

Self-harm

**A CAMHS designed management tool kit of
education and community settings**

Sept 18 / Wakefield CAMHS

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Aim of the toolkit

This toolkit is to support those working with young people 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 guidance 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

This toolkit has been developed in response to requests from schools, and is based on the work for the Southend, Thurrock and Essex children and young people's mental health transformation plan.

The focus of this guidance 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 guidance. Related guidance that is also relevant to this guidance are the local safeguarding policies. This guidance includes information about responding to self harm, however, as usual, in the event of a medical emergency, call 999.

1. What is self harm?

The phrase "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 of some kind. It's injuries that are caused on purpose that are considered to be acts of self-harm. Some of the things people do are quite well known, such as cutting, burning or pinching, but there are many, many ways to hurt yourself, including abusing drugs and alcohol or having an eating disorder. The bottom line is that anything that causes harm – even slight harm – which in some small way makes the person feel better emotionally, can fall under the umbrella of self-harm¹. Some people may call self harm "self injury".

Why do people self harm and who is at risk?

Why do people self-harm?

There are a range of different reasons why people self harm. Some common reasons include:

¹Definition adapted from Self Harm UK. Available online at: <https://www.selfharm.co.uk/get/facts/what-is-self-harm> (accessed 10/2/2017)

- **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 or unable to cope. 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 considered “attention seeking behaviour” - 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 keep people at bay.

Who self-harms?

Below 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. Young people with the protective factors listed may be less at risk of self harm. However some young people 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).

Risk factors		Protective factors
Characteristics of the individual child	<ul style="list-style-type: none"> • Low self esteem • Increasing age • Poor coping, communication or problem solving skills • Difficult temperament • Mental distress or illness, e.g. anxiety/depression • Alcohol/substance misuse • Impulsivity • Stress or worries about school work or peers • History of similar behaviour in the past • Past or current experience of abuse • Feeling isolated • Recent bereavement • Worries around sexuality • Chronic illness/disability 	<ul style="list-style-type: none"> • High self esteem • Higher ability/attainment • Outgoing personality • Good coping skills • Positive school experience • Secure attachment • Resilience • Knowledge of where to seek support
Features of the immediate context	<ul style="list-style-type: none"> • Access to means of causing self-harm • Being alone • Social exclusion • Alcohol and drugs 	<ul style="list-style-type: none"> • Access to social support • Social inclusion
Family Factors	<ul style="list-style-type: none"> • Family members who self-harm • Family conflict • Parental separation and divorce • Single parent family • Parental illness • Parental alcohol/drug misuse • Sexual/physical/emotional 	<ul style="list-style-type: none"> • Supportive adult relationship • Harmonious family relationships • Low level of material or social hardship • Good role models within family

	abuse or neglect <ul style="list-style-type: none"> • Poverty/low socio-economic status • Domestic violence • Pressure from family to achieve at school / unreasonable expectations 	
Peer group	<ul style="list-style-type: none"> • Arguments with friends • Bullying • Friends who self-harm • Loneliness / social isolation 	<ul style="list-style-type: none"> • Stable and secure friendship group
School/college	<ul style="list-style-type: none"> • Pressure from school to perform well 	<ul style="list-style-type: none"> • Supportive adult • Inclusive/incorporative ethos • Strong commitment to PSHE mental health promotion • Establishment of peer support systems
Wider culture and community	<ul style="list-style-type: none"> • Minority status • Problems in relation to race, culture or religion • Problems regarding sexual orientation or identity • Media portrayals glamorise self-harm or suicide 'victims' and elicit 'copy-cat' responses by vulnerable children and young people 	

Table adapted from: Self-harm and suicidal behaviour guide for staff working with children and young people, Hertfordshire Children's Trust Partnership, 2010.

