



**Hanham  
Woods  
Academy**

Hanham Woods Academy  
Self Harm Policy

April 2020

For information and guidance and incorporating the Academy's vision and core values. It forms part of the portfolio of policies designed to keep students safe, happy and cared for.

Status: Approved

**HWA SELF-HARM POLICY**

<b>Policy Title</b>	Self-Harm Policy
<b>Function</b>	For information and guidance and incorporating the Academy's vision and core values. It forms part of the portfolio of policies designed to keep students safe, happy and cared for.
<b>Status</b>	Approved
<b>Audience</b>	Students, Parents, Councillors, Principal, Teachers, Support Staff, Local Authority
<b>Ownership / Implementation</b>	The Principal and the Academy Council have overall responsibility for ensuring that this policy is implemented.
<b>Implementation Date</b>	1 <sup>st</sup> May 2020
<b>Review period</b>	Three-Yearly
<b>Last Reviewed</b>	April 2020

## 1. Background

Our Academy is committed to safeguarding and promoting the welfare of students and expects all staff and volunteers to share this commitment. We endeavour to provide a safe and welcoming environment where children are respected and valued. We are alert to the signs of self-harming and follow our procedures to ensure that children receive effective support and protection. The Academy works in partnership with other children's services. The procedures contained in this policy apply to all staff and Academy Councillors.

This policy has been put in place to ensure that we have a consistent approach from staff who deal with students who self-harm. It is designed so that those students seeking help will feel secure in knowing how we can deal with them, giving staff a structure for the early identification of self-harming behaviour and for dealing with the problem.

## 2. Associated Guidance and Documentation

This Policy has been written as guidance for staff, parents or carers and young people with reference to the following guidance and documents:

1. Guidance for professionals working with children and young people who self-harm 2017 (<https://www.oxfordhealth.nhs.uk/harmless>)
2. Guidelines for professionals who work with children and young people who self-harm: B&NES CAMHS, Oxford Health NHS Foundation Trust
3. Hanham Woods Academy Safeguarding Policy
4. Hanham Woods Academy Mental Health & Emotional Wellbeing Policy
5. Hanham Woods Academy Behaviour Policy
6. Keeping Children Safe in Education, DfE, 2019
7. Mental health and behaviour in schools, DfE, November 2018

## 3. What is Self-Harm?

The nature and meaning of self-harm varies greatly from child to child and the reason or trigger for each action may differ on each occasion. Essentially though, self-harm is any behaviour where a person intentionally sets out to harm themselves. This may be an impulsive act or may be planned.

Self-harm is a relatively common problem that is frequently misunderstood and kept hidden. Therefore, it is not surprising that myths and stereotypes have grown around the subject. Most commonly there is a belief that self-harm is an 'attention seeking behaviour'

Given that most self-harm is carried out in private and over a long period before help is sought, it is hard to give credence to this perception. Another belief is that self-harm is something that groups of students do together. Whilst it is important to be aware that within friendship groups, some individuals may self-harm, it is rare that students self-harm in front of others. Self-harm is a term that is used to describe a range of actions and behaviour. It is important to be aware of signs that a student is self-harming. Below is a non-exhaustive list of some of the behaviours that some people might consider to be self-harm:

- Scratching or picking skin
- Cutting body
- Tying something around body

- Inserting things into body
- Scouring/scrubbing body excessively
- Hitting, punching, slapping self
- Pulling out hair
- Over/under eating
- Excessive drinking of alcohol
- Taking non-prescription drugs
- Burning or scalding
- Hitting walls with head and/or fist
- Taking an overdose or swallowing something dangerous
- Self-strangulation
- Risky behaviours such as running into the road

