



**Stourbridge  
College**

## **STUDENT SELF HARM**

### **Policy Documents**

June 2010

# Self Injury Policy

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## **Statement of Intent**

Stourbridge College is committed to safeguarding the welfare of its students and preventing their abuse. All staff, employers, work experience providers and volunteers must have measures in place to prevent and/or respond to observed or reported self harm. The guidelines developed within this policy are to be used by all staff with responsibility for young people within their care.

The Senior Management Team of Stourbridge College has agreed this policy and is mandatory in all supporting young people.

As part of Stourbridge College's commitment to safeguarding, this policy aims to:

- Explain self harm and what disclosures of suicide may mean.
- Identify warning signs which indicate a student may be self harming or at risk of suicide.
- States roles and responsibilities and how to react positively if a student discloses self harm or thoughts of suicide.
- Explains the procedure for staff to adhere to in the event of a disclosure.
- Signpost to further information and resources.

This policy interlinks with Stourbridge College:

- Safeguarding and Child Protection Policy

## **What is self harm?**

Self harm is a wide definition that includes eating disorders, self-injury, risk-taking behaviour and drug / alcohol misuse. This policy focuses on the self-injury aspect of self-harm; however, support is available for any behaviour which is deemed to be harmful to our students.

Self-harm is a coping mechanism. An individual harms their physical self to deal with emotional pain, or to break feelings of numbness by arousing sensation.

Self-harm is any deliberate, non-suicidal behaviour that inflicts physical harm on the body and is aimed at relieving emotional distress. Physical pain is often easier to deal with than emotional pain, because it causes 'real' feelings. Injuries can prove to an individual that their emotional pain is real and valid. Self-harming behaviour may calm or awaken a person. Yet self-harm only provides temporary relief, it does not deal with the underlying issues. Self-harm can become a natural response to the stresses of day-to-day life and can escalate in frequency and severity.

Self injury can include but is not limited to, cutting, burning, banging, bruising and scratching.

Self harm is often habitual, chronic and repetitive; it tends to affect people for months and years.

People who self injure usually make a great effort to hide their injuries and scars, and are often uncomfortable about discussing their emotional inner or physical outer pain. It can be difficult for young people to seek help from the NHS or from those in positions of authority, perhaps due to the stigma associated with seeking help for

mental health issues. Self injury is usually private and personal, and it is often hidden from family and friends. People who do show their scars may do so as a reaction to the incredible secrecy, and one should not assume that they are attention seeking, although attention may well be needed.

### Self harm is not

Like any behaviour, self-harm may be used to attract attention, but this is not usually the focus of chronic, repetitive self harm. If self harm is being used in order to gain attention, one must look to find the reasons as to why someone is in such dire need of attention. It could be there is a problem at home, or issues of bullying, and they feel that no one is listening or hearing them.

Self harm is not about seeking attention, a way of fitting in or a response to music, films or the 'emo' or 'gothic' culture. Prejudices and perceptions may lead people to believe they 'know' that self harm is linked to a certain demographic or background, but each person is unique and will have found self harm by their own route, and rely on it at times of stress due to the release and relief it offers them.

### Understanding disclosures of suicidal intentions

If a young person discloses that they are thinking about suicide always take this seriously. It is important to take the time to listen and take action outlined in the procedure.

It is important to remember that young people may express strong feelings about a wide range of emotions. When investigated they have little or no intention of suicide and are instead trying to communicate the depth of unhappiness that they feel. Although this may mean there is no immediate risk of suicide, support should be arranged for the student before their thoughts of suicide become more serious.

Any student who discloses thoughts of suicide is reaching out for help. It is important that we react positively reinforcing the student has done the right thing by telling someone and help is available. This will encourage them to continue seeking support when they need it.

Whether a student discloses to express their feelings, or because they have real intent, trust your instincts and follow the guidelines to ensure the student accesses the appropriate support.

