

## Cotham School – Self-harm Policy April 2014.

### Guiding principle

‘Every child has a right to feel safe’. Cotham school seeks to support this by fostering a student’s positive self- image, security, confidence, independence and a sense of worth. These are regarded as central to the well-being of the individual and therefore seen to be an intrinsic part of all aspects of the curriculum, pastoral care and school life.

### Rationale

Over the last forty years there has been a large increase in the number of young people who deliberately harm themselves. A large community study in the UK found that in 15-16 year olds, approximately 6.9% of young people (3.2% males and 11.2% females) had self-harmed in the last year.

School staff must play an important role in preventing self-harm and also in supporting students, peers and parents of students currently engaging in self-harm. Progress and achievement in school depends on this.

This policy is closely linked with Cotham’s Child Protection & Safeguarding Policy, Health & Safety and Anti bullying policy

### Aims

- to promote a safe, timely and effective response to students who harm themselves or are at risk of harming themselves.
- To provide support to students who self-harm, their peers and parents/carers.
- To provide support to staff dealing with students who self-harm.
- To increase understanding and awareness of self-harm.
- To alert staff to warning signs and risk factors.

### 1. What is Self Injury / self-harm?

Self-harm is any behaviour where the intent is to deliberately cause harm to one’s own body for example, (this is not an exhaustive list) :

- Cutting, scratching, scraping or picking skin
- Swallowing inedible objects
- Taking an overdose of prescription or non-prescription drugs (misuse of paracetamol, insulin)
- Swallowing hazardous materials or substances
- Burning or scalding
- Hair-pulling
- Banging or hitting the head or other parts of the body
- Scouring or scrubbing the body excessively
- Episodes of alcohol/drug abuse or over/under eating can at times be acts of deliberate self-harm

### Why do young people self-harm?

Self-harm is not usually triggered by one isolated event but rather a set of circumstances that leave young people overwhelmed and unable to manage their feelings. It is not the core problem but a sign and symptom of underlying emotional difficulties, used as a way of coping.

## **Implementation: Roles and responsibilities of head teacher, other staff and Governors:**

### **The head teacher will:**

Appoint a designated teacher to be responsible for self-injury matters, and liaise with them. This will be the Designated Child Protection Officer. DCPO

Ensure that the DCPO receives appropriate training about self-injury

Ensure that self-injury policy is followed by all members of staff

### **The Governing body will:**

Decide whether self-injury education should be in the school curriculum and how it should be addressed

Ensure that education about self-injury neither promotes or stigmatises

Look at provisions for people who self-injure, such as long-sleeved uniforms and PE kits, and time out of lessons when under intense stress

### **All staff and teachers are expected to:**

Follow the guidelines (flow diagram) outlining how to respond to a student who discloses they are self-harming or contemplating self-harm.

Widen their own knowledge about self-injury and mental health disorders (Appendix 1)

Provide accurate information about self-injury (Appendix 4 & 6) and provide support for students who are self-harming (appendix 2 & 3)

Promoting self-soothing ways to deal with emotional distress and enable students to find places for help and support (appendix 3)

Build self-esteem, confidence and a positive self-image of all students; help students to understand healthy behaviours and challenge behaviours that degrade and disrespect. Support students in recognizing and achieving a balance of physical, intellectual, emotional and social wellbeing.

### **The designated staff member(s) will:**

Keep records of self-injury incidents and concerns

Liaise with local services about help available for people who self-harm

Keep up-to-date with information about self-injury

Contact parent(s) at the appropriate time(s). Involve the student in this process. Inform the parent(s) about appropriate help and support for their child which is available. (Appendix 5).

Monitor the student's progress following an incident

Know when people other than parents (e.g. social workers, educational psychologists) need to be informed

### **Students will be expected to:**

Not display open wounds/injuries. These must be dressed appropriately

Talk to the appropriate staff member if they are in emotional distress

Alert a teacher if they suspect a fellow student of being suicidal or at serious risk of harm to themselves, and know when confidentiality must be broken

### **Parents will be encouraged to:**

Endorse the school's approach to self-injury education and pastoral care

Work in partnership with the school.