#### **4. Recent Trends Related to Self-Harm**

- 1 in 4 young people will have thoughts of self-harm over the course of a year.
- Of those who report thoughts of self-harm less than half will act on them and go on to harm themselves
- Average age to start self-harming is 13
- Around half of young people who self-harm will harm themselves more than once
- Ratio of male : female self-harm is approximately 1:4 (Hawton et al, 2002)
- 10.6% of secondary school students self-harm (Office of National Stats 2000)
- In the UK, suicide is the second most common cause of death for 15-24 year olds, after road traffic accidents
- Only 1:5 16 – 24 year old with suicidal thoughts would seek help from a GP (Samaritans 2003)
- 1 in 3 adolescents who die by suicide are under the influence of alcohol at the time of death
- 40-60% of suicides have at least one previous episode of deliberate self-harm (Hawton, 2004)

#### **5. Why Do People Self-Harm?**

During adolescence, students may encounter particularly painful emotional events for the first time. They often do not know where to go for help and have not developed sufficient problem-solving skills to overcome these difficulties on their own. As a result they experience feelings of helplessness and hopelessness, which can lead them to self-harm or attempt suicide.

The three most common reasons why young people self-harm are:

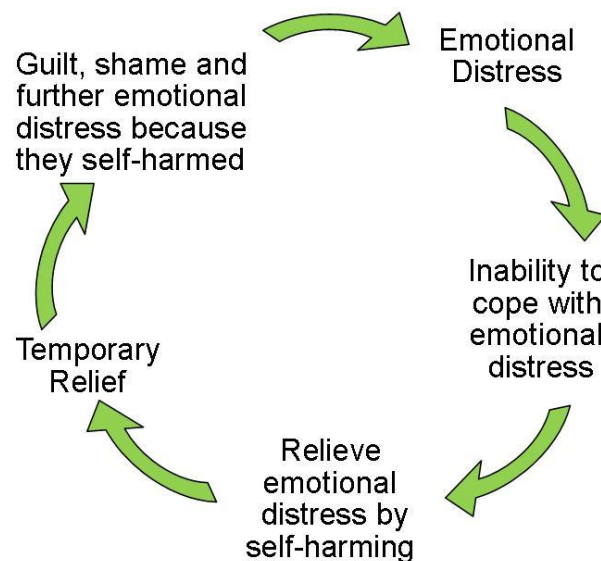
- Tension relief – a number of young people are unable to deal with their unpleasant feelings and find self-harm as a way of relieving stress and tension.

- Self-punishment– young people who self-harm often have low self-esteem and feel that they are worthless or bad people who should be punished.
- To express distress – for some young people self-harm is a way of showing others how bad they are feeling. They may use this as a way of reaching out to get help Other explanations from students about why they self-harm include:
- That physical pain is easier to control than emotional pain
- It is a way of coping with past and current events
- Rarely, it can be a way of becoming a part of a group
- Some students may only self-harm once or twice in response to a particular difficulty, however, it can also become a regular activity that is hard to stop and may indicate more serious and longstanding emotional distress.

It may be helpful to understand that when a student inflicts pain upon himself or herself the body responds by producing endorphins, a natural pain reliever that gives temporary relief or a feeling of peace. The addictive nature of this feeling can make self-harm difficult to stop.

Students who self-harm still feel pain, but some say the physical pain is easier to stand than the emotional/mental pain that led to the self-harm initially.

The following is an illustration of the cyclical nature of self-harm and demonstrates how such behaviour may become addictive.



## 6. How Can Staff Identify Signs of Self-Harming?

All staff at Hanham Woods Academy are expected to be vigilant and report concerns immediately, if they notice the following signs:

- Changes in clothing to cover parts of the body, e.g. wearing long sleeved tops
- Reluctance to participate in previously enjoyed physical activities, particularly those that involve wearing shorts or swimsuits, for example
- Changes in eating and/or sleeping habits

- Changes in consumption of drugs/alcohol
- Changes in levels of activity or mood
- Increasing isolation from friends/family

Self-harm occurs more frequently in students with learning disabilities. In those with severe learning disabilities, self-harm can form part of the student's profile of behaviour (for example, a student with autism biting his/her arms repeatedly). Any change in the frequency, severity or site of self-harm in these students is a cause for concern. Self-harm may be the only way a student with communication difficulties can display her/his emotional distress.