### Risk factors associated with self harm

Self harm is a coping mechanism, it is important to recognise and respond to the underlying reasons behind a person's self harm.

Risk factors include, but are not limited to:

- Low self-esteem
- Perfectionism
- Mental health issues such as depression and anxiety
- The onset of a more complicated mental illness such as schizophrenia, bi-polar disorder or a personality disorder
- Problems at home or school
- Physical, emotional or sexual abuse

### Warning signs possibly associated with self harm

Warning signs may not be visible but some of the things below may indicate a student is suffering internally which may lead to self harm:

- Drug and / or alcohol misuse or risk taking behaviour
- Negativity and lack of self esteem
- Out of character behaviour
- Bullying other pupils
- A sudden change in friends or withdrawal from a group.

Physical signs indicating self injury may be occurring

- Obvious cuts, scratches or burns that do not appear of an accidental nature
- Frequent 'accidents' that cause physical injury
- Regularly bandaged arms and / or wrists
- Reluctance to take part in physical exercise or other activities that require a change of clothes
- Wearing long sleeves and trousers even during hot weather

Although self harm is non suicidal behaviour and relied on as an attempt to cope and manage, it must be recognised that the emotional distress that leads to self harm can also lead to suicidal thoughts and actions.

It is therefore all incidents of self harm must be taken seriously. The underlying issues and emotional distress must be thoroughly investigated and necessary emotional support given, in order to minimise any greater risk.

*N.B It is important to recognise that none of these risk factors may appear to be present. Sometimes it is the outwardly happy, high-achieving person with a stable background who is suffering internally and hurting themselves in order to cope.*

## Risk factors associated with suicide

The following factors can indicate that someone is statistically more at risk of suicide:

- Male gender – men are 3 times more likely to commit suicide than women
- Previous suicide attempt
- Alcohol and drug abuse
- Low socio-economic status
- Previous psychiatric treatment
- Concurrent mental health disorder
- Low social support / living alone / isolation
- Significant life events

## Warning signs possibly associated with suicide

There may be no warning signs, but some of the changes or behaviours below may indicate personal crisis:

- Sudden changes in their usual pattern of relating to others
- Marked personal changes
  - Disinterest in studies or future
  - Apathy about appearance and self neglect
  - Lack of concentration, changes in sleep pattern, delusions or hallucinations
  - Sudden happiness after lengthy period of depression
- Self harm and suicide attempts
- Marked weight increase or decrease
- Increased use of alcohol or drugs
- Verbal expressions direct or indirect:
  - “I wish I were dead”
  - “You won’t have to bother with me any more”
  - “I’d like to go to sleep and never wake up”.

*N.B It is important to recognise that none of these risk factors may appear to be present. Sometimes it is the outwardly happy, high-achieving person with a stable background who is suffering internally.*

## **Responsibilities**

### **Management**

The designated member of staff responsible for all incidents relating to self harm is the Student Welfare Advisor (Rachael Edge).

The Student Welfare Advisor will record all incidents and inform the Designated Safeguarding Manager (Gill Coldicott) when a student is at risk of significant harm in accordance with the Safeguarding Policy.

The Welfare Advisor and Safeguarding Manager will ensure designated staff are appropriately trained to deal confidently with self harm incidents. The Welfare Advisor and Designated Safeguarding Manager will review the policy annually.

### **All staff**

- Must be aware of their responsibilities if a student discloses self-harm or suicidal intentions.
- React positively to any students who disclose self-harm or thoughts of suicide, by actioning and following the procedure.
- Refer students disclosing self harm or suicidal intentions to the Student Welfare Advisor immediately.
- Inform students they are making a referral.
- Gain consent for the referral where possible.