Spotting the signs of self harm

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

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

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 than usual
- Lowering of academic grades
- Talking about self-harming or suicide
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Giving away possessions
- Risk taking behaviour (substance misuse, unprotected sexual acts)

Roles and responsibilities within schools

Headteacher	<ul style="list-style-type: none"> • 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 • Consider the need for PSHE as part of addressing 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, ensuring staff are aware of procedures to follow. Ensure all staff (including non teaching) are aware of and understand the policy • It is best practice to appoint one or more designated key staff to lead on emotional wellbeing (including self harm). • 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 • Nb. The Ofsted common assessment framework identifies students having "knowledge of how to keep themselves healthy, both emotionally and physically, including through exercising and healthy eating" as one of the criteria in the "personal development" section of the framework.
All staff and teachers	<ul style="list-style-type: none"> • Be aware of all self-harm guidance/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 a designated member of staff as soon as you become aware of it, and inform the pupil that you are doing this • Make it known to pupils that there are staff available to listen to them (and how they can be accessed) • Review the guidance about how to speak to young people about self-harm and confidentiality
Designated emotional wellbeing/safeguarding lead	<ul style="list-style-type: none"> • Ensure that all students know who the designated emotional wellbeing/ self harm lead is that they can talk to 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 guidance about coping with self harm • Ensure the implementation of the Self-Harm Policy • Maintain up to date records of pupils experiencing self-harm, incidents of self-harm, concerns surrounding the issue and support provided to students • Communicate with the Safeguarding Lead and/or Head teacher, and other key staff, on a regular basis and keep them informed of all incidents and developments

	<ul style="list-style-type: none"> • Ensure you are confident and up to date in your understanding of self-harm including training where required • Be aware of what organisations and key services in your area can support young people who self harm • Be aware of information sharing and confidentiality arrangements, including when it is essential to share information with other organisations • Inform the pupil'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
School governors	<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 • Be assured that students are aware of who they can talk to at the school around self harm and where to access leaflets and guidance around coping with self harm

Table adapted from: Practical guidance for schools – supporting the school's self harm policy. NHS Kernow 2015.

Responding to an incident/suspected incident of self harm

Discover or informed about self harm / suspected self harm

1. Deal with medical requirements

Actions:

- Locate pupil (if have not already)
- Is urgent medical attention required? (e.g. heavy bleeding/overdose/unconscious/suicidal?)
- If urgent medical attention required, call 999
- Administer first aid where required (as per school's first aid policy. Self-inflicted injuries should be treated with first aid as per the school's policy)
- Keep calm and be reassuring



2. Talk to young person and inform lead

Actions:

- Inform school safeguarding lead/ designated self harm or emotional wellbeing lead
- Talk to the young person to gather information (see prompt questions and information about talking to young people about self harm further on in this guidance)
- Explain confidentiality (see further on in this guidance)
- Discuss with young person options around speaking to parents (parental involvement should be encouraged unless clear indication not to do so as per safeguarding procedures)



3. Seek advice or referral from Wakefield CAMHS schools team or the Single Point of Access

Actions:

- If required, seek advice from your Future in Mind worker in schools (see further information on [page 11](#))
- Advice and referrals can be discussed with the Wakefield CAMHS single point of access on 0300 300 1600 (during working hours 9am - 5pm)
- If there is an immediate concern direct a family to the GP (9or out of hours support) or call 111 before attending A&E



4. Continue conversation, log incident and agree next steps

Actions:

- Log incident and inform school safeguarding lead/ designated self harm lead (see example incident recording form in Appendix 4)
- Continue talking to young person, it may be useful to share information with them (see useful contacts list and leaflet below)
- Discuss best course of action with colleagues (e.g. safeguarding lead/ designated self harm lead) and young person
- It may be useful to speak to the young person about what they find helps them cope with difficult emotions (see information about coping strategies [on p14](#))
- Agree any ongoing support that can be offered by the school with the young person
- Where appropriate, follow safeguarding procedures

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 young person about confidentiality as early as possible as it may affect their help seeking behaviour.
- This will include making the 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 wherever possible.
- 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. If decide not, need to document clearly rationale for doing so.
- Safety always takes priority over confidentiality, do not make promises about confidentiality you cannot keep.

- The conversation can consider what actions a young person can take to minimise risk e.g. talking to a positive friend, counselling or speaking to a school nurse
- 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 Wakefield district safeguarding policies which can be accessed at the Wakefield Safeguarding board website.

