Oldham Policy and Procedure in relation to Self-Harm

The following points should be read in conjunction with the Pathways represented on the following pages – these are dependent on the age of the child or young person.

1. All staff working with young people should receive training on safeguarding and – where appropriate – have access to the free, online training on self-harm offered by the Department of Health funded MindEd website: www.minded.org.uk.

2. All team managers should decide whether to have a designated officer (or officers) who will respond to self-harm incidents, or whether all staff should be trained to respond to incidents. If a team follows the ‘designated officer’ model, all staff and volunteers should know who the designated officers are.

3. Any member of staff who:
   a) witnesses a self-harm incident,
   b) hears about a self-harm incident, or
   c) is approached by a young person who is reporting a self-harm incident (their own or someone else) should follow the Oldham Self-Harm pathway for the relevant age.

4. Following any of the situations above (points 3a, b or c), the staff member should establish, first of all, whether the young person requires immediate first aid or other treatment.

5. If the young person does need first aid treatment, he or she should be accompanied to the organisation’s first-aider to receive appropriate care. Alongside this, the staff member should either follow the relevant steps in the Oldham pathway / speak to the organisation’s designated officer, who can then follow the pathway.

6. If the young person has injuries that require treatment in a hospital Emergency Department (ED), (such as cuts that are deep and/or bleed profusely, burns that are blistering or red, where the young person has lost consciousness or has recently overdosed or ingested harmful liquids*), then the staff member or designated officer should speak to the young person’s parents (where appropriate), arrange for the young person to attend ED and subsequently follow the relevant steps in the Stockport pathway.

*In distress, people may take larger than normal doses of medication or swallow something harmful. However, staff should be aware that hospital treatment may not always be necessary, for example, if the incident occurred some time ago, the designated officer should consult the CAMHS duty worker to discuss what treatment may be needed.
The referral pathways depend on the age of the young person;

- Under 16; Follow points 7-11
- 16-17; Follow points 12-15
- The Pathway for those young adults 18+ is illustrated on page 15.

7. Where the young person is under 16 - (see illustrated pathway)
   Where the young person is under 16 and does not require emergency first aid or medical treatment, (i.e. superficial self-harm) the staff member or designated officer should:
   a) Contact the duty officer at CAMHS for advice, where required;
   b) Where first aid, medical treatment, or support or advice from CAMHS is required, the staff member / designated officer must contact the young person’s parents / carers. The presumption should always be that parents / carers will be contacted, unless there are child protection reasons for not doing so.
   c) Complete the appropriate records following an incident or allegation of self-harm: by completing the self-harm incident form (or other suitable documentation)
   d) Agree how to / who should support the young person (e.g. member of staff / following discussion with CAMHS, arrange a referral to the service)
   e) Record what follow-up will be undertaken with the young person and set clear timescales for this.

8. Where incidents occur during normal office hours, organisations should be able to receive same-day telephone support, where required, from the duty officer at CAMHS.

9. Where organisations have significant concerns about a young person’s safety and have been unable to receive advice from CAMHS, it would be appropriate to request a same-day appointment with the young person’s GP—or suggest attending the nearest hospital Emergency Department (ED). However, staff should be aware of the CAMHS / Hospital pathway: attendance at ED does not guarantee a same-day response from the CAMHS service.

10. Where a young person is expressing suicidal thoughts, the designated officer should contact CAMHS immediately. If the young person is already in contact with CAMHS, the service may be able to see the young person for urgent risk assessment that day or the next—without the young person needing to visit ED. If the person is not known to CAMHS, CAMHS will advise that an urgent referral be sent to them by a professional (if they have consent from parents + all relevant history). As soon as CAMHS receive the referral, they will contact the family to offer an appointment, either the same day or the following day, depending on need.