Self-harm in younger students is unusual but not unknown, so it is really important to be aware that behaviours such as hair pulling, small surface cuts, head banging and self-grazing/scratching may be signs of self-harm.

## **7. Factors which may contribute to self-harming**

Staff should be aware that the factors that students identify as contributing or triggering self-harm include:

- Being bullied
- Experiencing poor mental health
- Having a parent who has poor mental health
- Stress and worry about school work and exams. Feeling under pressure from family, school or peers to achieve or conform
- Feeling isolated
- Difficulties in peer relationships, including the breakdown of a relationship
- Not getting on with parents/carers or other family members
- Family relationship difficulties, including parents/carers separating or divorcing
- Bereavement
- Past experience of abuse (physical, sexual, emotional or neglect)
- Current experience of abuse (physical, sexual, emotional or neglect)
- Experience of domestic abuse
- The self-harm or suicide of someone close to them
- Confusion about sexuality or gender
- Low self-esteem
- Feeling unhappy with yourself
- Feeling isolated, rejected or bullied due to gender, race, culture, sexual orientation, disability or religion
- Being in trouble in the Academy or with the police
- Difficult times of the year (e.g. anniversaries, Christmas etc)
- Use of alcohol or drugs

- Feelings of rejection socially, or within their family
- Self-harm behaviour in social group
- Self-harm portrayed in the media

## 8. Suicidal Thoughts and Self-Harm

Self-harm by cutting is not usually associated with suicidal thoughts but as described previously, it can be thoughts or behaviours used as an expression of distress or to relieve distress.

Suicidal ideation (a term often used by mental health practitioners) is where a young person expresses a genuine desire to die. Thoughts of hopelessness such as “I wish I was dead” are common. It is therefore important to explore the meaning behind the words the young person says. This can be because a student has a serious depression with low self-esteem, low mood, inability to see that his/her situation could improve, nothing to live for and no chance of ever being happy. Suicidal ideation is rare. If staff encounter a student who demonstrates these thoughts they should immediately follow the protocols outlined in Section 9.

Frequent suicidal ideation with or without self-harm is a cause for referral for specialist assessment to consider a diagnosis of depression or other conditions, risk and treatment options.

## 9. Suicidal Thoughts and Self-Harm

Any member of the Academy staff who knows a student who may be thinking of self-harming must report this to the Designated Safeguarding Lead (DSL) using CPOMS.

### **What to do if a child discloses thoughts of self-harm and/or superficial injury**

- Keep calm and give reassurance to the student.
- Focus on the student, not the behaviour or reasons for it and remember the student may be reluctant to talk about self-harm.
- It is important not to make promises of confidentiality even though the student may put pressure on you to do so.
- Report the disclosure immediately to the Designated Safeguarding Lead using CPOMS or a paper copy of the CPOMS report concern form if the member of staff does not have access to CPOMS.
- The DSL will request for a member of staff (usually their Head of House) to inform the student's parents/carers of the situation and be actively involved in the handling of the situation unless there is some overriding reason not to. This may or may not include ensuring the student has received First Aid.
- The Designated Safeguarding Lead will then liaise with the Head of House. The Head of House will take the lead in completing the harmLESS online assessment and following the harmLESS guidelines found in Appendix A, B and C for creating a plan of support for the student.

This Assessment can be found online here: <https://www.harmless.nhs.uk/assessment/>

The outcome and details of the assessment should be added to CPOMS.

- Where self-harm is related to issues of Child Protection, the Hanham Woods Academy Safeguarding policy must be followed by all staff. There must be no promise of confidentiality made to the student and they must be told that the DSL will be informed.
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- If there are no child-protection concerns and it is not deemed a referral to CAMHS is required then the following procedures may be considered as part of the harmLESS action plan:
  - Pastoral Support from Head of House
  - An Early Help Assessment could be completed Referral to:
  - School Nurse
  - Academy Pastoral Intervention Lead
  - Parenting Classes and free online virtual college course on parenting children that self-harm
  - Youth Workers
  - Social Care
  - Off the Record, Kooth, Creative Youth Network
- It may be necessary to hold a multi-agency meeting with those involved to discuss the way forward. If this is the case then the procedures laid down in the Safeguarding Policy should be followed.
- The Head of House will report all of the actions taken using CPOMS.