Advice and Referrals to Wakefield CAMHS

About CAMHS

The service is designed to meet a wide range of mental health needs in children and young people. These needs will include emotional well-being as well as more severe, complex and/or enduring mental health symptoms that are causing significant impairments in their lives.

Wakefield CAMHS is made up of a multi-disciplinary team that provides a range of evidence based interventions for children, young people and families.

Who can be referred?

All children and young people up to their 18th birthday who are registered with a GP within the Wakefield area (Wakefield, Castleford, Pontefract, Hemsworth) can be referred to the service where:

- There are concerns about their mental health and/or psychological well-being

And

- Where it can be demonstrated that they have received support from professionals in universal services / in-school 'Future in Mind' workers that has not helped to make sufficient improvement to their problems.

Or

- Their problems are at a significant level that means the referrer has strong evidence to indicate they need immediate access to assessment and treatment from mental health professionals.

Who can refer?

- GPs, paediatricians and other health workers e.g. public health nurse (school nursing), health visitor.
- Social workers
- Educational psychologists, Special Educational Need & Disability Team , Teachers / educational staff and Special Educational Needs Coordinators (SENCOs)
- Youth Offending Team, Substance misuse workers, third sector services

It is essential to meet with both the young person and parents/carers to gain consent for the Request For Service, explain the Request For Service process and complete initial screening. This will help to identify actual need and encourage attendance for appointments as young people and their families will fully understand the reason for Request For Service.

The Primary intervention team currently offer the following group work interventions:

- Anxiety and Distress tolerance skills
- Behavioural Activation for Low mood
- Self-Compassion and building Self-Confidence

Please refer to Wakefield CAMHS Request for Service Guidance document for further information, and to download the current Request for Service document, which can be found on our website <https://www.southwestyorkshire.nhs.uk/services/camhs-wakefield/>

Contact details

Please post to: CAMHS SPA, Flemming Court, Castleford, WF10 5HW

Ring: 01977735865 *to discuss a request for service with the SPA team.* **Fax to:** 01977 520877 if urgent

Email request for service will begin from November 2018

(emailed Request for Services **must** be via secure email i.e. NHS.net, GCSX, pnn.police.uk)

Dos and Don'ts for Talking to Young People about Self Harm

DO	DON'T
<input checked="" type="checkbox"/> Make time. Talk to the young person about their self-harming. Talking will not increase the chance that the young person will self-harm BUT not talking about it may make them feel unheard or alone	<input checked="" type="checkbox"/> Tell them to stop self-harming or give them an ultimatum
<input checked="" type="checkbox"/> Listen to what is being said and check your understanding	<input checked="" type="checkbox"/> Do not ignore self harm however superficial it may seem to you, or assume someone else is already helping them
<input checked="" type="checkbox"/> Respond with concern rather than anxiety or distaste	<input checked="" type="checkbox"/> Do not make judgements or promises you can't keep
<input checked="" type="checkbox"/> Be interested in them as a person not just someone who self-harms	
<input checked="" type="checkbox"/> Find out how they are feeling – are there ups and downs?	
<input checked="" type="checkbox"/> Are there underlying difficulties e.g bullying, difficulties in peer relationships, stress from exams, conflict at home	
<input checked="" type="checkbox"/> Ask about coping strategies - when are they most likely to self harm? What have they found helpful in distracting them?	
<input checked="" type="checkbox"/> 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	
<input checked="" type="checkbox"/> Remember confidentiality	
<input checked="" type="checkbox"/> The 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 Appendix X for more information about coping strategies)	
<input checked="" type="checkbox"/> Speak to other agencies or nominated people within the school as appropriate (and within the parameters of confidentiality)	

<input checked="" type="checkbox"/> Look after yourself- ensure that you have someone to support you and talk things through	
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Talking to young people who are self harming - some conversation prompts

Every 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 below prompts give some suggested phrases for guiding the conversation.