### **Arrangements for monitoring and evaluation:**

Use feed-back from parents and students as to how a self-injury incident/case has been dealt with.

**Managing Self harm - Emergency**

Student has self harmed

Contact emergency services if injury is life-threatening or if student is suicidal. If the student is taken to hospital, emergency protocols for treatment and care will be implemented and a CAMHS referral will be activated by hospital.

- Locate student
- Call for help from colleague/Emergency Services/GP
- Administer First Aid
- Keep calm and give reassurance – to the individual student and to those who might be affected by witnessing self-harm (staff and student)

**Try not to:**

- > React with horror or discomfort to the disclosure
- > Ask abrupt and rapid questions
- > Get angry
- > Demand they 'just stop'
- > Accuse them of attention seeking
- > Get frustrated if behaviour continues after support has been provided
- > Ignore other warning signs

- Log injury and inform DCPO (Designated Child Protection Officer)
- Explain confidentiality

- Inform parents/carers unless clear reason not to
- Follow safeguarding procedures if necessary

- Where student is not taken to hospital, refer to CAMHS where appropriate

**Managing Self harm – non emergency**

Disclosure of Self Harm

- Listen, don't judge or panic
- Initial Risk assessment (see page 4)
- Encourage communication with parents / carers if appropriate
- Record and pass to DCPO.

High risk – refer back to emergency procedure above

- DCPO assesses risk with information available and makes a decision about the relevant course of action including whether to inform parents/ carer if student has not consented.

Low / Medium risk

- Staff member meets with student and discusses supportive strategies / sets action plan with the student, involve parents / carers where appropriate (Parent/ Carers should be informed to secure their support, especially at KS3 though a degree of flexibility is needed)
- Encourage and help student and family to access services (Appendices 4 or 5)
- Refer to other counsellor if appropriate
- Contact CAMHS for advice or referral if appropriate

## Assessing risk

### Assessing Risk

There is a need to initiate a prompt assessment of the level of risk self-harm presents.

Unless the student is in obvious emotional crisis, kind and calm attention to assuring that all physical wounds are treated should precede additional conversation with the student about the non-physical aspects of self-harm. Question that will help to assess severity might include:

- Where on the body do you typically self-harm?
- What do you typically use to self-harm?
- What do you do to care for the wounds?
- Have you ever hurt yourself more severely than you intended?
- Have your wounds ever become infected?
- Have you ever seen a doctor because you were worried about a wound?

### Assessing Risk:

Other basic information that will help to determine the level of risk and the need for engagement of outside resources. Questions might include aiming to assess:

- History
- Frequency
- Types of method use
- Triggers (is home a key risk factor)
- Disclosure
- Help seeking and support in place / self-management of issue
- Past history and current presence of suicidal tendencies and / or behaviour.

### Higher risk students.

Students with more complicated profiles – those who report frequent or long-standard self-harm practices; who use more serious methods, and / or who are experiencing chronic internal or external stress with few positive supports or coping skills.

### Low risk students

Students will little history of self-harm, a general manageable amount of stress, and at least some positive coping skills and some external support.

### Support strategies

- ☺ Each individual should be given the opportunity for one to one support.
- ☺ If appropriate, arrange meeting with parents and young person. (Factsheet for parents / carers – Appendix 5)
- ☺ Depending on severity, suggest support from other relevant professionals' involvement including:
  - referral to GP / CAMHS/ School Nurse Services.
  - Off the Record / other counselling services. (Information about other support agencies Appendix 6)
- ☺ \*Identify support – My Safety Net (Appendix 2).
- ☺ Self-soothing / Coping strategies and other ways to help – (Appendix 3)
- ☺ Helpful resources for students – (Appendix 4)
- ☺ Consider initiating a Single Assessment. (SAF)



### \*Someone to talk to.

What is important for many young people is having someone to talk to, who listens properly and does not judge.

