



Broadway Academy Trust Policies

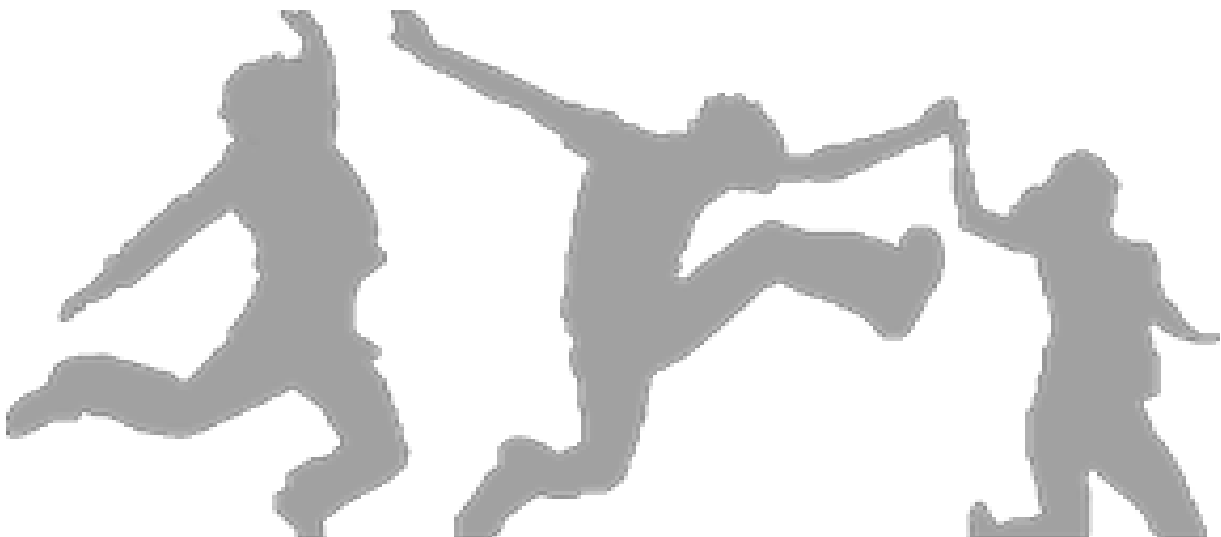
Our Children. Our Community. Believe it can be done!

Self-Harm Policy

Approved by: Deep Experience/Support Committee

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1. Introduction

Recent research indicates that up to one in ten young people in the UK engage in self-harm behaviours, and that this figure is higher amongst specific populations, specifically those with special educational needs such as neuro diversities.

Academy staff can play an important role in supporting students who self-harm, their peers and parents.

2. Purpose

In keeping with the Academy's values, vision and aims, this policy aims to address the issue of self-harm by providing clear guidelines regarding the following:

- how to deal with students who self-injure and how to offer support in the short and long-term
- providing support depending upon the individual needs of the student.
- helping all students improve their self-esteem and emotional literacy
- how to support staff members who encounter a student who has self-harmed or injured.
- how to prevent and minimise self-harm clusters across Academy
- having clear guidelines for staff when having to support a student and their peers following a self-harm incident, including – reporting procedures. who needs to be informed, appropriate medical assistance, contacting parents, and the involvement of outside agencies
- education about self-harm for students and staff
- increasing staff and students understanding and awareness of self-harm
- alerting staff to warning signs and risk factors regarding self-harm
- providing support to students who self-harm, their peers and parents/carers

3. Definition of self-harm

Self-harm is any deliberate, non-suicidal behaviour that inflicts physical harm on a person's own body that is aimed at relieving emotional distress. This is any behaviour where the intent is to deliberately cause harm to one's own body for example:

- cutting, scratching, scraping or picking skin
- swallowing inedible objects
- taking an overdose of prescription or non-prescription drugs –without the intent of overdosing
- 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

4. Risk factors associated with self-harm

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

Individual Factors

- Mental health disorders including depression and eating disorders
- Depression / anxiety
- Poor communication skills
- Low self-esteem
- Poor problem-solving skills
- Negative thought patterns
- Risk taking behaviours
- Hopelessness
- Impulsivity
- Drug or alcohol abuse
- Abuse – sexual, physical and emotional
- Recent trauma e.g. death of relative, parental divorce
- Sudden changes in behaviour and academic performance
- Relationship breakdowns
- Stress

Family Factors

- Unreasonable expectations
- Neglect or physical, sexual or emotional abuse
- Poor parental relationships and arguments
- Depression, self-harm or suicide in the family

Social Factors

- Difficulty in making relationships / loneliness
- Being bullied or rejected by peers

5. Warning Signs

5.1 Academy 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. Staff observing any of the listed warning signs should seek immediate advice from one of the Designated Safeguarding Leads (DSLs) and log the concern on MYconcern.