11. Staff are often understandably concerned about the possible consequences of letting a distressed young person leave the premises. However, the designated officer is required to follow the steps set out in the pathway but is not responsible for ensuring the young person’s on-going safety.
12. Where the young person does not require emergency first aid or medical treatment, the staff member or designated officer should:
   a. Contact the duty officer at the RAID team for advice, where required;
   b. For a young person aged 16 or 17, consider whether the young person’s parents / carers should be contacted. The presumption should always be that parents / carers will be contacted, unless there are child protection reasons for not doing so.
   c. Complete the appropriate records following an incident or allegation of self-harm: by completing the self-harm incident form (or other suitable documentation)
   d. Agree how to / who should support the young person (e.g. member of staff / arrange a referral to the Access team or Psychological Wellbeing Service).
   e. Record what follow-up will be undertaken with the young person and set clear timescales for this.

13. Where organisations have significant concerns about a young person’s safety and have been unable to receive advice from the Access team, it would be appropriate to request a same-day appointment with the young person’s GP—or suggest attending the nearest hospital Emergency Department (ED).

14. Where a young person aged 16 or 17 is expressing suicidal thoughts, the designated officer should contact the RAID team immediately: 0161 627 8021. For a young person aged 18+, please contact the RAID team – or encourage the young person to contact them. Encourage the young person to think about how they can keep him or herself safe, by completing a written exercise, for example. Provide the young person with the contact details for the Samaritans – see contact details of support services on page 17.

15. Staff are often understandably concerned about the possible consequences of letting a distressed young person leave the premises. However, the designated officer is required to follow the steps set out in the pathway but is not responsible for ensuring the young person’s on-going safety.
The Oldham Self-Harm Pathway (for young people up to 16)

A young person has self-harmed or expressed an intention to self-harm

Is emergency treatment required? Seek help from a first aider if necessary. Young people should not be sent to a hospital Emergency Department unless there is a physical need to attend.

Yes

If first aid is necessary, ensure this is administered and then:

If a young person is contemplating suicide, contact the CAMHS duty officer immediately on 0161 627 8080

No

If the young person does not require first aid or emergency medical treatment:

- Do not leave an acutely distressed young person alone
- Either you or your team’s Designated Officer should then:
  - Consider contacting the CAMHS duty worker for advice on treatment, next steps etc.
  - In the case of an overdose, however small and whether recent or not, advice must be obtained from a medical practitioner, either the CAMHS duty worker on 0161 627 8080; or the young person should get a same day appointment with a GP, or go to the nearest Emergency Department.

Then:

- Clarify which member of staff is best placed to speak to the young person
- Indicate a willingness to talk to the young person about self-harm
- Be non-judgemental and validate the young person’s feelings
- Consider contacting the young person’s parents / carers and discuss confidentiality with the young person
- Complete the self-harm incident form – or other suitable incident reporting documentation
- Ensure that all your team’s safeguarding procedures have been followed – consider if there has been ‘significant harm’ and a EHO or safeguarding referral form need to be completed.
- Ensure you have your own support system in place to help you deal with the incident.
The Oldham Self-Harm Pathway (for young people aged 16 - 17)

A young person has self-harmed or expressed an intention to self-harm

Is emergency treatment required? Seek help from a first aider if necessary

*Young people should not be sent to a hospital Emergency Department unless this is clinically necessary.*

**Yes**

If first aid is necessary, ensure this is administered and then:

If treatment at a hospital Emergency Department (A&E) is clinically necessary:

(*Treatment will be needed for cuts that are deep and/or bleed profusely, burns that are blistering or red, where the young person has lost consciousness or has overdosed or ingested harmful liquids.)

- A team member / Designated Officer should:
  - Contact parents (unless there are child protection reasons for not doing so),
  - Accompany young person to hospital if needed
  - Following the incident:
    - Clarify which member of staff is best placed to speak to the young person
    - Indicate a willingness to talk to the young person about self-harm
    - Be non-judgmental and validate the young person’s feelings
    - Consider contacting the young person’s parents / carers and discuss confidentiality with the young person
    - Complete the self-harm incident form – or other suitable incident reporting documentation
    - Ensure that all your team’s safeguarding procedures have been followed – consider if there has been ‘significant harm’ and a EHO or safeguarding referral form need to be completed.

