

SACRED HEART HIGH SCHOOL



AWARENESS AND ROLES IN RELATION TO SELF HARM

NOVEMBER 2025

To be reviewed November 2026

*This Policy should be read in conjunction with
all other Sacred Heart High School Policies*

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1 INTRODUCTION

Recent research indicates that up to one in ten young people in the UK engage in self-harming behaviours, and that this figure is higher amongst specific populations, including young people with special educational needs. School staff can play an important role in preventing self-harm and also in supporting students, peers and parents of students currently engaging in self-harm. The school acknowledges the Online Safety Act 2023 and understands that this act criminalises any act that encourages or assists another person to seriously self-harm whether online or in person.

2 SCOPE

This document describes the school's approach to self-harm. This policy is intended as guidance for all staff including non-teaching staff and governors.

3 AIMS

- To increase understanding and awareness of self-harm
- To alert staff to warning signs and risk factors
- To provide support to staff dealing with students who self-harm
- To provide support to students who self-harm and their peers and parents/carers

4 DEFINITION OF SELF HARM

Self-harm is any behaviour where the intent is to deliberately cause harm to one's own body. Self-harm may include self-injury or self-poisoning. Examples of self-harm may include:

- 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
- Inappropriate use of aerosols
- Episodes of alcohol/drug/substance misuse
- Eating disorders

5 RISK FACTORS

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

5.1 Individual Factors:

- Depression / anxiety
- Poor communication skills
- Low self-esteem

- Poor problem-solving skills
- Hopelessness
- Impulsivity
- Drug or alcohol abuse
- Sexual identity

5.2 Family Factors

- Unreasonable expectations
- Neglect or physical, sexual or emotional abuse
- Poor parental relationships and arguments
- Depression, self-harm or suicide in the family
- Loss, separation and bereavement
- Domestic violence
- Drug/alcohol misuse

5.3 Social Factors

- Difficulty in making relationships / loneliness
- Being bullied or rejected by peers
- Easy availability of drugs/medication or methods of self harm

5.4 Triggers

- Difficulties in relationships with peers
- Bullying
- Self-harm behaviour in other pupils/portrayed in the media
- Exam pressure
- Feeling out of control
- Impact of past pandemic

6 WARNING SIGNS

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 immediately from the Designated Safeguarding Strategic Lead, Deputy Headteacher, Marian Conran or the Operational DSL, Niamh Braiden.

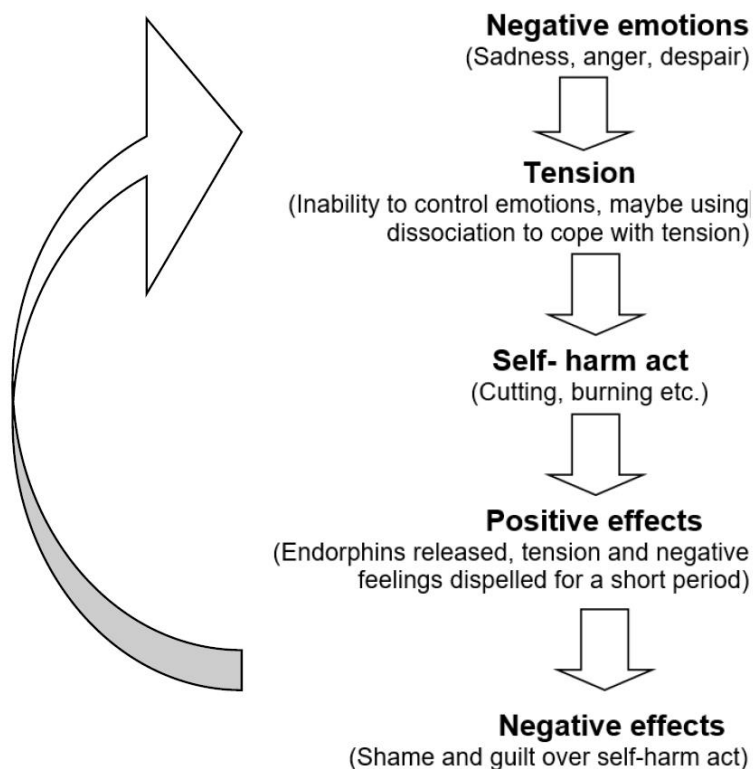
6.1 Possible warning signs

Possible 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

The Cycle of Self Harm



7 STAFF ROLES IN WORKING WITH STUDENTS WHO SELF HARM

Students may choose to confide in a member of school staff if they are concerned about their own welfare, or that of a peer. School staff may experience a range of strong feelings in response to self-harm in a student. However, in order 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 school staff is showing a considerable amount of courage and trust.

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

Any member of staff who is aware of a student engaging in (or suspected of engaging in) or at risk of engaging in self-harm, should consult one of the

designated safeguarding team and record concerns using the school's safeguarding software, SAFEGUARD.

The member of staff should:

- Endeavour to enable pupils to feel in control by asking what they would like to happen
- Reassure pupils they can get the help they need
- Listen actively
- Be non judgemental
- Avoid as far as possible asking a pupil to display injuries or scars or describe what they do.

Staff should not work with a pupil beyond their remit.

Following the report, the designated safeguarding lead will decide on the appropriate course of action. This may include:

- Assessing the situation administration of first aid or call for an ambulance or emergency assistance.
- 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
- **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**

Further guidance re practical support for students who self-harm can be found in Appendix 1.

Liaison with Child and Adolescent Mental Health Service (CAMHS)

The DSL can contact CAMHS service prior to any referral being made. In some situations, for example, following an emergency assessment with the school's onsite psychotherapists, it may be more appropriate for contact with CAMHS to be made by the psychotherapist.