Topic	Possible Prompt Questions
Starting the conversation/ establishing rapport	<ul style="list-style-type: none"> • <i>"That sounds frightening for you.."</i> • <i>"Let's see how we can work this out together..... I may not have the skills to give you the help you need but we can find that help for you together if you would like..."</i> • <i>Use active listening e.g. "Can I just check with you that I have understood that correctly?"</i>
Confidentiality	<ul style="list-style-type: none"> • <i>"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 sufficiently worried that you may be feeling unsafe or at risk of hurting yourself, part of my job is to let other people who can help you know what's going on. BUT I will always have that discussion with you before and let you know what the options are so that we can make these decisions together"</i>
The nature of the self harm	<ul style="list-style-type: none"> • <i>"Where on your body do you typically self-harm?"</i> • <i>"What sort of self harm are you doing...."</i> • <i>"What are you using to self harm?"</i> • <i>"Have you ever hurt yourself more than you meant to?"</i> • <i>"What do you do to care for the wounds?"</i> • <i>"Have your wounds ever become infected?"</i> • <i>"Have you ever seen a doctor because you were worried about a wound?"</i>
Reasons for self	<ul style="list-style-type: none"> • <i>"I wonder if anything specific has happened to make you feel like</i>

harm	<i>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</i>
Coping strategies and support	<ul style="list-style-type: none"> • <i>"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.... Etc"</i> • <i>"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?"</i> • <i>"How could we make things easier for you at school?"</i> • <i>"What feels like it is causing you the most stress at the moment?.."</i> • <i>"What do you think would be most helpful?"</i>
Speaking to parents (where appropriate)	<ul style="list-style-type: none"> • <i>"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....."</i>
Ongoing support	<ul style="list-style-type: none"> • <i>"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...."</i>

Talking to 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. Talking to the young person about what coping strategies work for them may be useful (see conversation prompts above). Different strategies may work for different people, but some strategies that may be helpful 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 • Create something: drawing, writing, music, cooking, sculpture, crafts • Going to a public place, away from the house • Keeping a diary or weblog • Stroking or caring for a pet • Watching TV or a movie • Getting in touch with a friend • Listening to soothing music • Having a relaxing bath • Breathing exercises • Plan an activity or trip e.g. volunteering, cinema, park
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 • Using a punchbag or punching pillows • Hitting a pillow or other soft object • Listening to or creating loud music • Tearing up newspaper • Repetitive counting or writing
Restlessness	<ul style="list-style-type: none"> • Take some exercise e.g. walking, sports, gardening, bike ride • 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) <http://www.harmless.org.uk/ourResources/copingStrategies>
- University of Oxford(2017), *Coping with Self-harm: A Guide for Parents and Carers*, viewed (2017) https://www.psych.ox.ac.uk/research/csr/research-projects-1/coping-with-self-harm-brochure_final_copyright.pdf
- Wester, K. and Trepal, H. (2005), *Working With Clients Who Self-Injure: Providing Alternatives*, Journal of College Counseling, Vol. 8, Iss. 2, p. 180-189.

Useful Information and Contacts

Some of the below resources may be useful:

Resource/service	Contact information
Future in Minds workers in schools, Primary Intervention and specialist services in Wakefield CAMHS	<ul style="list-style-type: none"> • See section on “Advice and referral to CAMHS Wakefield” above
Online Counselling	<ul style="list-style-type: none"> • Kooth, a commissioned online and face2face counselling service, can be referred to through your Future in Mind worker
My Mind website and app	<ul style="list-style-type: none"> • Developed by Emotional Health and Wellbeing service in Essex, this is a website designed to help young people support their emotional and mental wellbeing. A My Mind app will also be launched in future. • http://www.nelft.nhs.uk/my-mind
Young Minds	<ul style="list-style-type: none"> • www.youngminds.org.uk • Young Minds Parent Helpline: 0808 802 5544 (Mon-Fri 9.30am-4pm) <p>A national charity working towards improving wellbeing and mental health of children and young people</p>
Samaritans	<ul style="list-style-type: none"> • 116 123 • www.samaritans.org <p>A national charity aimed at providing emotional support to anyone in emotional distress</p>
Mind	<ul style="list-style-type: none"> • Mind www.mind.org.uk • MIND understanding self-harm booklet: http://www.mind.org.uk/media/5133002/mind_und_self-harm_singles_4-web.pdf <p>Provide advice and support to anyone experiencing mental</p>