- ☺ At Home - parents, brother/sister or another trusted family member
- ☺ In school - a mentor, counsellor, youth worker, school health nurse, special educational needs co-ordinator, emotional and behaviour support manager, educational psychologist or other.
- ☺ Out of school, a student could talk to their GP, counsellor, other agency

## **Appendix 1. Advice and Guidance: A Self-harm Information sheet. It includes:**

1. What is Self-harm?
2. Risk Factors - What might make a person particularly vulnerable to self-harm?
3. Triggers – what factors may trigger the self-harm incident?
4. Warning signs – changes in behaviour of a young person which is associated with self-harm.

### **2. What is Self-harm / Self- Injury?**

Self-harm is any behaviour where the intent is to deliberately cause harm to one's own body for example, (this is not an exhaustive list) :

- Cutting, scratching, scraping or picking skin
- Swallowing inedible objects
- Taking an overdose of prescription or non-prescription drugs (misuse of paracetamol, insulin)
- Swallowing hazardous materials or substances
- Burning or scalding
- Hair-pulling
- Banging or hitting the head or other parts of the body
- Scouring or scrubbing the body excessively
- Episodes of alcohol/drug abuse or over/under eating can at times be acts of deliberate self-harm

Self-harm can be a transient behaviour in young people that is triggered by particular stresses and resolves fairly quickly, or it may be part of a longer term pattern of behaviour that is associated with more serious emotional/mental health difficulty. Where there are a number of underlying risk factors present the risks of further self-harm is greater.

### **3. Risk Factors - What might make a person particularly vulnerable to self-harm?**

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

#### **Individual factors can include:**

- Depression / anxiety
- Poor communication skills
- low self esteem
- poor problem solving skills
- hopelessness
- impulsivity
- drug or alcohol abuse
- confusion about sexuality or feeling different / unaccepted (eg if gay, lesbian or bisexual)

#### **Family factors**

- unreasonable expectations
- religious/ethnicity/cultural identity dilemmas or conflict
- young carers' role within the family
- domestic violence
- neglect or abuse (physical, sexual or emotional)
- poor parental relationships and arguments
- depression, deliberate self-harm or suicide in the family

#### **Social factors**

- difficulty in making relationships/ loneliness
- persistent bullying or peer rejection

### **Social factors continued...**

- racism
- homophobic attitudes or bullying of children who think they may be gay, lesbian or bisexual
- easy availability of drugs, medication or other methods of self-harm

#### **4. Triggers** – what factors may trigger the self-harm incident?

A number of factors may trigger the self-harm incident:

- 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
- self-harm behaviour in other students or in the media (contagion effect)
- difficult times of the year (e.g. anniversaries)
- trouble in school or with the police
- feeling under pressure from families, school and peers to conform/achieve
- exam pressure
- times of change (e.g. parental separation/divorce)

#### **5. Warning signs** – changes in behaviour of a young person which is associated with self-harm.

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 should seek further advice from one of the designated teachers for safeguarding children – **John Heayberd, Annette Rothwell, Debbie Price.**

Possible warning signs may 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 activity and mood e.g. more aggressive or introverted than usual.
- Lowering of academic achievement.
- Talking or joking about self-harm or suicide.
- Substance misuse.
- Expressing feelings of failure, worthlessness or loss of hope.
- Bullying other students or becoming more aggressive than normal in dealings with other students or peers.
- Changes in clothing e.g. loss of pride in appearance and being reluctant to roll sleeves up in front other people or wearing long sleeves even in very hot weather.
- Obvious cuts, scratches or burns that do not look accidental in nature.
- Frequent accidents that cause physical injury.
- Regularly bandaged arms or wrists.
- Reluctance to take part in physical activity that requires a change of clothing.