8 FURTHER CONSIDERATIONS

Any meetings with a student, their parents or their peers regarding self-harm should be recorded in writing including:

- Dates and times
- Risk assessment and safety plan
- Concerns raised
- Details of anyone else who has been informed

This information should be stored in the student's child protection file.

It is important to encourage students to let staff know if one of their group is in trouble, 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 & being a good friend. They should also be aware that their friend will be treated in a caring and supportive manner.

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.

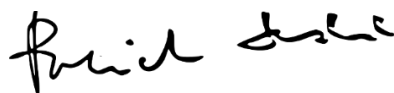
When a young person is self-harming it is important to be vigilant in case close contacts with the individual are also self-harming. Occasionally schools discover that a number of students in the same peer group are harming themselves.

9 RATIFICATION

This Policy has been reviewed and ratified by the Headteacher and the Ethos Committee of the Governing Body in November 2025. The Policy will be reviewed in November 2026.



Mrs S O'Donovan
Headteacher



Patrick Sadd
Chair of Ethos Committee

Appendix 1 Practical Strategies and Support

Understanding Why People Self-Harm

There are a wide range of reasons why people turn to self-harm and every single case is different but there are certain themes that recur time and time again. During adolescence, a time when young people are keen to assert their independence, they can begin to feel very out of control of their own lives. This can be for a number of reasons, perhaps their life is in chaos with difficult relationships at home or school, or perhaps they feel like they're being told what to do every minute of the day and don't have the freedom they'd like from parents or teachers. When you can't control anything else in your life, you can completely control your own body.

Release and Communication of Feelings

For people who struggle to communicate or express their feelings in another way, self-harm can feel like the only way to communicate and release those feelings.

For some people, physical pain can be a way of communicating emotional pain which is too hard to talk about. Or it can provide a more manageable form of pain that they can tend to rather than facing up to the emotional and psychological injuries they may be suffering with e.g. as a result of abuse.

Some people talk about using self-harm as a way of punishing themselves when they don't live up to expectations – this tends to either be young people who are perfectionist in nature, or those with a history of systematic abuse who have learned that they deserve to be punished.

Changing Self-harming Behaviours

Here are some simple ideas that you can use to support someone who is trying to reduce how much they self-harm. Be realistic in your expectations and be sure to celebrate progress, no matter how minimal.

Time and Place People who frequently self-harm will often do so in the same place and at similar times each day. Talk to them about whether it's possible to try to disrupt this routine. Can you work with them to think of an alternative activity they might be able to do at their trigger time, or is there somewhere different they could go? As a minimum perhaps you can think with them about how to ensure they are not alone at the times when they are most vulnerable from self-harm. If it's not possible for them to be physically accompanied, you might suggest they phone a helpline such as Childline or the Samaritans so they feel less alone.

Means for Self-Harm Some people will always use the same implement to self-harm with. If they are ready, they might think about throwing away this implement. Doing so prematurely may leave them feeling very desperate and vulnerable so this needs to be carefully considered. If they are not yet ready to dispose of their implement then they might consider locking it away, either in a safety deposit box or even simply in a shoebox wrapped up with tape or ribbon. Making their preferred implement less available will provide valuable thinking time and remove some of the impulsivity from the act of self-harming, making it a little more likely they'll be able to think of an alternative coping mechanism.

Another helpful approach is to encourage them to reduce their easy access to items that might be used for self-harming. This might mean locking away or removing things like blades, knives and medicines where they cannot be so easily accessed.

Try to Break Rituals Self-harming activities can become highly ritualised, adding a feeling of control to the process and providing a sense of relief and release to the person harming. Trying to remove some of the more ritualised or repeated parts of their self-harming behaviours can reduce the reinforcement that young people feel from the activity. It also makes it harder for them to self-harm on auto pilot which, again, reduces the likelihood of them going through with an act of self-harm. If a young person feels comfortable enough to talk to you about their self-harm rituals, take a real interest and try to understand their motivations behind each part of the process.

Question why they do each thing and where possible make suggestions for alternative behaviours. Occasionally your words and questions will have an impact on the sufferer and play back to them during a self-harm act and empower them to stop.

Challenge Thoughts A more general approach to challenging self-harming behaviours is to challenge the thoughts and feelings that surround and trigger those behaviours. Often there are a whole host of negative thoughts that surround each act of self-harm which the sufferer never thinks to challenge. Explore these thoughts and actively challenge them, providing evidence to back up your viewpoint where you can; for example you might challenge the thought 'I'm a complete failure' with 'Do you think perhaps that your standards are unrealistic? Other people would be happy to get 60% on a test but you are upset because you got 80%. Why is 80% not good enough?' Or 'Would you consider your friend Daniel a failure if he'd scored 80% on that test? Why not...' Over time, you can encourage the sufferer to challenge their thoughts in the same way, but it is likely to take quite some time.

Useful sources of support

www.youngminds.org.uk – Young Minds are committed to supporting the emotional wellbeing of all pupils. This website has lots of resources and advice for teachers on a range of mental health issues. www.selfharm.co.uk – support for young people impacted by self-harm

Samaritans - The Samaritans helpline is available 24 hours a day 365 days a year and their trained advisers are a great source of support if you need to talk to someone. Helpline: 08457 90 90 90 | Email: Jo@Samaritans.org | Website: www.samaritans.org/

Papyrus - Papyrus is aimed specifically at preventing suicide in young people. They have a free UK helpline which provides support and advice for young people at risk or those who care about them. Helpline: 0800 068 41 41 | Email: pat@papyrus-uk.org | Website: www.papyrus-uk.org/

[Online Safety Act 2023](#)