



Self Harm Policy September 2019

Date of Policy	1 st September 2019
Review Date	September 2021
SLT Link	Designated Safeguarding Lead
Governing Body Link	Boarding Governor

We believe that all children and young people should have the same protection regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity. We are committed to anti-discriminatory practice and recognise the additional needs of children from minority ethnic groups and disabled children and the barriers they may face, especially around communication.

Signed

Helen Cullen
Headteacher

Date 01 September 2019

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SEXEY'S SELF HARM POLICY

School Ethos and Values

Our Christian values are at the heart of the ethos of the school and through these we grow individually and as a community. The Story of the Good Samaritan underpins our 7 core values of:

- Honesty
- Forgiveness
- Empathy
- Courage
- Resilience
- Kindness
- Respect

These core values underpin our policies, procedures and the way we treat one another in our community.

1. AIM

This policy sets out clear guidelines on the school's procedures for dealing with those who self-harm whilst the student is in school and is for students, their parents/carers and staff. It is consistent with Sexey's School's overall approach to promoting positive social and emotional well-being for students in school and tackling mental health problems of students in more serious difficulty (see Mental Health Policy).

2. SELF HARM

Self Harm is a term used when someone injures or harms him or herself on purpose (also called self injury or deliberate self-harm) rather than by accident. Common examples include cutting, hitting, scratching or burning. People self-harm for a number of reasons which include managing difficult emotions, very low self-esteem or because of an underlying mental health issue.

It is thought that around 13% young people may try to hurt themselves on purpose between the ages of 11 and 16 (NICE, 2011)

3. RAISING A CONCERN

If a student wishes to disclose that they self-harm they can approach any member of staff that they are comfortable talking to. This member of staff will record what they are told on MY CONCERNS and inform the DSL or a member of the Safeguarding Team.

4. CHAIN OF ACTION WHEN A CONCERN IS RAISED

- The student is spoken to regarding the concern by their House parent, Head of Boarding, Health Centre staff or member of the Safeguarding Team.
- Appropriate First Aid will be administered. If necessary, medical advice will be sought regarding wound healing and measures to prevent infection.
- The student is encouraged to discuss their self-harm with their parent /carer. Where a student is deemed to be at serious risk parents / carers are informed, preferably

with the student's consent. Where appropriate the nominated member of staff will disclose information without the student's consent.

- Parents /carers are recommended to seek consultation with their family GP and to inform the school of the outcome within 72 hours of that consultation. Alternatively a GP approach will be made at Bruton Surgery.
- The student will be offered counselling in school by a qualified and independent counsellor.
- In situations of extreme concern the school is also able to refer directly to CAMHS (Child and Adolescent Mental Health Services)
- The Director of Boarding (boarder or Pastoral Manager (day) will write an Individual Care Plan (ICP) and meet with and monitor the student's progress.
- The same nominated staff member will ensure follow-up meetings or telephone appointments are arranged between themselves and the parents/carers so that progress can be assessed and communicated.

When a disclosure is made by a friend, the member of staff hearing that disclosure should record what they are told on MY CONCERNS and inform the Designated Safeguarding Lead or a member of the Safeguarding Team. The above chain of action will then be initiated.

Where a member of staff suspects self-harm they should record it on MY CONCERNS with as much information as possible and alert the Designated Safeguarding Lead. The above chain of action will then be initiated.

5. PREVENTING THE SPREAD OF SELF-HARM WITHIN THE SCHOOL

- Wounds, injuries and scars should not be openly displayed
- Provision of long-sleeved PE kits may be necessary for those who self-harm
- Timetable changes, such as suspension from lessons that require self-harm to be revealed to others (for example PE) are likely to occur
- Any student bringing implements that are used to cause self-harm (razors, blades etc.) to school may have these items confiscated.
- Based on medical feedback, the suitability of the student to attend school either as a Day or Residential Boarder will be assessed
- Continued education via the PSHE curriculum and other means on the fact that self-harm is an expression of distress rather than a behaviour that should be 'tried out'
- Communication to parents of the year group (without naming names) may occur so that parents can monitor their children

6. SELF-HARM WITH SUICIDAL INTENT

In the case of self-harm with suicidal intent, immediate steps will be taken to inform the Designated Safeguarding Lead, the parents and the G.P and the student's attendance at school is reviewed after medical feed-back and continued support is established.

7. SCHOOL NURSE, DOCTOR AND COUNSELLOR CONFIDENTIALITY

In accordance with the School Nurses', Doctor's and Counsellors' professional obligations, the School Nurses, Doctor and Counsellors will respect a student's confidence except on the very rare occasions when, having failed to persuade that student, or his or her

authorised representative, to give consent to divulgence, the doctor or nurse considers that it is in the student's better interests or necessary for the protection of the wider school community, to breach confidence and pass information to a relevant person or body.

8. COMPLAINTS

Any complaints about any aspect of the implementation of this policy should be addressed through the School's complaints procedure.

9. MONITORING

This policy will be reviewed by the Designated Safeguarding Lead on a 2 Yearly basis.