If the young person does not require first aid or other emergency medical treatment:

- Do not leave an acutely distressed young person alone

  - A team member or Designated Officer should follow the procedures below:

  **In the case of an over-dose of tablets, however small and whether recent or not, advice must be obtained from a medical practitioner—either by contacting the RAID team on 0161 6278021 or supporting the young person to get a same-day appointment with her or his GP. If this is not possible, the young person should go to the nearest hospital Emergency Department.**

  Then:
  - Clarify which member of staff is best placed to speak to the young person
  - Indicate a willingness to talk to the young person about self-harm
  - Be non-judgmental and validate the young person’s feelings
  - Consider contacting the young person’s parents / carers and discuss confidentiality with the young person
  - Complete the self-harm incident form – or other suitable incident reporting documentation
  - Ensure that all your team’s safeguarding procedures have been followed – consider if there has been ‘significant harm’ and a EHO or safeguarding referral form need to be completed.

If a young person is contemplating suicide, contact the RAID team immediately on 0161 627 8080

*Emergency* medical treatment:
The Oldham Self-Harm Pathway (for young people aged 18+)

A young person has self-harmed or expressed an intention to self-harm

Is emergency treatment required? Seek help from a first aider if necessary

**Young people should not be sent to a hospital Emergency Department unless this is clinically necessary.**

If treatment at a hospital Emergency Department (A&E) is clinically necessary: (*Treatment will be needed for cuts that are deep and/or bleed profusely, burns that are blistering or red, where the young person has lost consciousness or has overdosed or ingested harmful liquids.)

- The team member or Designated Officer should:
  - Contact parents / next of kin if this is appropriate
  - Accompany young person to hospital if needed
  - Following the incident:

If first aid is necessary, ensure this is administered and then:

If a young person is contemplating suicide, encourage them to call the RAID team on 0161 627 8080 or the Samaritans on 08457 90 90 90

- **Do not** leave an acutely distressed young person alone
- The team member or Designated Officer should follow the procedures below:

  **In the case of an over-dose of tablets, however small & whether recent or not, advice must be obtained from a medical practitioner—either by contacting the Access team on 0161 419 4678, or, if you are unable to get a response from them, the young person should get a same-day appointment with her or his GP or go to the nearest Emergency Department.**

Then:

- Clarify which member of staff is best placed to speak to the young person—usually a qualified college counsellor or mental health practitioner
- Ensure that all college safeguarding procedures have been followed—consider if there has been ‘significant harm’ and a EHO or safeguarding referral form need to be completed
- Ensure you have your own support system in place to help you deal with the incident
Pathway for Child & Adolescent Mental Health Services + Hospital Emergency Departments: Understanding the process for children aged under-16

The following pathway shows what happens if a young person attends a hospital Emergency Department at Royal Oldham Hospital as a result of self-harm (or other emotional, behavioural or mental health problem) Similar pathways operate across other Greater Manchester hospitals.

Young person under 16 attends hospital ED

- **NON-URGENT**
  - E.G. Minor cutting
  - Behavioural problems (that do not present with suicidal thoughts)
  - Gain parental / young person’s consent and refer to CAMHS
    - (Parents happy to take young person home and provide appropriate supervision)
  - CAMHS will contact parent to offer an initial assessment

- **URGENT**
  - Overdoses
  - Serious self-harm—deep lacerations, hanging, strangulation, attempted jumps
  - Suicidal thoughts
  - Admit to paediatric ward
    - Agrees
    - CAMHS will assess next working day or once they are medically fit.
    - Refuses / unsafe
      - If refuses or behaviour unsuitable for ward, follow emergency pathway

- **EMERGENCY**
  - Psychosis
  - Suicidal Intent
  - Mon-Fri 9-5
    - Contact CAMHS duty worker
  - Out of hours:
    - Contact Adult Psychiatry / Child & Adolescent Service / Child & Adolescent Consultant

NB: Young people who fit the Non Urgent criteria do not routinely need admission—
What support is there for young people who self-harm?

**Level One / Universal Services**

The child or young person is carrying out deliberate acts of self-harm that do not require medical treatment.
The child or young person has expressed a desire to manage the self-harm themselves. Their preference is for informal support.

