LUX MUNDI

LIGHT OF THE WORLD ~ CATHOLIC ACADEMY TRUST

Self-Harm Policy

CARDINAL POLE CATHOLIC SCHOOL

Status Public
2026

APPROVED BY THE LOCAL GOVERNING BODY ON:...30/09/2026.....

CHAIR OF GOVERNOR'S SIGNATURE:..... David R Evans. **.....**

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This policy is compliant with Keeping Children Safe in Education (KCSIE) 2026 Statutory Framework

Relationship to other policies and curriculum links: Child Protection, SEN, Health and Safety and Behaviour policies; PSHE curriculum.

This policy is to be read in conjunction with the school Safeguarding Policy and Keeping Children Safe in Education 2026.

Important contacts

ROLE/ORGANISATION	NAME	CONTACT DETAILS
Executive Headteacher	Adam Hall	enquiries@cardinalpole.co.uk
Head of School	Alex O'Donoghue	alexodonoghue@cardinalpole.co.uk
Designated safeguarding lead (DSL)	Peter McEvoy	petermcevoy@cardinalpole .co.uk
Chair of Governors	Fr David Evans	enquiries@cardinalpole.co.uk

Relationship to other policies and curriculum links: Child Protection, SEN, health and safety and behaviour policies; PSHE curriculum

This policy is to be read in conjunction with the school Safeguarding Policy and Keeping Children Safe in Education 2024

Mission Statement

Cardinal Pole Catholic School is a community of service, guiding young people on a path to opportunity, aspiration and reward, founded on Catholic values.

Introduction

At Cardinal Pole Catholic School, our Self Harm Policy recognises the link between self-harm and student stress and mental health. As a Christian learning community, we strive to create positive and supportive relationships between all our members. We understand how the importance of creating an environment where young people suffering from mental health issues that may cause them to self-harm can feel nurtured and supported.

Current guidance makes it clear that mental health issues are now formally recognized as conditions that can develop into direct safeguarding risks, giving staff clear authority to act early.

Aims

In keeping with the school's values, vision and aims, this policy aims to address the issue of self-harm by:

- Supporting pupils who self-harm.
- Providing support depending upon the individual needs of the pupil, including any SEND needs.
- Helping all pupils improve their self-esteem and emotional literacy.
- Supporting and advising staff members who come into contact with students who self-harm.
- Providing clear guidelines for staff about what to do when a pupil self-harms or if they are worried that they might be at risk of self-harming.
- Providing education and training about self-harm for pupils and staff.

Roles and Responsibilities

The Headteacher will:

1. Appoint a designated teacher (Designated Safeguarding Lead) to be responsible for self-harm. The DSL is Peter McEvoy, who is supported by a team of Deputy DSLs.
2. Ensure that the designated teacher receives appropriate training about self-harm
3. Ensure that Self-Harm Policy is followed by all members of staff.

The Governing Body will:

1. Decide, in consultation with the Headteacher and the PSHE Lead, how self-harm education is included in the school curriculum, and how it should be addressed
2. Ensure that education neither promotes nor stigmatizes self-harm
3. Look at provisions for students who self-harm, such as long-sleeved uniforms and PE kits, and time out of lessons when under intense stress.

All staff and teachers are expected to:

1. Listen to pupils in emotional distress calmly and in a non-judgemental way.
2. Immediately report any incident of self-harm to the Safeguarding Team.
3. Widen their own knowledge about self-harm and mental health disorders
4. Be aware of their legal responsibilities – when they can help, and when they cannot

The Designated Safeguarding Lead and Safeguarding Team will:

1. Keep records of self-harm incidents and concerns
2. Liaise with relevant services about help available for students who self-harm
3. Keep up-to-date with information about self-harm

4. Liaise with Headteacher
5. Contact parent(s) at the appropriate time(s). Involve the student in this process.
6. Inform the parent(s) about appropriate help and support for their child which is available. Monitor the pupil's progress following an incident
7. Decide when people other than parents (e.g. Children's Services, educational psychologists) need to be involved.

What is self-harm?

Self-harm is any deliberate, non-suicidal behaviour that inflicts physical harm on someone's own body and is aimed at relieving emotional distress. It can include cutting, scratching, burning, banging and bruising, overdosing (without suicidal intent) and deliberate bone-breaking/spraining.

Who self-harms?

About 1 in 10 young people will self-harm at some point and it can occur at any age. People who self-harm are more likely to have experienced physical, emotional or sexual abuse during childhood.

Factors associated with self-harm:

- Mental health disorders including depression and eating disorders
- Child-on-child abuse
- Drug/alcohol abuse, and other risk-taking behaviour
- Recent trauma e.g. death of relative, parental divorce
- Negative thought patterns, and low self-esteem
- Bullying
- Abuse – sexual, physical and emotional
- It is more common in young women than young men.
- Gay and bisexual people seem to be more likely to self-harm.
- Sometimes groups of young people self-harm together.
- Having a friend who self-harms may increase a young person's chances of self-harming as well.

