

Self-harm Guidance for professionals working with children and young people

Suggestive signs / symptoms of self-harm:

- Peer behaviour
- Reluctance to change clothing, engage in sport, wear short sleeves
- Covered arms
- Withdrawal from peers
- Disclosure

Suggestive signs / symptoms of suicidal risk:

- Disclosure
- Behaviour change
- Cleanliness, Appearance
- Work
- Attendance
- Demeanour
- Withdrawn
- Depressed, dejected, disheartened
- Unmotivated, Listless
- Anger, irritability
- Altered sleep
- Altered appetite

NICE¹ defines Self harm as

'Intentional self-poisoning or injury, irrespective of the apparent purpose of the act'.

Are you a trusted adult concerned about SELF-HARM in a child or young person?

Remember: ASK - LISTEN - HELP

Level 1 - Step 1 Universal	Level 2 - Step 2 Early Help	Level 3 - Step 3 Full Assessment	Level 4 - Step 4 Specialist/ CAMHS	Level 4 – Step 5 Emergency Response
Presenting Complaint The child or young person has experimented with self-harm and has no intention to self-harm again.	Presenting Complaint The child or young person is continuing to self-harm and there are underlying issues causing distress.	Presenting Complaint The child or young person needs additional support to avoid serious harm (e.g. self-harm is increasing).	Presenting Complaint The child or young person requires an assessment of risk due to the serious harm caused by self-harm.	Presenting Complaint The child or young person's life or health is in immediate danger following self-harm (e.g. significant injury).
Background issues You have no other significant concerns about their safety or wellbeing. You or your agency is able to respond to the young person's needs.	Background issues Are other agencies involved? Are there other safeguarding issues to consider? Any mental wellbeing or resilience issues?	Background issues What other agencies are already involved? What other related safeguarding issues are known? Is depression, anxiety or psychosis a factor?	Background issues What other agencies are already involved? What other related safeguarding issues are known? Known depression, anxiety or psychosis?	
Presenting Factors Self-Harm as a coping mechanism. Protective Factors evident including good support network, hope of recovery, seeking help.	Presenting Factors Continuing to self-harm. Alcohol and / or substance use. Reluctance to share with support network or withdrawal from peers and / or family. Depression or anxiety.	Presenting Factors Increasing episodes of self-harm. Significant alcohol and / or substance use. Withdrawal from support network / peers / family. Depression, anxiety and / or psychosis.	Presenting Factors Currently self-harming to a serious degree/significant injury. Significant alcohol and / or substance use. Withdrawn from support network / peers / family. Depression, anxiety and / or psychosis.	
Initial Actions Acknowledge distress, identify options to address underlying difficulties and agree a plan with the YP. Clarify confidentiality and issues of consent*. Follow individual agency service protocol if in place. Check if the child or young person is getting the support they need from elsewhere.	Initial Actions Acknowledge distress, identify options to address underlying difficulties and agree a plan with young person including clear plan for follow up. Clarify confidentiality and encourage young person to talk to carers/parents and GP*. Follow individual agency service protocol if in place and refer to relevant agencies. Contact Children's Access Point to consider Team around the School. (Education) Contact Children's Access Point and begin Early Help Assessment (All Others)	Initial Actions Acknowledge distress, review plan with young person including follow up. Clarify confidentiality and encourage young person to talk to carers / parents and GP*. Follow individual agency service protocol. Contact Children's Access Point and begin Single Assessment procedures. Contact CAMHS for advice. Contact the CRISIS Team for advice.	Initial Actions Acknowledge distress, review plan with young person including follow up Clarify confidentiality and issues of consent*. Follow individual agency service protocol. Contact CAMHS or CRISIS team (if they need an assessment that day)	CALL 999

Encourage them to talk to their parents or another 'trusted adult' for help with any underlying problems and difficulties (*Every effort should be made to encourage the young person to speak to their parent/carer, if not you should inform them that you will be sharing your concerns with their parent/carer).

Always follow safeguarding guidance and procedures and keep records of your actions.

Be clear that information about them will be treated with respect but may be shared with others in their best interests.

Explain that a plan to help will be developed together by them, their family and the team of professionals around them.

¹ NICE – [National Institute for Health and Care Excellence](http://www.nice.org.uk)

Ask, Listen and Get help

ASK: although self-harm is often a hidden behaviour, the child or young person may give subtle signs that they want help. As a trusted adult, learn to be alert to these signs and respond to these invitations by being 'helpfully nosey'. Here are some simple tips for conversations about self-harm:

- Take all self-harm seriously
- Treat the child or young person with respect and empathise: get across that you care, and that you want to understand and to help
- Take a non-judgemental approach: reassure that you understand that self-harm may be helping the child or young person to cope at the moment
- Make sure the child or young person understands the limits of confidentiality.

Avoid:

- Reacting with strong or negative emotions: alarm or discomfort; asking abrupt or rapid questions; threatening or getting angry; making accusations, e.g. that the young person is attention-seeking; frustration if the support offered does not seem to be making a difference
- Too much focus on the self-harm itself: engaging in power struggles or demanding that self-harm stop; ignoring other warning signs; promising to keep things secret...
- Commenting, advising, or attempting to solve all their issues (in that first instance).