5.2 Warning signs 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
- abusing drugs or alcohol
- expressing feelings of failure, uselessness or loss of hope
- changes in clothing e.g. becoming a goth

6. Suicide

- 6.1 While self-harm and suicide are separate, those who self-injure are in emotional distress, and those who end their lives are also in emotional distress. It is vital that all emotional distress is taken seriously to minimise the chances of self-harm, and suicide. All talk of suicide and warning signs must be taken extremely seriously.

7. Roles and responsibilities of the Headteacher/CEO, staff, and governors

- 7.1 The headteacher/CEO will:

- Appoint a senior team of DSLs who will be responsible for self-harm matters, and liaise with the students, parents, the pastoral team and other staff members.
- Ensure that the DSLs receive appropriate training about self-harm
- Ensure that the self-harm policy is followed by all members of staff

- 7.2 The governing board will:

- Ensure self-harm education is in the Academy curriculum and , and how it is addressed
- Ensure that education about self-harm neither promotes nor stigmatises self-harm
- Look at provisions for people who self-injure, such as long-sleeved uniforms and PE kits, time out of lessons when under intense stress and reasonable adjustments to timetables

- 7.3 All staff and teachers are expected to:

- Listen to students in emotional distress calmly and in a non-judgemental way.
- Report self-harm to the designated staff member(s) for self-harm. Be clear of the timescale in which this is expected.
- Not make promises (e.g. assuring confidentiality) which can't be kept. Reassure students that speaking about issues can activate a support process and appropriate help.
- Guide students towards seeking positive wellbeing
- Promoting problem-solving techniques, resilience and strategies for managing stress in a non-harmful way.
- Signposting and enabling students to find sources of help and support
- Provide accurate and up to date information about self-harm
- Widen students' own knowledge about self-harm and mental health disorders
- Be aware of health and safety issues such as first-aid and clearing up if a self-harm incident takes place at the Academy
- Be aware of their legal responsibilities – when they can help, and when they cannot

- 7.4 Students may choose to confide in a member of the Academy staff if they are concerned about their own welfare, or that of a peer. Academy staff may experience a range of feelings in response to self-harm in a student such as anger, sadness, shock, disbelief, guilt, helplessness, disgust and rejection. To offer the best possible help to students it is important to try and maintain a supportive and open attitude – a student who has chosen to discuss their

concerns with a member of the Academy staff is showing a considerable amount of courage and trust.

Confidentiality

- 7.5 Students need to be made aware that it is not possible for staff to offer complete confidentiality. It is important not to make promises of confidentiality that cannot be kept even if a student puts pressure on you to do so. **If you consider a student is at serious risk of harming themselves then confidentiality cannot be kept.**

Action in the event of actual or suspected self-harm

- 7.6 Any member of staff who is aware of a student engaging in or suspected to be at risk of engaging in self-harm should consult one of the designated Safeguarding leads (DSLs) immediately and record on MYconcern. Following the report, the Designated Safeguarding Lead will decide on the appropriate course of action. This may include:

- Contacting parents / carers
- Arranging professional assistance e.g. doctor, nurse, social services
- Arranging an appointment with a counsellor
- Immediately removing the student from lessons if their remaining in class is likely to cause further distress to themselves or their peers
- If a student has self-harmed in school, first aid must be administered immediately
- The First Aider must complete the self-harm log to monitor the frequency of incidents
- In the case of an acutely distressed student, the immediate safety of the student is paramount, and an adult should remain with the student at all times.

- 7.7 The Designated Safeguarding Lead(s) will:

- Keep records of self-harm incidents and concerns
- Liaise with local services about help available for people who self-injure
- Keep up to date with information about self-harm
- Liaise with the head teacher and/or Senior DSL
- Contact parent(s) at the appropriate time(s). Involve the students in this process. Inform the parent(s) about appropriate help and support for their child which is available. Monitor the student's progress following an incident
- Know when people other than parents (e.g., social workers, educational psychologists) need to be informed
- Know when to seek help to deal with their own feelings and distress.