All young people can receive support from their GP and from the School Nursing team.

There are also a number of websites and helplines, providing advice and support for those involved in – or concerned about someone who is – self-harming.

**Childline:** Call 0800 1111 or visit [www.childline.org.uk](http://www.childline.org.uk)
24/7 support for all young people

**Papyrus:** Call 0800 068 4141, text 07786 209697, email pat@papyrus-uk.org or visit [www.papyrus-uk.org](http://www.papyrus-uk.org)
Advice and support for young people aged up to 35 who have suicidal feelings

**Saneline:** Call 08457 678 000 or visit [www.sane.org.uk](http://www.sane.org.uk)
Practical care and support to anybody affected by mental health problems

**Samaritans:** Call 08457 90 90 or visit [www.samaritans.org](http://www.samaritans.org)
Confidential, emotional support for anyone, 24 hours a day, 7 days a week

**Level Two / Targeted Services**

The child or young person is carrying out deliberate acts of self-harm that USUALLY do not require medical treatment.
The child or young person’s needs require a coordinated response from additional services and extra support from a targeted intervention/service in order to minimise the risk of escalation.

Consider EHO / TAC at this point - Could other agencies help to support this young person?

**Youth in MIND:** Offer a flexible and creative client centred approach. They work in partnership to provide integrated care for the student, the school and the family. They will cover topics such as self-esteem, anxiety management, mindfulness and resilience training, anger management and with self-harm that does not require medical treatment will provide support around alternative coping strategies. They can be contacted on 0161 330 9223 or there email is; schools@togmind.org

**Off The Record:** Is a free and confidential counselling service. This offers support for mild – moderate mental health problems including self-harm. A drop-in service is offered every Wednesday at positive steps. Alternatively appointments can be arranged on 0161 355 3553.

**MAHDLO:** is a youth zone offering numerous activities for young people to enhance the quality of their lives and provide support services for those who need additional help to
achieve their potential. A variety of services are offered to provide counselling services to young people, ranging from ‘brew club’ to 1-1 counselling. More information can be found at info@mahdloz.org or on 0161 624 0111.

**Levels Three – Four / Specialist Services**

The child or young person may have expressed suicidal ideation and / or may be carrying out acts of deliberate self-harm that require medical treatment.

The child or young person’s needs are increasingly deeper and more complex with extra support required from either/both a specialist and statutory intervention/service.

or

The child or young person’s needs have reached the threshold of significant harm or risk of significant harm.

**CAMHS** (the Child and Adolescent Mental Health Service) Core Team is based at the Reflections in Royal Oldham Hospital. The Core CAMHS team will see young people with moderate to severe depression, suicidal ideation and deliberate self-harm that requires medical treatment. If a young person meets the threshold for the CAMHS service, they will be assessed and receive a number of sessions from a CAMHS team member who could be a psychologist, psychiatrist, family therapist or mental health practitioner. Core CAMHS will only accept referrals from a professional. However, staff can always contact the CAMHS duty worker on 0161 627 8080 for advice about particular incidents.

- **Adult Single Point of Entry**: For all referrals and advice / consultations about young people aged 16+ (who are not currently being seen by CAMHS ), contact the Single Point of Entry Team, based at Royal Oldham Hospital. The Access team will assess young people and advise on the most appropriate service. Contact them on 0161.

**Multi Agency Safeguarding and Support Hub (MASSH)**

Where self-harm appears to have contributory factors which may require a response from other agencies advice can be sought from the MASSH - Tel 0161 656 1214.

Where there is immediate danger to a young person which requires an emergency response ring the Police on 999.

**Where to go for help and advice out of hours**

- If a young person or adult is in acute distress outside of normal office hours, he or she should be advised either to contact either a 24-hour support service (such as Childline or the Samaritans), their out-of-hours GP service (in Oldham, this is Go to Doc and patients contact the service by telephoning their usual GP contact number which will transfer to the out-of-hours service) or to attend their local hospital Emergency Department.