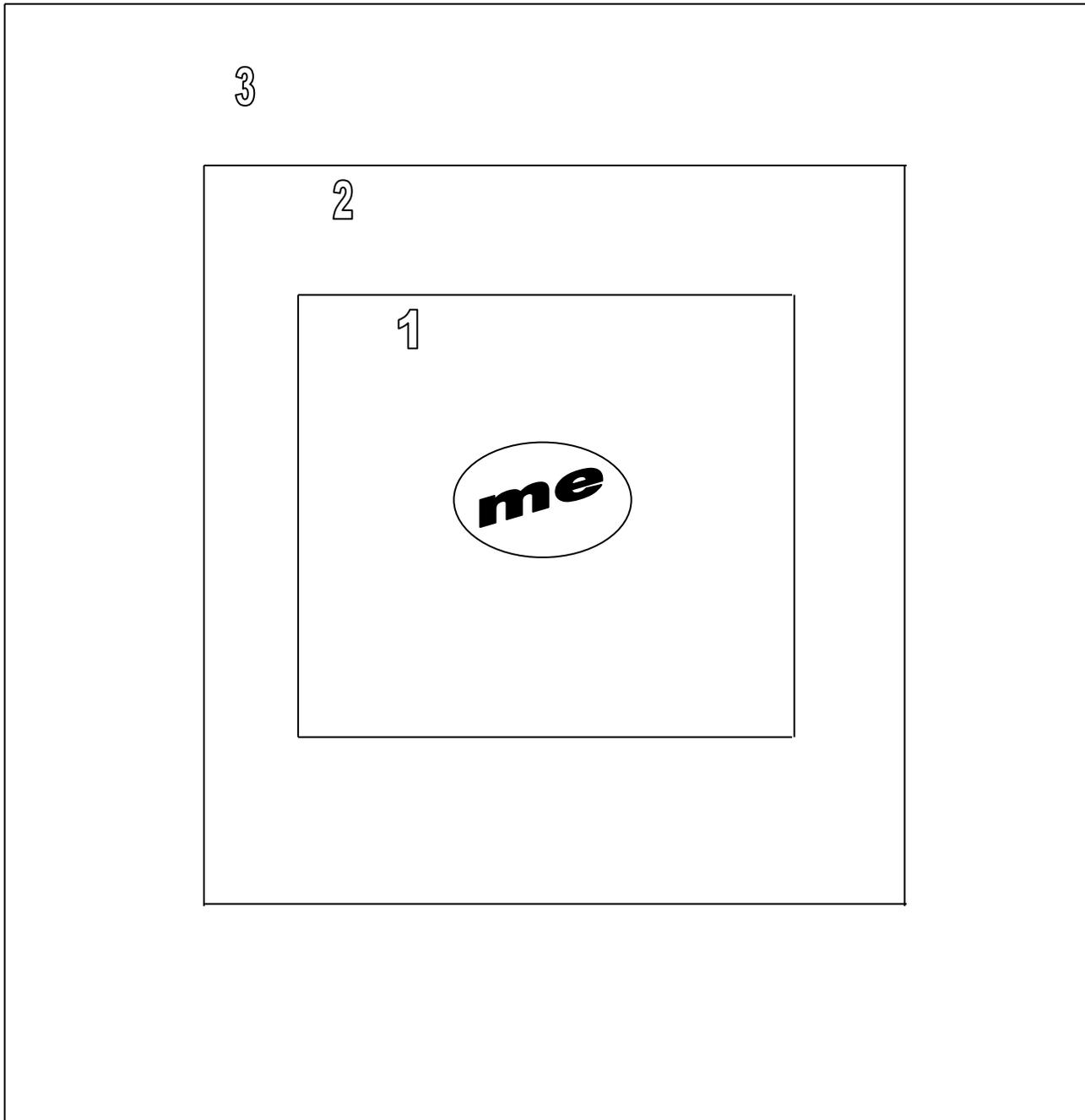
**Suicide** - Although self-harm is a non – suicidal behaviour and relied on as an attempt to cope and manage, it must be recognised that the emotional distress that leads to self-harm can also lead to suicidal thoughts and actions.

## Appendix 2 My Safety Net

There are different types of people in our lives; try to identify some people in each of the groups below that you would feel comfortable talking to.

1. Family and close friends
2. Friends and people you see every day
3. Help lines and professional people you could go to for help

Also, write into the safety net the things that you can do yourself to cope with difficult feelings and keep yourself safe.