Please include the following in a typical CPOMS entry:

1. Details of parent/carer contact
2. Details of any underlying causes
3. Outcome of the harmLESS assessment (Appendix B)
4. Level of support and details of strategies put in place from list of harmLESS strategies (Appendix C)

<b>Overview of harmless Strategies (Appendix C and D)</b>			
<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Level 4</b>
Level 1 harmLESS support plan	Level 2 harmLESS support plan	Level 3 CAMHS referral plan	Level 4 Urgent CAMHS referral plan
Provide basic information about self-harming	Provide basic information about self-harming	Provide basic information about self-harming	HWA Risk Assessment
Create and give the student a copy of the safety plan	Create and give the student a copy of the safety plan	Create and give the student a copy of the safety plan	Provide basic information about self-harming
Arrange a follow up meeting with student	Arrange a follow up meeting with student	Arrange a follow up meeting with student	Create and give the student a copy of the safety plan
	Tutor and Teacher Message	Arrange a face-to-face meeting with parent to offer support for the family and to share plan. Have them fill out an information sharing consent form. Support in making a GP appointment.	Arrange a follow up meeting with student
			Arrange a face-to-face meeting with parent to offer support for the family and to share plan. Have them fill out an information sharing consent form. Support in



Overview of harmless Strategies (Appendix C and D)			
		Tutor and Teacher Message  Work with GP to submit a CAMHS referral	making a GP appointment.  Tutor and Teacher Message  Make an urgent phone call to CAMHS and coordinate with GP to make an urgent referral.

5. A copy of the risk assessment (Level 4)
6. Copies of all documentation for 4 and 5 should be uploaded to CPOMS
7. Details of any further support put in place for the child e.g. school nurse or Pastoral Intervention Lead support etc.

**What to do if a student engages in serious self-harm with/without suicidal ideation, requiring medical treatment. e.g. injury or overdose (however small).**

Required action is the same as above but also includes:

- If a member of staff finds that a student is in possession of dangerous equipment then a member of the Student Welfare Team or the Safeguarding Team should be contacted via email or radio and a the 'Lifeboat' option on SIMS should be used by the member of staff to alert First Aid.
- First Aid should come to the student and they should then take the student to Student Services for assessment and care. If appropriate, emergency services may be called.
- Parents/Carers should be informed and in some cases asked to come and meet with a member of staff at the Academy. A joint decision should be made on whether the student is well enough to remain in the academy.
- If the student is in hospital - a CAMHS Referral may be activated by the hospital and the School Nurse will be informed.

## 10. Confidentiality

Confidentiality is a key concern for students; however, Hanham Woods Academy's Safeguarding Policy states students need to know that it is not possible to offer unconditional confidentiality. If you consider that a student is at risk of seriously harming him/herself or others then confidentiality cannot be kept. It is important not to make promises of confidentiality that you cannot keep, even though the student may put pressure on you to do so. If this is explained at the outset of any meeting the student can make an informed decision as to how much information s/he wishes to divulge.

## 11. How to Help a Student who Self-Harms

Continued support for a student who self-harms will normally be undertaken by a Head of House or an external specialist. It may be that a student identifies an alternative member of staff who they wish to support them. The protocols in Appendix A, B and C should be used by a Head of House to support the young person when directed to do so by the DSL or a Deputy DSL.

