Self-Harm Policy

Recognising, responding to and supporting children and young people who self-harm

Version 1.0 · 03/07/2026

1. Purpose and context

Self-harm is any behaviour by which a person deliberately causes harm to themselves, usually as a way of coping with overwhelming emotional distress. It is not usually a suicide attempt, though the two can be linked, and all self-harm must be taken seriously.

Swale Tutoring Service works predominantly with children and young people who have social, emotional and mental health (SEMH) needs, are EHCP-funded, and are often out of mainstream education. Self-harm is more common in this population than in the general school population. Tutors are frequently the trusted adult a young person sees most regularly, and are therefore well placed to notice concerns and respond well.

This policy sets out how Swale staff recognise, respond to, record and refer concerns about self-harm, and how staff themselves are supported.

2. Scope

This policy applies to the Director, the Designated Safeguarding Lead (DSL), all tutors, contractors and volunteers. It covers self-harm disclosed or observed in any setting in which Swale delivers — the pupil's home, community venues and online sessions.

3. Our approach

- We treat every disclosure or sign of self-harm as a safeguarding matter and follow the reporting route in the Safeguarding & Child Protection Policy.
- We respond calmly, without judgement, shock or criticism, and we do not promise confidentiality.
- We focus on help-seeking, professional support and keeping the young person safe. We do not suggest, endorse or teach any technique that relies on pain, physical discomfort or sensory shock as a coping strategy, as these reinforce harmful behaviour.
- We work in partnership with parents/carers and professionals, sharing information where it is necessary to protect the child.

4. Warning signs and risk factors

Self-harm is not always visible. Staff should be alert to possible signs, while recognising that any one sign may have another explanation:

- Unexplained cuts, bruises, burns or bite marks, particularly on wrists, arms, thighs or stomach
- Covering up — wearing long sleeves or trousers in warm conditions, reluctance to be seen
- Withdrawal, low mood, changes in eating or sleeping, or expressions of hopelessness or self-loathing
- Giving away possessions, or talking or writing about self-harm, worthlessness or wanting to disappear

Recognised risk factors include bereavement or loss, family breakdown, bullying, abuse, low self-esteem, exam or transition pressure, and co-existing anxiety, depression or neurodevelopmental conditions — many of which are common in our cohort.

5. Responding to a disclosure or discovery

- Stay calm and listen. Take the young person seriously and let them talk without interruption or expressed shock.
- Do not promise to keep it secret. Explain gently that, because you care about their safety, you need to pass this on to the Designated Safeguarding Lead.
- Assess immediate risk. If there is a serious injury or a risk to life, call 999 and contact the parent/carer. Do not leave the young person alone while at immediate risk.
- Do not investigate wounds or ask leading questions. Your role is to receive information and keep the child safe, not to diagnose or treat.
- Record factually and promptly using the child's own words, and report to the DSL the same day (see Safeguarding & Child Protection Policy).

6. Referral and ongoing support

The DSL decides on next steps, which may include: discussion with parents/carers (where safe to do so); a referral to the GP or Kent's Children and Young People's Mental Health Service; a safeguarding referral where abuse or neglect is suspected; and liaison with the pupil's school and EHCP caseworker.

- KCC Front Door (Integrated Children's Services): 03000 41 11 11 (office hours) · 03000 41 91 91 (out of hours) · frontdoor@kent.gov.uk
- Police: 999 (emergency) · 101 (non-emergency)
- GP / NHS 111 for urgent mental-health advice; 999 for immediate risk to life.
- Support organisations we may signpost families to: NSPCC 0808 800 5000; Childline 0800 1111; Samaritans 116 123; Papyrus HOPELINE247 0800 068 4141.

7. Recording and confidentiality

All records are factual, signed, dated, stored securely with restricted access, and handled in line with the Safeguarding & Child Protection and Data Protection policies. Information is shared only with those who need it to keep the child safe.

8. Supporting staff

Supporting a young person who self-harms can be distressing. Tutors are not expected to manage this alone. The DSL provides support and supervision, and staff may access their own GP or wellbeing support. Concerns must always be shared — never carried alone.

Approved by Shelley Wilson, Director & Designated Safeguarding Lead.
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