## Appendix 3 – How to help

Replacing the self-harm with other safer coping strategies can be positive and more helpful way of dealing with difficult things in their life. What works depends on the reasons behind the self-harm.

### Self-soothing / Coping strategies –consider alternative actions.

Examples of ways of coping:

- Writing, drawing and talking about feelings
- Contacting a friend, family member, crisis line
- Going to a quiet place and screaming.
- Screaming silently
- Hitting a pillow/soft object
- Listening to loud music. (Be aware of music that will lower mood).
- Going for a walk/run or other forms of physical exercise. Get out of the house and go somewhere where there are other people
- Reading a book or watching a favourite film
- Keeping a diary
- Having a bath / use relaxing oils e.g. lavender
- Looking after an animal
- Drawing red lines on the skin with a washable pen
- Clenching ice cubes in the hand until they melt – this can relieve tension. Using ice cubes with a red dye may be even more effective
- Elastic band around the wrist and snapping it to cause pain. (This can be used as a way of self-harming)
- Hitting a pillow or other soft object
- The rainbow journal <http://www.selfharm.org.uk/article.aspa?PageId=531&NodId=246>

### Other ways to help. Someone who will listen!

- Arrange a mutually convenient time and place to meet.
- At the start of the meeting set a time limit.
- Make sure the young person understands the limits of your confidentiality.
- Encourage them to talk about what has led them to self-harm.
- Remember that listening is a vital part of this process.
- Support the young person in beginning to take steps to keep him/herself safe and reduce the self-injury (if they wish to).
- Help them to learn how to express their feelings in other ways e.g. talking, writing, drawing or using safer alternatives (see coping strategies listed below).
- Help them to build up self esteem
- Help them to find their own way of managing their problems.
- e.g. - If they say they dislike themselves, begin working with them on what they say they do like.
- e.g. - If life at home is impossible, begin working with them on how to talk to parents/carers.
- Help them identify their own support network (Sample, Appendix B).
- Offer information about support agencies. Remember some internet sites may contain inappropriate information.



### Your friend has a problem – How can you help?

- You can really help by just being there, listening and giving support.
- Be open and honest. If you are worried about your friend's safety, you should tell an adult. Let your friend know that you are going to do this and you are doing this because you care about him/her.
- Encourage your friend to get help. You can go with them or tell someone they want to know.
- Get information from telephone help lines, websites, library (see info below)etc. This can help you understand what your friend is experiencing.
- Your friendship may be changed by the problem. You may feel bad that you can't help your friend enough or guilty if you have had to tell other people. These feelings are common and don't mean that you have done something wrong/not done enough.
- Your friend may get angry with you or say you don't understand. It is important to try not to take this personally. Often when people are feeling bad about themselves they get angry with the people they are closest to.
- It can be difficult to look after someone who is having difficulties. It is important for you to find an adult to talk to, who can support you. You may not always be able to be there for your friend and that's OK.

## Appendix 4 – Helpful resources for Young people

On this leaflet is a list of useful telephone numbers and websites for groups that can support you when you feel you need it.



### Youth2Youth helpline

For all young people 11-19 years old You can contact us in 3 ways:

**Email:** send your problem/concern to us via [www.youth2youth.co.uk](http://www.youth2youth.co.uk)

**Online Chat:** Enter our chat room and “talk” to one of our trained helpers live.

Monday and Thursday evenings between 6:30pm and 9:30pm [www.youth2youth.co.uk](http://www.youth2youth.co.uk)

**Telephone:** Call us and talk about your problem - we can even call you back.

Helpline times: Monday and Thursday evenings between 6:30pm and 9:30pm on **020 8896 3675**

**Please note:** Youth2Youth does not offer an emergency service. If you consider your problem to be life threatening or if it is extremely serious we ask you to contact the emergency services or other appropriate agencies.