The two main skills to employ when exploring these issues are **effective listening** skills and **honest talking**, for example:

- Let the student know you care and that s/he is not alone.
- Help the student express his/her emotions.
- Be an active listener; use your eyes as well as your ears to truly pay attention to what someone is saying or not saying. Watch the student's facial expression and the posture that accompanies the words s/he is speaking. These will all give clues as to how someone is truly feeling.
- Empathise with the student – imagine walking in his/her shoes.
- Be positive about what the student is saying without being dismissive.
- Know when to listen and when to talk.
- Do not try to solve the problem or say the "right" thing.
- Don't give advice too quickly or evaluate how the students are feeling and defining their experiences for them.
- Be aware of what you can and cannot do to help, and be prepared to discuss this with the student sensitively. Do not make promises you cannot keep.
- Use open questions rather than closed ones to help the student explore his/her concerns.
- Encourage and support the student to talk to others, such as parents/carers or other professionals.
- Encourage and support the student in seeking appropriate help.
- Do make sure you have an opportunity to "debrief" if necessary following a disclosure.
- Do not attempt to keep information to yourself, but share it with an appropriate colleague.

### **Tips for developing an action plan together**

It is important that students feel that their concerns are being taken seriously and that they have an element of control over the process. A jointly negotiated action plan is a useful way of providing this. Action plans need to have achievable targets and agreements about whom to involve and other possible next steps. Students may benefit from being encouraged to establish more positive daily routines (eating, sleeping etc) or may need to establish a greater social network, for example, by taking on a new activity.

### **Distraction activities**

Replacing the cutting or other forms of self-harm with safer activities can be a positive way of coping with the tension. What works depends on the reasons behind the self-harm. Activities that involve the emotions intensely can be helpful.

Examples:

- Contacting a friend, family member or helpline.
- Going for a walk/run or other forms of physical exercise.
- Getting out of the house and going to a public place e.g. a cinema.

- Reading a book.
- Keeping a diary.
- Looking after an animal.
- Watching TV.
- Listening to music or singing along.
- Going shopping.
- Cooking/eating your favourite meal.

### **Coping with distress using self-soothing**

- Using stress management techniques such as relaxation or massage.
- Having a bubble bath.
- Stroking a cat or other animal.
- Going to the park and looking at the things around you (birds, flowers, trees).
- Listening to the sounds as you walk.
- Listening to soothing music

Sometimes it can be helpful to find other ways of discharging emotion which are less damaging than self-harm:

- Clenching ice cubes in the hand until they melt.
- Writing, drawing and talking about feelings.
- Writing a letter expressing feelings, which need not be sent.
- Going into a field and “screaming”.
- Hitting a pillow /soft object.
- Listening to loud music
- Physical exercise

An important part of prevention of self-harm is having a supportive environment which is focused on building self-esteem and encouraging healthy peer relationships. An effective anti-bullying policy and a means of identifying and supporting students with emotional difficulties is an important aspect of this.

It is helpful to identify the support people in a student’s life and how to get in touch with them. Examples are friends, family, school teacher, counsellor. Knowing how to access a crisis line is also important.

In the longer term a student may need to develop ways of understanding and dealing with the underlying emotions and beliefs. Regular counselling/therapy may be helpful. Support from family members or carers are likely to be an important part of this.

It may also help if the student joins a group activity such as a youth club, a keep fit class or a Academy based club, which will provide opportunities for them to develop friendships and feel better about themselves. Learning stress management techniques, ways to keep safe and how to relax may also be useful.

## 12. Referrals

Details of how to make referrals to Child and Adolescent Mental Health Service (CAMHS) differ depending on the address of the student in question. Please look at which area the student falls into and call for support.

You may also ask for advice from the DSL who will assist you in making the referral.