- 7.8 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

- 7.9 Parents will be encouraged to:

- Endorse the Academy's approach to self-harm education and pastoral care

- Work in partnership with the Academy

8. Arrangements for monitoring and evaluation

Success will be measured frequently. This can include feed-back from parents and students as to how a self-harm incident/case has been dealt with.

9. Further Considerations

- 9.1 Any meetings with a student, their parents or their peers regarding self-harm should be recorded on My Concern in writing including:
 - Dates and times
 - Any action/safety plans formulated (Appendix C)
 - Concerns raised
 - Details of anyone else who has been informed
- 9.2 It is important to encourage students to let you know if one of their group is in distress, upset or showing signs of self-harming. Friends can worry about betraying confidences so they need to know that self-harm can be very dangerous and that by seeking help and advice for a friend they are taking responsible action and being a good friend. They should also be aware that their friend will be treated in a caring and supportive manner.
- 9.3 The peer group of a young person who self-harms may value the opportunity to talk to a member of staff either individually or in a small group. Any member of staff wishing for further advice on this should consult one of the designated teachers for safeguarding children.
- 9.4 When a young person is self-harming, it is important to be vigilant in case close contacts with the individual are also self-harming. Occasionally schools discover that a number of students in the same peer group are harming themselves, this is known as a self-harm cluster.

10. Responding to Group Self-Harm

Schools and colleges are increasingly reporting incidences of group self-harm which consist of:

- A group of students self-harming together
- Usually cutting or burning
- More common amongst some social groups
- Injuries are usually flaunted rather than hidden

Staff may observe self-harm trends with a range of students across different year groups participating in a specific form of self-harm.

Group self-harm usually has entirely different motivations than individual self-harm and should be addressed primarily as a behavioural issue. The group should be addressed as a whole, and the appropriate policies implemented.

The following rules should be adhered to:

- Injuries must be covered
- Long sleeves in PE if necessary
- Self-harm incidents should be responded to dispassionately and practically

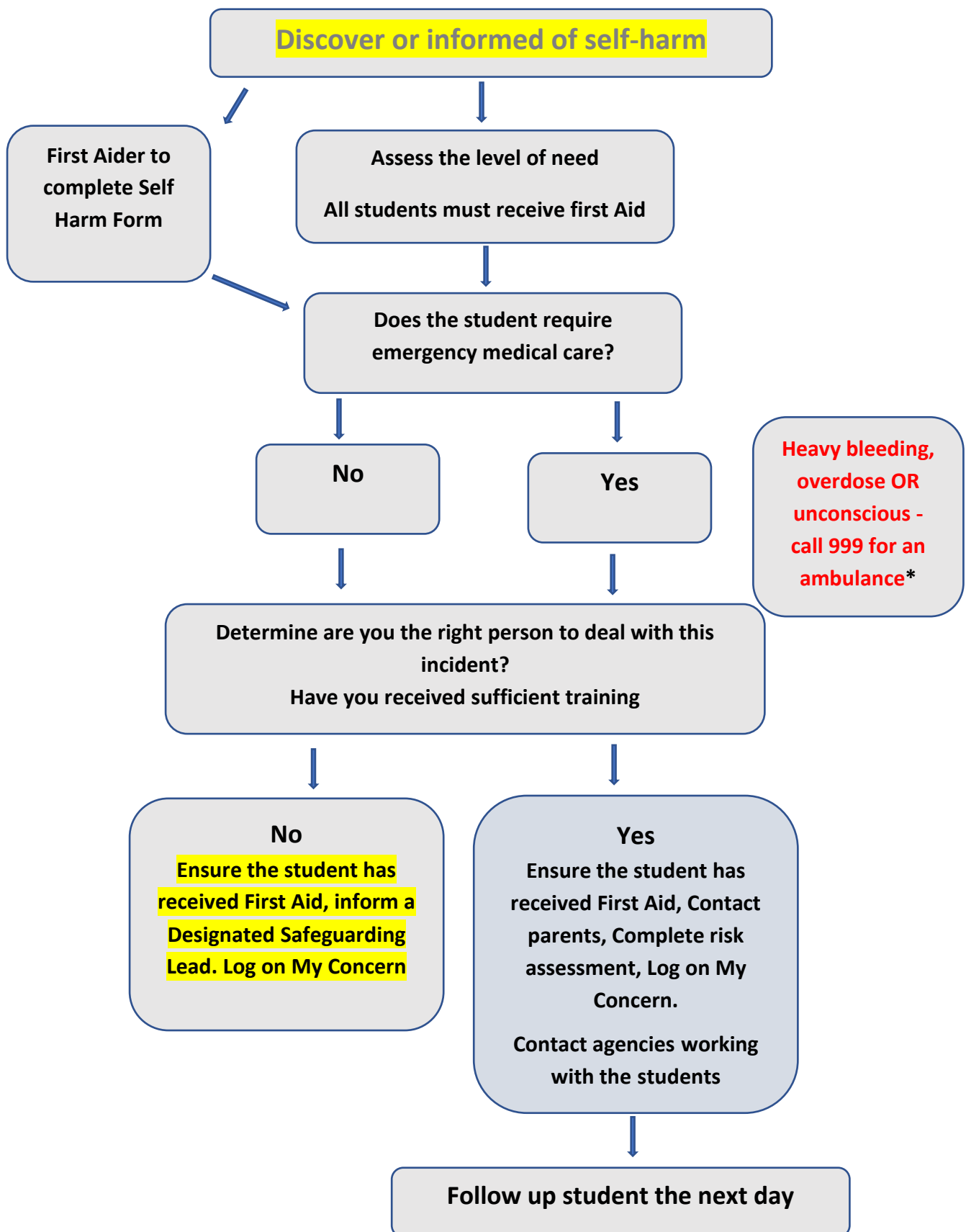
In addition to addressing the group, it is important to talk privately with each individual as a minority may develop a deeper psychological dependence on self-harm. Individuals should also be followed up with some months later as any student who has self-harmed once is more likely than their peers to turn to secretly self-harming in the future as a means of coping with difficult situations.

