Responding to a self-harm incident that is not an emergency

Regardless of where an incident occurs, staff should endeavour to deliver a responsible duty of care and keep everyone safe in the environment (within all school settings, including school excursion and camps).

Some actions may occur simultaneously, as staff take on different responsibilities.

Actions required

- Where possible **move the student** to a safe environment where further enquiry can occur in a sensitive manner that respects their privacy and reduces vicarious trauma impacts to students and staff.
- Once the student is in a safe environment, request that the student hand over any instrument that may assist them to self-harm. If they refuse, contact the appropriate emergency services to ensure safety of the student and staff. Do not try to disarm the student against their will as this may result in you being injured as well. For more information, see: <u>Restraint and</u> <u>Seclusion: Policy</u>.
- If possible, arrange for the student to apply first aid immediately under supervision of an appropriate staff member (e.g. school nurse or trained first aid officer) if required. It is beneficial to encourage the student to apply first aid, such as dressing wounds themselves, as this encourages self-care rather than selfharm. Encouraging the student to cover their wounds, regardless of severity, is recommended to reduce distress among students.
- Notify the leadership team. It is a requirement of the Department that all incidents of selfharm, suicidal ideation and attempted suicides are reported to ISOC 1800 126 126.
- Contact parents or carers unless circumstances indicate that this should not occur. It is essential that this contact be approached with sensitivity and compassion. In most instances, this communication is best undertaken by a member of the wellbeing team, SSS or a member of the leadership team. Although students may be concerned about the school making contact with their parent/carers, all occasions of self-harm must be shared with parents/carers in order to promote safety and accessing appropriate supports.

• Seek advice and professional assistance from SSS. Support and advice is also available from <u>headspace</u> or <u>Beyond Blue</u>, Child and Youth Mental Health Services (CYMHS) or Child and Adolescent Mental Health Services (CAMHS). For more information, see: <u>Child and adolescent</u> <u>mental health services</u>.

- Get assistance to **follow up on the safety and wellbeing** of students who may have witnessed or have reported the self-harm.
- An appropriately trained staff member or professional (e.g. a MHP, staff trained in youth mental health, SSS psychologist or social worker, Doctors in Secondary Schools Program GP, Secondary School Nurse, an external mental health professional, GP or hospital-based doctor or psychologist) should **undertake a** suicide risk assessment. If no suitably trained staff are available, the student's parents or carers should be directed to have an assessment completed at hospital or by a community-based practitioner immediately.
- Make recommendations for referral for mental health support either within the school (appropriately trained wellbeing staff or SSS) or external to the school as appropriate (e.g. <u>headspace</u>, CYMHS or CAMHS). If the student has an existing relationship with a MHP, encourage the student and/or their parent/carer to inform them of the incident. Alternatively, obtain consent from the student for the school to communicate directly with the clinician.
- Consider a Worksafe Notification (13 23 60).
 Ensure there is a debrief for all staff involved in responding to the incident and that they are provided with information about self-care and the supports available to them.
- Consider what **post-incident follow-up** is required, including ongoing support for staff and students.