### **North Bristol**

Woodland View  
Thornfield Road  
Brentry  
Bristol  
BS10 6NB  
Telephone: 0117 354 6800

### **South Bristol**

Osprey Court Unit 1,  
Hawkfield Business Park  
Whitchurch Lane  
Bristol  
BS14 OBB  
Telephone: 0117 3408121

### **East/Central Bristol**

43 Ducie Road  
Barton Hill  
Bristol  
BS5 0AX  
Telephone: 0117 3408600

### **Knowle Clinic**

Broadfield Road  
Knowle  
Bristol  
BS4 2UL  
Telephone: 0117 9190330

### **South Glos**

Kingswood Locality Hub  
Alma Road  
Kingswood  
Bristol  
BS15 4DA  
Telephone: 01454 862431

## 13. Support Organisations

Young Minds: 0808 802 5544 [www.youngminds.org.uk](http://www.youngminds.org.uk)

Samaritans: 08457 90 90 90

Child Line: 0800 1111 [www.childline.org.uk](http://www.childline.org.uk)

National Self-Harm network: 0800 622 6000 [www.nshn.co.uk](http://www.nshn.co.uk)

Kooth [www.kooth.com](http://www.kooth.com)

## Appendix A - How To Help A Student Who Self-Harms

Talking with students about self-harm is not always easy. It is difficult to talk about and many people worry that if they talk about self-harm they might make things worse. There is **NO EVIDENCE** to suggest that talking about self-harm will encourage young people to harm themselves. In fact feedback from students is that they want to talk. However, this needs to be done sensitively since our responses can sometimes be seen as uncaring.

**SLEEP** is an acronym to help you remember 5 important steps when talking with students about self-harm.

- Stop
- Listen
- Empathise
- Explore what they are saying
- Plan what you will do

### Stop and make time to talk

- Remember that if a student approaches **you** it is **you** that they want to talk with.
- The student may not find it easy to talk so they need to be given time. Don't try to have a rushed conversation.
- If you are in the middle of doing something or are busy then let the student know that you will make a time to talk with them. Make a time there and then so that they know you are taking them seriously.
- Give the student your undivided attention. Show them that they are important and that you care.
- Make sure that where you meet is private so that you can have an open and honest conversation without interruption.

### Listen to what the student is saying

- Listen carefully to what the student is saying. Listening signals that you care and will encourage them to talk.
- They may feel embarrassed or ashamed of what they have done so be patient and give them time.
- You don't have to jump in and try and fix things. Just listen to what the young person is saying

### Empathise with how they are feeling

- Students need to know that you understand how they are feeling.
- **DO NOT** be judgemental or shocked by what they say. This will signal that it is not OK to talk about these things and they may be less open.
- Empathise with how they are feeling. Acknowledge that they are feeling distressed and that they must be feeling really bad.
- Reassure them that things can change. They have made an important step by talking with you today.

### Explore what the young person is saying

- Be curious and explore what the student is really saying
- Students might say that "they wish they were dead". These words are frightening but they do not necessarily mean that the student person is suicidal.
- Often students say these things because they are feeling hopeless or frustrated and don't know what to do. Check this out and explore what the student means.
- The harmLESS questions provide a way of exploring this.

### Plan what you will do

- The final stage is to agree the next steps. In the majority of situations this can be agreed collaboratively with the student.
- You need to decide who you need to talk with in order to keep the student safe. A student may not always want their parents or carers to know but **if they are at risk of seriously hurting themselves their parents need to know.**
- Tell the student that you are concerned about their safety. **Because you are worried about them the DSL will need to speak with their parents/carers so that they can help the student to keep safe.**
- Section 9 of this policy (including the harmLESS questions) can help you plan what response is needed.

## Appendix B - Assessing self-harm and planning support

harmLESS provides a series of questions you can ask the young person.

The questionnaire and linked responses are designed to be completed online. The questionnaire can be found at: <https://www.harmless.nhs.uk/assessment/>

**This questionnaire should only be completed if a member of staff is directed to do so by the DSL or Deputy DSL.**

How they answer these questions will inform a plan about the type of support they might require.

If at the end of this you are still unsure or worried about a student then phone your local CAMHS team.

### HarmLESS Questions

**How** long have you had thoughts of wanting to hurt yourself?

- Less than 2 weeks       More than 2 weeks

Have you **actually** harmed yourself?

- Yes       No

Have you **recently** harmed yourself?

