

## **MANAGING SELF-HARM POLICY**

Approved and signed by the Board of Trustees 8/12/16

R	enewal	date.					

## WHAT IS SELF-HARM?

Self-harm describes a wide range of behaviours that people use with the intent of deliberately causing harm to one's own body.

This includes, but is not limited to:

- Cutting, scratching, scraping or picking skin
- Swallowing inedible objects
- Taking an overdose of prescription or non-prescription drugs
- 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

Recent research indicates that up to one in ten young people in the UK engage in self-harming behaviours; one in fifteen young people have deliberately self-harmed at some point. The most common age is between the ages of 11 and 25. Around four times as many girls as boys self-harm.

Self-harm is a coping mechanism and it is more important to recognise and respond to the underlying reasons.

The following risk factors, particularly in combination, may make a young person particularly vulnerable to self-harm.

- Depression/anxiety
- Poor communication skills
- Low self-esteem
- Poor problem solving skills
- Hopelessness
- Impulsivity
- Family Factors
- Social Factors

## THE PROCESS OF REFERRAL

Discovery MAT aims to detect and address problems in their earliest stages. There is a fine line between appropriate responsiveness and inappropriate intrusiveness into the personal lives of our children and their families. However, all staff must respond to well-being and welfare concerns of our children, no matter what. If any staff member is concerned about the wellbeing of a student, or has reason to believe that a child is at risk of self-harm, they should follow the normal 'Safeguarding' procedures, as outlined in the MAT's Safeguarding Policy. If any member of staff feels that a child is in immediate danger of harm, the Designated Safeguarding Lead should be informed immediately.