:

- Controlled eating patterns such as anorexia, bulimia or overeating
- Indulging in high-risk behaviours such as car dodging
- Indulging in high-risk sexual behaviours
- Destructive use of alcohol or drugs
- Suicidal ideation or attempts
- Unwanted emotions such as anger and frustration can be reasons for self-harm, which
 provides an unhealthy but often cathartic release for pent up feelings. In the autistic
 community self-harm can also become a fixed pattern of behaviour, or a way for a
 young person to show others how they feel.

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

Individual Factors:

- Depression / anxiety
- Poor communication skills
- Low self-esteem
- Poor problem-solving skills
- Hopelessness feeling overwhelmed and without any control of their situation.
- Impulsivity
- Drug or alcohol abuse
- Frequency of thoughts and actions
- The need for control
- Eating disorders
- Feeling powerless
- Having a friend who self-harms

Family Factors

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

Social Factors

- Difficulty in making relationships / loneliness
- Being bullied
- Feeling rejected by peers
- Feeling under pressure due to school or exams
- Feeling the need to socially conform
- Exposure to self-harm via social media

Potential Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing difficulties that may lead to thoughts of self-harm or suicide. These warning signs should always be taken seriously and staff observing any of these warning signs must share their concerns with the Designated Safeguarding Lead or the Deputy Designated Safeguarding Lead.

Possible warning signs include:

- Changes in eating / sleeping habits (e.g. student may appear overly tired if not sleeping well)
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in behaviour
- Changes in activity and mood e.g. more aggressive or introverted than usual
- Lowering of academic achievement
- Talking or joking about self-harm or suicide
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Changes in clothing e.g. becoming a goth

Those who are most likely to harm themselves badly:

- Use a dangerous or violent method of self-harm
- Self-harm regularly
- Are socially isolated
- Have a psychiatric illness

Staff Roles in working with students who self-harm

Students may choose to confide in a member of school staff if they are concerned about their own welfare, or that of a peer. School staff may experience a range of feelings in response to self-harm in a student such as anger, sadness, shock, disbelief, guilt, helplessness, disgust and rejection. However, in order to offer the best possible help to students it is important to try and maintain a supportive and open attitude – a student who has chosen to discuss their concerns with a member of school staff is showing a considerable amount of courage and trust.

Students need to be made aware that it may not be possible for staff to offer complete confidentiality. **If you consider a student is at serious risk of harming themselves then confidentiality cannot be kept**. It is important not to make promises of confidentiality that cannot be kept even if a student puts pressure on you to do so.

Any member of staff who is aware of a student engaging in or suspected to be at risk of engaging in self-harm should consult the Designated Safeguarding Lead (DSL) or Deputy DSL for safeguarding children. All incidents of self-harming should be reported as a matter of urgency.

Following the report, the DSL/Deputy DSL will decide on the appropriate course of action. This may include:

- Contacting parents / carers
- Arranging professional assistance e.g. CAMHS, doctor, nurse, social services
- Arranging an appointment with a counsellor
- Immediately removing the student from lessons if their remaining in class is likely to cause further distress to themselves or their peers
- In the case of an acutely distressed student, the immediate safety of the student is paramount and an adult should remain with the student at all times
- If a student has self-harmed in school a first aider should be called for immediate help

Further Considerations

Any meetings with a student, their parents or their peers regarding self-harm should be recorded in writing including:

- Dates and times
- An action plan
- Concerns raised
- Details of anyone else who has been informed,
- Check whether a referral to CAMHS or a GP has been made previously
- Reassess regularly by the DSL

This information should be stored in the student's child protection file.

It is important to encourage students to let you know if one of their group is in trouble, upset or showing signs of self-harming. Friends can worry about betraying confidences so 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 & being a good friend. They should also be aware that their friend will be treated in a caring and supportive manner.

The peer group of a young person who self-harms may value the opportunity to talk to a member of staff either individually or in a small group. Any member of staff wishing for further advice on this should consult the DSL. We encourage students to report fellow students if they think they are at risk of self-harming or of suicide by speaking to a member of staff.

When a young person is self-harming it is important to be vigilant in case close contacts with the individual are also self-harming. Vigilance is required from all members of staff and any concerns must be raised with the DSL.

We encourage parent carers and families to work in partnership with the school and share any information about their daughter's self-harming behaviours at home and to support the school's policy on self-harm.

Young people can be directed to helpful websites such as:

- https://www.nsft.nhs.uk/community-services/service/child-and-adolescent-mental-health-service-camhs-learning-disability-community-service-in-east-and-west-suffolk-111/
- www.norfolk.gov.uk/camhs
- www.kooth.com
- http://www.nshn.co.uk/downloads/Advice for young people.pdf
- www.childline.org.uk
- www.youngminds.org.uk
- https://www.map.uk.net/get-help/mental-health-and-wellbeing/
- https://www.selfinjurysupport.org.uk/Pages/Category/self-help-resources
- https://www.selfharm.co.uk/
- www.harmless.org.uk
- http://epicfriends.co.uk/
- www.neurolove.org
- www.lifesigns.org.uk
- www.recoveryourlife.com

And apps:

- https://calmharm.co.uk/
- http://self-healapp.co.uk/
- https://www.nhs.uk/apps-library/distract/
- https://www.nhs.uk/apps-library/chill-panda/
- https://www.nhs.uk/apps-library/meetwo/
- https://www.nhs.uk/apps-library/thrive/
- http://www.self-healapp.co.uk/