11. Relationship to other policies

This policy should be used in conjunction with:

- SEN and Disability policy
- Inclusion policy
- Safeguarding and Child Protection policy
- Personal Development Programme
- Health and Safety policy
- Behaviour policy

Appendix A - Flow Chart for Managing Self-Harm

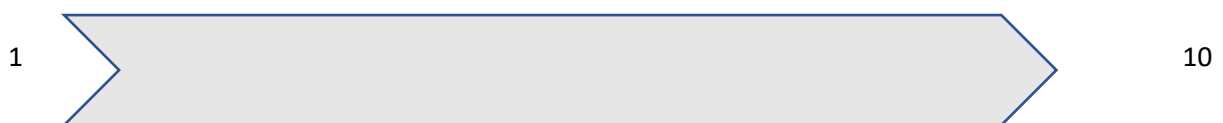


Appendix B

Self-harm Report Form

Student Name	Form	Date
Time of self-harm	Name of staff reporting incident	
Location on the body where injury sustained and type of injury	What did the young person do?	
When did self-harm take place?	What was used to self-harm?	
Initial staff member who self-injury was reported to	DSL who self-injury was reported to	

Degree of intent and risk of further self-harm – assess on the scale below,



Indication of stress

Wanting to end life

Next Steps

[school-s-guide-to-self-harm-08-2020.pdf](#)- Further guidance

Appendix C Self-Harm Safety Plan

My Self–Harm Safety Plan

Name:

Date:

Form:

What makes me feel safe?

The warning/trigger signs when I'm heading towards a potential crisis/meltdown: (e.g. thoughts, behaviours, or situations, isolating myself, arguing, sleeping excessively or unable to sleep)

The things which work to help me cope with how I am feeling: (e.g. distraction or relaxation, going for a walk, breathing, watching videos/films)

The people and places which help to distract me from the way I feel: (e.g. friend, coffee shop, park; be specific)

The people who can help me when I feel I'm in crisis: (e.g. if I can talk about how I feel, parent, friend, teacher; be specific)

Appendix C Self-Harm Safety Plan

The professionals or agencies who can help me when I feel I'm in crisis: (e.g. healthcare professionals, counsellor, a crisis line; be specific)
How I can make my environment safer: (e.g. give my medication to a teacher/parent for safe keeping, remove things I might use to harm myself)
What will help me get through right now: (e.g. place, person, self sooth box)
Important phone numbers or contacts: (e.g. GP, specific helpline)

If you have any questions relating to this form, please contact the Designated Safeguarding Lead for your year group:
Year 7 – Sam Taylor-Whitehead / Stuart Carroll
Year 8 – Andy Taylor / Stuart Carroll
Year 9 – Jeremy Mound / Stuart Carroll
Year 10 – Lindey Hesson / Grant Stewart
Year 11 – Hassan Khattak/ Grant Stewart
6th Form – Jurdene Godsil / Grant Stewart
or the Senior Mental Health Lead, Sarah Johns