### **Student Welfare Advisor**

- Action immediately (where practicable) incidents of suicide/self-harm disclosure where imminent risk is identified.
- Implement processes for students to gain control and establish what they would like to happen and the support required.
- Respect students' confidentiality and dignity.
- Promote healthy coping mechanisms and empower students to make positive changes.
- Provide access to information and resources.
- Refer to outside support agencies where appropriate.
- Record and monitor incidents of suicide/self-harm disclosure.
- Maintain links with key organisations which support issues of suicide or self-harm, including counselling and mental health services.
- Identify when to involve other organisations, such as Social Services.
- Monitor own emotional well being and seek support as necessary.
- Provide training and information to staff on self-harm and suicide
- Provide materials and resources for tutorials, to raise awareness of self-harm and suicide and support available.

## **Emergency Supporters**

The Student Welfare Advisor is the first point of contact to support students where the risk of suicide is imminent - Ext. 4319.

In the absence of the Student Welfare Advisor, the following staff are willing to support students:

- Richard Baines - Ext. 4393
- Anne Inman - Ext. 4363
- Kim Carey (ATC) - Ext. 5117
- Diane Williams/Linda Harding (Longlands) - Ext. 4600

Emergency supporters will follow the procedure outlined below if emergency support is required by a member of staff who has received an initial disclosure.

Procedure for disclosure of self-harm/suicidal intentions

### **For staff receiving initial disclosure**

- Take all disclosures seriously, avoid dismissing as invalid.
- Remain calm and non-judgemental.
- Encourage students to be open with you and reassure them they can get the support they need if they are willing to talk
- Refer to another where appropriate and do not promise not to seek advice from others.

### ***Self-Harm***

- Avoid asking the student to reveal their scars or describe their self-harm.
- Avoid asking a student to stop self-harming - you may be removing the only coping mechanism they have.
- Ask if they are injured now? Seek help from a first aider as necessary.
- Refer the student to Student Welfare for an emergency appointment and inform them of your intentions. Gain consent wherever possible.

### ***Suicide***

- For disclosed intent or feeling of suicide, ask questions to assess immediacy
  - Do you have a plan? (have they thought about how, when, where?)
  - What are you going to do after you leave me?
  - Does anyone else know you feel this way?
  - If this assessment indicates the student may attempt suicide before any support can be arranged, get immediate support.
  - If the disclosure appears to be an indication of how the student is feeling rather than intent to commit an act, arrange support for the soonest possible opportunity.
  - Trust your instincts - if you are not happy sending a student away then don't - get immediate support.
- To refer to urgent support, contact Student Welfare or the emergency supporters (either directly or via reception), who will offer immediate support to the student.
- To arrange non-urgent support, contact Student Welfare to make a referral for an appointment.

## **For Student Welfare and Emergency Supporters**

Action to be taken by Student Welfare or emergency supporters in the instance of an urgent referral.

- Explain to the student that you are concerned about their disclosure and that you are there to help
- Ask questions to assess the immediacy of the student's disclosure:
  - Do they have any definite plans?
  - Have they thought about how, when, where they might attempt suicide?
  - Have they made any preparations (such as buying pills, putting things in order)?
  - What are they planning to do after they leave college?
  - Have they spoken to anyone else about how they're feeling?
  - Trust your instincts.
  
- If the disclosure appears to be an indication of how the student is feeling rather than intent to commit an act, refer to Student Welfare for the soonest possible appointment.
- If you are unsure of the immediacy of the disclosure, phone NHS direct who can help make an assessment - 0845 46 47
- If you feel that suicide is an imminent risk, contact the Crisis Team via Russell's Hall switchboard - 01384 56111
- The Crisis team will want to speak to the student - encourage them to speak and if they will not speak encourage them to travel with you to A&E at Russell's Hall.
- Remember that if a student discloses suicidal intentions they are reaching out for help and should be willing to accept it when it is offered.
- Send a report of action taken to Student Welfare.

## Further information and resources

### **To do**

Check with all emergency supporters they are still OK in this role, & recap procedure

Ask Gill C / Liz Norton if they can be added

OK the bit about contacting senior managers in everyone else's absence with Ben and make sure they're aware!

Make sure reception staff are aware of procedure and who to contact - and that info is displayed on reception.