



Salford City Academy

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Salford City Academy

Self-Harm Policy

2020 – 2021



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Last reviewed:	30th September 2020
Next review due:	30th September 2021
Approved by:	Chris Leader

Preventing Self Harm

1. Principle

During their schooling, some students may be at risk of harming themselves. This harm may occur with or without suicidal intent; or may be symptomatic of, or associated with, a known medical condition or intellectual disability.

2. Objective

The protection of students and preventing students from self harm: Threats of self-harm by a student should be taken seriously and reported to the Child Protection Officer immediately. It is much safer to be cautious and act on the concern than to do nothing.

3. Purpose

This policy sets out indicators for self-harm and general procedures for staff who become aware of or suspect a student is experiencing indicators of self-harm.

4. Self-harm as a symptom of a medical condition or intellectual disability

The policy includes procedures which shall be communicated to all staff members, students and parents.

The policy will be placed on the Academy website.

All staff will be expected to comply with this policy.

4a Self-harm with suicidal intent – Indicators of Harm

Youth suicide rates in the UK are among the highest in the industrialised world. Common risk factors include:

- Previous attempts at suicide
- Depression

- Drugs and alcohol abuse

- Conduct disorder
- Relationship conflicts
- Poor coping skills
- Psychiatric illnesses

- Copycat behaviour after an incident of self-harm by another person

Other risk factors include

- Recent bereavement
- Chronic physical illness

- Anniversary phenomenon (of past losses or major life events)
- Early loss experiences
- School failure

- Perfectionism and over-achievement as a result of students having high expectations of themselves

4c Procedures

- Any staff member who becomes aware of, or suspects, a student is experiencing significant psychological distress, should report the information to the Child Protection Officer immediately.
- In case of an acutely distressed student, the immediate safety of the child is paramount.
- A staff member should ensure the immediate safety of the student, arrange for an adult to be with the student at all times and then report concerns to the Child Protection Officer.
- This should be followed by a written report on the standard form.
- Staff should note, that while it is important to support a student, they should be careful not to substitute support for professional help.
- Following a report the CP officer will meet with the distressed student, to conduct an initial assessment and determine an appropriate course of action.
- The Child Protection will notify the student's parents, and, in conjunction with the parents, make arrangements for access to professional assistance.

5. Self-harm without suicidal intent – Indicators of Harm

Not all cases of self harm relate to suicidal intent. Students may engage in a variety of high risk behaviours.

5a Procedures

- All school staff are expected to act to prevent all high risk behaviours occurring within the Academy, and support any other interventions undertaken to reduce the risk of such behaviours occurring outside the Academy.
- Staff who are aware that a student is engaging in, or is at risk of engaging in, high risk activities should consult with the Child Protection Officer for further advice.
- A written report should follow on the standard form.
- Following the report the Child Protection Officer will consult with the student to determine what course of action should occur.

5b Possible actions include

- Contacting parents.
- Arranging professional assistance
- Consulting with the Children's Services Directorate
- Contacting the police, where appropriate

6. Self-harm as a symptom of a medical condition or intellectual disability

- Where it is known that a student has a propensity to engage in self-harm that is symptomatic or associated with a known medical condition or intellectual disability, the Child Protection Officer, in cooperation with other qualified Academy staff and external treating professionals (where applicable) will devise an individual program of management to prevent or reduce the likelihood of the student engaging in self-harm at the Academy.
- The program will complement any other management procedures adopted outside the Academy setting to address the self harm behaviour.

Eating Disorders

7a. The role of the Academy

- There is a thin line between appropriate responsiveness and inappropriate intrusiveness into the personal lives of students and families.
- However, all staff must respond to their responsibility to ensure the well-being and welfare of all students
- Progress in school and educational success depends on this
- The goal of school is to detect and address problems in their earliest stages where they exist in thinking and attitudes related to self-image, self esteem and self-control.
- The importance of early intervention is stressed
- Intervention should be in the form of a referral to the named Child Protection Officer
- The goal in determining the existence of an eating disorder is simply to raise concerns with the appropriate member of staff
- Staff need to be alert and alert others
- Some eating disorders are mild and can be a passing phase

7b Procedures

- All concerns should be referred to Assistant Principal B& S (Child Protection Officer)
- No member of staff should discuss any issues with the student before a planning meeting has taken place between relevant staff
- The school nurse/doctor will then initiate the process of assessment and, if required, referral to the local Child and Adolescent Mental Health Service (CAMHS)
- The young person's GP will be sent a copy of the referral
- The Student will be involved in all discussions and consulted over any interventions
- Students will be encouraged to discuss school concerns with parents/carers
- The well-being of the student is paramount. If at risk of serious harm the school will act in the best interests of the student
- Whenever possible, the student will be offered counselling

7c Academy Staff

Academy staff will support any management plans/interventions made with the student and abide by the guidelines of the plans/interventions made with the student and abide by the guidelines of the plan.

7d Difficulties with early identification and intervention

Staff should be aware of the following:

- Eating disorders tend to be secretive and are associated with guilt and embarrassment
- Young people with eating disorders do not usually view themselves as ill, so consequently do not seek help
- If concerns are expressed, the young person often denies that they have a problem

- Although Anorexia Nervosa is more visible due to extreme weight loss, most young people with eating disorders are not significantly underweight and go unnoticed
- Adolescent peers might be aware of a problem, but feel they cannot approach an adult to expose their friend
- Young people can engage adults or peers in inappropriate supportive relationships using their desire for confidentiality as a way to prevent referral or involvement of their parents.

7e Academy staff will not be expected to diagnose whether a young person has an eating disorder

Eating Disorders are classified as mental illness and in severe cases young people can be admitted to hospital against their will by parental consent or after being detained under a section of the Mental Health Act.

- 8.** Staff will be informed of which pupils are self harming in a private and confidential Child Protection memorandum. This will ensure that staff can be particularly vigilant with the self harm cohort, and thus act accordingly with them.