Why do children self-harm?

A basic emotional need is not being met. If the act of self-harm becomes an addiction it is taking the place of the need that is not being met.

Emotional Distress

Young people often struggle with difficulties for some time before they self-harm. These difficulties may include:

- Physical or sexual abuse
- Feeling depressed
- Feeling bad about themselves
- Difficult relationship problems with boyfriend/girlfriend, friends and family members
- Stress due to school work and exams
- Being bullied
- Flashbacks to traumatic events in their lives.

In addition, young people may feel:

- That no-one listens to them
- Hopeless
- Isolated, alone
- Out of control
- Powerless - it feels as though there's nothing they can do to change anything.

For many young people there is a combination of factors at work.

Suicide

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-injury, and suicide. All talk of suicide and warning signs must be taken extremely seriously.

Warning Signs

All staff must remain highly alert to early behavioural indicators. KCSIE 2026 statutory guidance identifies particular warning signs that a pupil may be suffering from a mental health problem or engaging in self-harm. These are:

- **Significant changes in behaviour** (e.g., sudden irritability, academic drops, high anxiety).
- **Persistent difficulty sleeping** or appearing visibly exhausted during the school day.
- **Withdrawing from social situations**, isolating themselves from peer groups, or refusing to go out at break times.
- **Loss of interest** in extracurricular activities, sports, or hobbies they usually enjoy.
- **Physical signs of self-harm or self-neglect** (e.g., unexplained cuts, burns, scratches, wearing long sleeves in hot weather, noticeable changes in weight or eating patterns).

Staff Awareness

It can be very upsetting to be close to someone who self-harms but there are things you can do. The most important is to listen to them without judging them or being critical. This can be very hard if you are upset - and perhaps angry - about what they are doing. Try to concentrate on them rather than your own feelings, although this can be hard.

Do:

- Alert the School Safeguarding Team urgently to any instance of self-harm, however minor it may appear to be
- Show genuine concern
- Be calm and patient
- Give them a message of hope - things will get better

Don't:

- Keep it to yourself
- Show disappointment
- Give ultimatums
- Try to force the person to talk
- Try to force them to stop – remember self-harm might be keeping them safe.

Staff Response When Handling Disclosures

If a pupil explicitly discloses self-harm to a member of staff, the staff member must:

- **Maintain Calmness:** Listen calmly without judgment, shock, or visible distress.
- **Manage Confidentiality:** Explicitly tell the pupil: '*I am glad you told me, but I cannot keep this a secret. I must share this with the safeguarding team to ensure you get the right support.*'
- **Avoid Physical Investigation:** Never ask a child to show their self-harm injuries or scars. Leave physical assessments to trained medical professionals or the school nurse.

Procedure for dealing with incidents of self-harm

The Three-Stage Escalation Pathway

If a member of staff notices any of the warning signs or a pupil discloses self-harm, they must follow the **three-stage pathway** dictated by urgency:

STAGE 1: NOTICE	STAGE 2: RECORD	STAGE 3: REFER
↓	↓	↓
Staff are expected to actively spot the early warning signs of distress. Under the updated guidance from the DfE, staff do not need a clinical diagnosis or absolute certainty to act. They must apply professional curiosity when they observe physical signs of self-harm, sudden withdrawal, or severe behavioral shifts	Once a concern is identified, it must be documented immediately and objectively. Staff must record what they have seen or heard without adding personal assumptions, clinical language, or diagnoses. This entry must follow the internal school safeguarding system.	The concern must be referred immediately to the Designated Safeguarding Lead (DSL) or any member of the Safeguarding Team, who will then follow up the concern with the appropriate next steps.
If the child has an active injury requiring medical attention, or expresses immediate intent to end their life, 999 must be called immediately and the Safeguarding Team informed. The child must not be left unattended.		

Designated Safeguarding Lead (DSL) Duties & Parent Engagement

Upon receiving a self-harm or mental health referral, the DSL (or other member of the Safeguarding Team), will follow up the concern and take appropriate action. Under KCSIE 2026, the DSL has an explicitly stated duty to:

- **Consider Parent/Carer Engagement:** The DSL *must* proactively evaluate whether to inform parents or carers when a child requires mental health support.
- **The Safety Exception:** Parents will be notified **unless** the DSL assesses that doing so would place the child at further risk of significant harm, abuse, or neglect. If notification is withheld, the reasons must be formally documented on CPOMS, and a referral to Children's Social Care must be initiated.
- **Gender Questioning Considerations:** In line with KCSIE 2026 provisions, if a self-harming pupil is also questioning their gender, the school will ensure that support mechanisms do not place them at a disadvantage, balancing their complex mental health needs with statutory safeguarding duties.

Further information and support
https://www.samaritans.org/
https://www.thecalmzone.net/
https://www.childline.org.uk/
Call NHS 111 Option 2