LISTEN: make yourself fully available at that moment in time when a child or young person seeks you out or responds to an invitation to talk further:

- Listen carefully in a calm and compassionate way
- Have your eyes, ears and body language open to what the young person has to say, without judging, or being shocked
- Show the young person they can trust that you will first hear what they have to say, and later support them if another professional needs to be involved.

GET HELP: in some instances, you/your agency may be able to respond to the child or young person's needs. This includes encouraging the child or young person to talk to their friends, their parents and other trusted adults about their thoughts and feelings. In other circumstances, you will need to help the child or young person get additional support.

What Children and Young People say about self-harm

National surveys: Young people say that conflicts with other people, for example, family members, siblings, teachers and boyfriends / girlfriends, are the most common reasons for self-harm. These conflicts could be about different things, but they often make young people feel pushed away, left out, unfairly criticised or out of control. Young people also report that they can feel embarrassed or ashamed about self-harming themselves, and that they fear being judged.

Some young people have also voiced concerns with the attitudes of front-line professionals and their perceived lack of understanding of self-harm. For example, young people seeking help in emergency departments have reported lack of privacy, with confidential matters discussed in open areas, and lack of respect. These attitudes and perceptions can have a negative effect on the ways in which young people access help and support; many young people report turning to their peers and/or to online support, instead of their GPs, teachers or parents.

What Parents/Carers say about self-harm:

Parents/carers often experience a range of emotions when they find out their child is self-harming. Shock, sadness, anger, disbelief and blame to name a few. Some parents have said they feel isolated and embarrassed because of the stigma attached to self-harm.

Parents have described negative reactions from family members and professionals and sometimes feel excluded from their child's care. Parents can say or do the 'wrong' things and can unintentionally make the situation worse, but equipped with the right information and support, parents/carers are in a really good position to support their child.

Parents/carers want to be able to help and understand how to support their child, but will often need advice or information on how best to do this.

What Professionals say about self-harm:

Research indicates that many professionals feel they need a deeper understanding of how to support young people who self-harm. They do not understand the reasons why young people self-harm and do not know what language to use when talking to a young person about self-harm.

Similarly, teachers felt 'helpless' and unsure of what they can say; 80% wanted clear practical advice and materials that they can share directly with young people.

Useful Contacts - Darlington Services

CAMHS Crisis	0191 4414733
CAMHS Single Point of Contact Referrals (address and email)	0300 1239296
The Mulberry Centre, The Rowan Building Darlington Memorial Hospital, Hollyhurst Road Darlington, DL3 6HX email: TEWV.CAMHSCountyDurhamDarlington@nhs.net	
Darlington	01325 736350
Children's Access Point (CAP)	01325 406222
Children's Early Help Co-ordinator	01325 405635
Recovery and Wellbeing (substance misuse) (SWITCH)	01325 267230

National & Local Information for Parents

Darlington Mind self-harm prevention project Tel 01325 283169
The project offers workshops, awareness sessions to young people (age 11-18)
Darlington Mind also offers counselling to young people affected with self-harm issues

Contact Details for self-harm project
(address and e-mail)

Darlington Mind
11 Borough Road
Darlington
DL1 1SQ
email: contactus@darlingtonmind.com
Website: www.darlingtonmind.com
Facebook: Darlington Mind Limited

Rollercoaster Parent Support Group Tel 0741538004
For parents who are supporting a child with mental health difficulties

If U Care Share Foundation: www.ifucareshare.co.uk Tel 0191 387 5661

MindEd for Families: www.minded.org.uk/families

YoungMinds: www.youngminds.org.uk Parents Helpline Tel 0808 802 5544
(free from mobiles and landlines)

Useful References

Darlington Child Protection Procedures

Darlington Child Protection Procedures can be found on the professional section of the Darlington [Safeguarding Partnership website](#)

Childline

Provides a free and confidential telephone service for children. Helpline: 0800 1111

www.childline.org.uk

National Self-Harm Network

UK charity offering support, advice and advocacy services to people affected by self-harm directly or in a care role.

www.nshn.co.uk/

Papyrus

Papyrus provide confidential help and advice to young people and anyone worried about a young person committing suicide. They also help others to prevent young suicide by working with and training professionals.

www.papyrus-uk.org

NHS 111

A service that has been introduced to make it easier for you to access local NHS healthcare services in England. You can call 111 when you need medical help fast, but it's not a 999 emergency.

The Samaritans

Provide a 24-hour service offering confidential emotional support to anyone who is in crisis.

Helpline: 08457 909090

Young Minds

Provides information and advice on child mental health issues and a Parent Helpline: 0800 802 5544

www.youngminds.org.uk

Head Meds

Provides general information about medication

www.headmeds.org.uk/about

Mental Health Foundation

UK charity for everyone's mental health with prevention at the heart of what they do.

www.mentalhealth.org.uk