### Samaritans

Samaritans believe that offering people the opportunity to be listened to in confidence, and accepted without prejudice, can alleviate despair and suicidal feelings. You can contact us in complete confidence in the following ways:

**By Telephone:** on our local number **0117 983 1000** or on the national number **08457 909090** (charged at local rate)

**By email:** We recognise that some people may find it easier or may need time and space to find a way through emotional distress by communicating by email. The address is [jo@samaritans.org](mailto:jo@samaritans.org)

### Off The Record Bristol What we do

Off The Record (OTR) provides free, confidential, easy to access counselling for everyone aged 11-25 living in Bristol. You can talk about whatever you need to with your counsellor and they won't judge you or tell you what to do. Your counsellor will listen to you and support you to find your own ways to move forward and get the most out of life. We offer counselling from several locations around Bristol including the City Centre, Barton Hill, Lawrence Weston, Lockleaze and Withywood.

### Off The Record Get in Touch!

2 Horfield Road, St Michaels Hill, Bristol BS2 8EA

**Phone:** 0808 808 9120 **Text:** 0789 688 0011 **E-mail:** [confidential@otrbristol.org.uk](mailto:confidential@otrbristol.org.uk)

**Web:** [www.otrbristol.org.uk](http://www.otrbristol.org.uk) Join us on Facebook Follow us on Flickr & Vimeo

Registered Charity No. 1085351 Registered Company No. 4150044

### For support and information talk to a Youth Support Worker (YSW)

YSWs are trained members of the OTR team who can support you around a range of different issues.

Occasionally, people come to meet a Youth Support Worker when they feel they need immediate support because they are in crisis and they can't wait for a counselling session.

Other support and services include:-

**C-Card and Sexual Health:** We offer the C-card service and Chlamydia testing kits at Off The Record. You can find out more about this by looking at our website.

**Groups and Workshops:** Throughout the year we run groups, workshops and training at Off The Record on a variety of different themes and issues. have a look at on the website for more details

Need to talk? **Call ChildLine 0800 1111** Calls are free and confidential Childline online chat via [www.childline.org.uk](http://www.childline.org.uk) Chat to a Childline counsellor online in a 1-2-1 session any time you want.

**Get Connected** Telephone and email support for under 25's. **0808 808 4994** (1pm - 11pm 7 days a week) [www.getconnected.org.uk](http://www.getconnected.org.uk)

## Appendix 5 Fact sheet for parents /carers on self-harm

It can be difficult to find out that someone you care about is harming him or herself. As a parent / carer you may feel angry, shocked, guilty and upset. These reactions are normal, but what the person you care about really needs is support from you. They need you to stay calm and to listen to them. The reason someone self-harms is to help them cope with very difficult feelings that build up and which they cannot express. They need to find a less harmful way of coping.

### What is self-harm?

Self-harm is any behaviour such as self-cutting, swallowing objects, taking an overdose, hanging or running in front of cars etc. where the intent is to deliberately cause harm to self.

### How common is self-harm?

Over the last forty years there has been a large increase in the number of young people who harm themselves. A recent large community study found that in 15-16 year olds, approximately 6.9% of young people had self-harmed in the previous year.

### Is it just attention seeking?

Some people who self-harm have a desire to kill themselves. However, there are many other factors which lead people to self-harm, including a desire to escape, to reduce tension, to express hostility, to make someone feel guilty or to increase caring from others. Even if the young person does not intend to kill themselves, self-harming behaviour may express a strong sense of despair and needs to be taken seriously. It is not just attention seeking behaviour.

### Why do young people harm themselves?

All sorts of upsetting events can trigger self-harm. Examples are: arguments with family members, break up of a relationship, failure of exams or bullying at school. Sometimes several stresses occur over a short period of time and one more incident can be the final straw.

Young people who have emotional or behavioural problems or low self-esteem can be particularly at risk from self-harm. Suffering a bereavement or serious rejection can also increase the risk. Sometimes young people try to escape their problems by taking drugs or alcohol. This only makes the situation worse. For some people self-harm is a desperate attempt to show people that something is wrong in their lives.