	health problems
Rethink	<ul style="list-style-type: none"> • www.rethink.org <p>A national mental health charity offering information, advice and support about mental health issues</p>
Harmless	<ul style="list-style-type: none"> • www.harmless.org.uk <p>A national voluntary organisation for those who self harm, their families and professionals</p>
Papyrus Helpline	<ul style="list-style-type: none"> • HOPELineUK 0800 068 41 41 • www.papyrus-uk.org <p>A national UK strategy aimed at the prevention of young suicide.</p>
SelfHarm.co.uk	<ul style="list-style-type: none"> • www.selfharm.co.uk <p>SelfharmUK is a project dedicated to supporting young people impacted by self-harm, providing a space to talk, ask any questions and be honest about what's going on in their life.</p>
Epic friends	<ul style="list-style-type: none"> • www.epicfriends.co.uk <p>Advice for young people on ways to help friends who may be self-harming</p>
Lifesigns	<ul style="list-style-type: none"> • www.lifesigns.org.uk <p>An online, user-led voluntary organisation, to create understanding about self-injury and provide information and support to people of all ages affected by self-injury.</p>
Childline	<ul style="list-style-type: none"> • https://www.childline.org.uk/about/about-childline/ <p>Trained counsellors who can talk to anyone aged under 19 about any issue they are going through.</p>
Self injury support	<ul style="list-style-type: none"> • www.selfinjurysupport.org.uk <p>A national organisation that supports girls and women affected by self injury or self harm</p>
Family Lives	<ul style="list-style-type: none"> • http://www.familylives.org.uk/about/ • A charity which supports parents with all aspects of family life
Safeguarding Boards	<ul style="list-style-type: none"> • Essex safeguarding board policies, including prevention of youth suicide guidance toolkit http://www.escb.co.uk/en-gb/workingwithchildren/policiesandguidance.aspx • Thurrock safeguarding board https://www.thurrocklscb.org.uk/ • Southend local safeguarding children board http://www.safeguardingsouthend.co.uk/children

Appendix 1: Leaflet for young people about self harm



Self harm leaflet for
young peopleEWMHS

Appendix 2: Leaflet for parents and carers about self harm



Self harm - leaflet for
parents and carers.docx

Appendix 3: Template letters for schools to use: incident forms / letter to parent about self harm incident meeting

Template letter to parents following self-harm meeting

Date:

Dear (Parent/Carer)

Thank you for coming to discuss

.....
After our recent meeting I am writing to express concern about’s safety and
welfare.

The recent incident of self-harm (or threat of self-harm) by suggests that
he/she may benefit from some professional help to help her manage her feelings and self harm.
I recommend that you visit your local GP for advice and help and /or as agreed, we have sent a
referral to social services and/or Wakefield CAMHS.

We will continue to provide support to, but would appreciate any information that you feel would help us to do this as effectively as possible.

If there is anything else we can do to help please contact me.

Yours sincerely,

Title

Copies to:

Adapted from: Northamptonshire Toolkit for supporting children and young people, Northamptonshire County Council, 2014.

Self-harm incident recording form

Young person's name:	
Date of report:	Number of previous reported incidents:
Age:	Gender:
Year:	Special needs: Y/N
Staff member completing form:	Position:
Incident description:	
Time and context of occurrence:	
Action taken by school personnel:	
Decision made with respect to contacting parents and reasons for decision:	
Advice from Wakefield CAMHS single point of access? Y/N If yes, please give details	

Recommendations:	
Follow up:	
Signature:	Designation

Adapted from: Northamptonshire Toolkit for supporting children and young people, Northamptonshire County Council, 2014.

Appendix 4: What do we know about self harm (designed for Essex schools and services): Presentation

As part of the development of the guidance, we spoke to young people and schools in Essex about self-harm and used this when developing the guidance. A presentation summarising key findings can be found in the attached presentation:



Self Harm in
Essex.pptx