- Yes       No

Have you harmed yourself **more** than once?

- Yes       No

Have you ever thought that **life** is not worth living?

- Yes       No

Have you made any plans to **end** your life

- Yes       No

Have you ever **secretly** tried to end your life?

- Yes       No

Is anyone **supporting** you at the moment?

- Yes       No

**Appendix C – Creating an action plan with the student**

A completed questionnaire will produce one of the four responses below. The appropriate support plan for each level can be found in this appendix.

<b>Level 1 – First Step</b> It seems as if this student has thoughts of self-harm but has not actually acted on them
<b>Level 2 – Support</b> It seems as if this student has harmed themselves but is not actively planning to end their life
<b>Level 3 – CAMHS referral</b> It seems as if this student is regularly harming themselves but does not have any active plans to end their life.
<b>Level 4 – Urgent CAMHS referral</b> It seems as if this student is actively planning to end their life or has made a past serious suicide attempt

Copies of the support plan linked to each level can be found in **Appendix D**.

## Appendix D –Safety Plan

### Appendix D –Safety Plan

#### harmLESS – Level 1 - First Step Plan

Young person's name:

Date

- I will let your parent/carer know how you are feeling.
- I will let your tutor and teachers know how you are feeling

If you were worried about yourself, you could talk with

Friend

Adult

Professional involved

If you were very worried about your safety or had hurt yourself:

Talk with your GP

Go to the Accident & Emergency Department

If you are feeling that you might hurt yourself, these things might help you to ride out this feeling:

- Distracting activities (e.g. music, gaming, reading)
- Mood lifting activities (e.g. watch comedy, play instrument, internet)
- Physical activities (e.g. walking, running, cycling, dance)
- Social activities (e.g. text or talk to friends, social media)
- Other activities (e.g. playing with pets, hobbies, cooking)

1.

2.

3.

If you want more information, these links might be helpful:

- Information and advice about local support from "*on your mind*" ([www.onyourmind.org.uk](http://www.onyourmind.org.uk))
- Free online support from *Kooth* ([www.kooth.com](http://www.kooth.com))
- Information about *CAMHS* from ([www.oxfordhealth.nhs.uk/children-and-young-people](http://www.oxfordhealth.nhs.uk/children-and-young-people))

We will meet again to review how you are feeling on

Name of member of staff:

Copy for student and CPOMS



**harmLESS – Level 2 - Support Plan**

Young person's name:

Date

- I will let your parent/carer know how you are feeling.
- I will let your tutor and teachers know how you are feeling

If you were worried about yourself, you could talk with

Friend

Adult

If you are feeling down, these things might help you to ride out this feeling:

- Distracting activities (e.g. music, gaming, reading)
- Mood lifting activities (e.g. watch comedy, play instrument, internet)
- Physical activities (e.g. walking, running, cycling, dance)
- Social activities (e.g. text or talk to friends, social media)
- Other activities (e.g. playing with pets, hobbies, cooking)

1.

2.

3.

If you want more information, these links might be helpful:

- Information and advice about local support from "*on your mind*" ([www.onyourmind.org.uk](http://www.onyourmind.org.uk))
- Free online support from *Kooth* ([www.kooth.com](http://www.kooth.com))

We will meet again to review how you are feeling on

Helpers Name of member of staff:

Copy for student and CPOMS

**harmLESS – Level 3 - CAMHS support plan**

Young person's name:

Date

- I will write to CAMHS and ask them to meet with you.
- I will **let your parent/carer know** how you are feeling.
- I will **let your tutor and teachers know** how you are feeling

These are some things that could help you to keep safe:

**If you were worried** about yourself, you could talk with

Friend

Adult

Professional

**If you were very worried** about your safety or had hurt yourself:

Between 9:00am – 5:00pm, Monday to Friday, talk with your GP

After 5:00pm or at the weekends, telephone 111

Go to the Accident & Emergency Department

Any time contact Childline (0800 1111 or [www.childline.org.uk](http://www.childline.org.uk) )

**If you are feeling that you might hurt yourself, these things might help you to ride out this feeling:**

- Distracting activities (e.g. music, gaming, reading)
- Mood lifting activities (e.g. watch comedy, play instrument, internet)
- Physical activities (e.g. walking, running, cycling, dance)
- Social activities (e.g. text or talk to friends, social media)
- Other activities (e.g. playing with pets, hobbies, cooking)

1.