### What can you do to help?

Try to:

- ☺ Keep an open mind
- ☺ Make the time to listen
- ☺ Help them find different ways of coping
- ☺ Go with them to get the right kind of help as quickly as possible

Some people you can contact for help, advice and support are:

- ☺ Your family doctor
- ☺ Family Smiles – direct referral from schools. 0117 9543650 (Age 8 – 14) For children with parents who have mental illness.
- ☺ Young Minds Parents Information Service. Tel: 08000 182138
- ☺ The Samaritans. Tel: 08457 90 90 90
- ☺ MIND Infoline. Tel: 020 8522 1728 (Self help books also available)
- ☺ Youth Access. Tel: 0208 772 9900
- ☺ School Health Nurse
- ☺ Health Visitor

Reasonably priced booklets can be found at: [www.basementproject.co.uk](http://www.basementproject.co.uk) or [www.selfinjurysupport.org.uk/](http://www.selfinjurysupport.org.uk/)

## Appendix 6 Local contact details

**South Gloucestershire Integrated Working Team** (01454) 865 734

[www.southglos.gov.uk/NR/exeres/9f6b109a-cfff-4521-b0b6-b3f318e3191e](http://www.southglos.gov.uk/NR/exeres/9f6b109a-cfff-4521-b0b6-b3f318e3191e)

### **Primary Mental Health Specialists**

Bristol North CAMHS (0117) 323 5800

Bristol South CAMHS (0117) 340 8121

Bristol East CAMHS (0117) 342 5466

Bristol Central CAMHS (0117) 342 5466

South Gloucestershire CAMHS (0117) 947 4800

### **Useful addresses and telephone helplines**

**Young MINDS** 0800 018 2138

102 – 108 Clerkenwell Road Mon. and Fri. 10am – 1pm

London EC1M 5SA tel. (020) 7336 8445 Tues., Weds., Thurs. 1pm – 4pm

E-mail: [Youngminds@Ukonline.co.uk](mailto:Youngminds@Ukonline.co.uk)

**Young MINDS Parents Information Service** 0800 018 2138

**Off The Record** 0808 808 9120

Helpline times: 9.30-20.00 Mon / Tues / Wed

Drop-in times: 11.30-17.00 Mon / Tues / Wed

**Bristol Crisis Service for Women** National helpline (0117) 925 1119

PO BOX 654 Fri. and Sat. 9pm– 2.30am Bristol Sun. 6pm-9pm

Avon BS99 IXH

[www.selfinjurysupport.org.uk/self-injury-self-help-ideas](http://www.selfinjurysupport.org.uk/self-injury-self-help-ideas)

**Samaritans** 08457 90 90 90 24 hour helpline

**Childline** 0800 1111 24 hr helpline

**CALM** 0800 58 58 58 (Campaign Against Living Miserably) 7 days a week 5pm –3am Helpline for males 15 – 24

**Indigo Project** supports young people aged 13-24 in Bristol and South Gloucestershire

[www.indigoproject.co.uk](http://www.indigoproject.co.uk)

**HOPELineUK** 0870 170 4000

[www.papyrus-uk.org](http://www.papyrus-uk.org)

[www.selfharmuk.org](http://www.selfharmuk.org)

**TESS** Text/email support for 11-25 year old women who self-injure. Text number 0780 047 2908 accessed through [www.selfinjury.org.uk](http://www.selfinjury.org.uk)

### **Web sites**

Reasonably priced information booklets for young people who self-harm, their family and friends.

[www.basementproject.co.uk](http://www.basementproject.co.uk)

### **National Self-Harm Network**

PO BOX 16190

London

NW1 3WW [www.nshn.co.uk](http://www.nshn.co.uk)

[www.teachers.gov.uk/teachingandlearning/library/self-harm/](http://www.teachers.gov.uk/teachingandlearning/library/self-harm/)

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[www.scie.org.uk/publications/briefings/briefing16/index.asp#contents](http://www.scie.org.uk/publications/briefings/briefing16/index.asp#contents)

[www.cde.state.co.us/ssw/download/pdf/SSWConf2005\\_Finger\\_Jennifer\\_Self-Injury\\_CSSWA\\_Handout.pdf](http://www.cde.state.co.us/ssw/download/pdf/SSWConf2005_Finger_Jennifer_Self-Injury_CSSWA_Handout.pdf)

Handout.pdf

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