2.

3.

If you want more information, these links might be helpful:

- Information and advice about local support from "**on your mind**" ([www.onyourmind.org.uk](http://www.onyourmind.org.uk))
- Free online support from **Kooth** ([www.kooth.com](http://www.kooth.com))
- Information about **CAMHS** from ([www.oxfordhealth.nhs.uk/children-and-young-people](http://www.oxfordhealth.nhs.uk/children-and-young-people))

We will meet again to review how you are feeling on

Name of member of staff:

Copy for student and CPOMS

**harmLESS – Level 4 - Urgent CAMHS referral plan**

**Young person’s name:**

**Date**

- I will **telephone** CAMHS and ask them to meet with you.
- I will **let your parent/carer know** how you are feeling.
- I will **let your tutor and teachers know** how you are feeling

These are some things that could help you to keep safe:

**If you were worried** about yourself, you could talk with

Friend

Adult

Professional

**If you were very worried** about your safety or had hurt yourself:

Between 9:00am – 5:00pm, Monday to Friday, talk with your GP

After 5:00pm or at the weekends, telephone 111

Go to the Accident & Emergency Department

Any time contact Childline (0800 1111 or [www.childline.org.uk](http://www.childline.org.uk) )

**If you are feeling that you might hurt yourself, these things might help you to ride out this feeling:**

- Distracting activities (e.g. music, gaming, reading)
- Mood lifting activities (e.g. watch comedy, play instrument, internet)
- Physical activities (e.g. walking, running, cycling, dance)
- Social activities (e.g. text or talk to friends, social media)
- Other activities (e.g. playing with pets, hobbies, cooking)

1.

2.

3.

We will meet again to review how you are feeling on

Name of member of staff:

Copy for student and CPOMS

Appendix E – Risk Assessment Pro Forma



**Hanham Woods Academy Risk Assessment**

Risk Assessment topic:					
Location:					
Assessment leader:					
Others assisting:					
Date of assessment:					
Next review date:					
Last assessment date:					

<b>For Admin Unit use only</b>	
Reference number:	
Date added to Library:	

Assessment type:	Initial or Review*
Assessment category:	Specific or Generic*

\* delete as appropriate

Specific routine/ specific task	Hazard (for example what might go wrong or cause harm)	To who (for example Staff, Students, public)	Likely harm (type of injuries, illness or damage)	Existing control measures (for example policies, procedures, training, maintenance)	Likelihood	Severity	Risk rating



**Additional Control Measures/Actions**

Additional Control Measures	Name of person responsible for remedial action	Timescale	Date completed

**I have read and understood this risk assessment:**

Staff: \_\_\_\_\_ Date: \_\_\_\_\_  
 Parents: \_\_\_\_\_ Date: \_\_\_\_\_





**Risk Rating Key**

		Likelihood				
		1 Remote	2 Unlikely	3 Possible	4 Likely	5 Certain
<b>Severity</b>	1 Minor	1	2	3	4	5
	2 Harmful	2	4	6	8	10
	3 Serious	3	6	9	12	15
	4 Major	4	8	12	16	20
	5 Fatal/catastrophic	5	10	15	20	25

<b>Risk Rating</b>	
<b>1 to 6</b>	Allow the action to go ahead
<b>7 to 12</b>	Allow the actions to go ahead but monitor in case of changes
<b>13 to 18</b>	Some control measures may be required before the action goes ahead
<b>19 to 24</b>	Urgent control measures may be needed before the action goes ahead
<b>25</b>	Stop the process, unless benefits significantly outweigh the risk