

**Flow diagram for dealing with self-harm/suicidal thoughts with a child or young person**

**Section A:**

For universal services working with children and/or young people

**Talk and listen to the child or young person ② ④ ⑤**

**Asses the risk ⑤**

**Think!** 💡

- Confidentiality ③
- How I manage this disclosure? ④ ⑦ (primary)
- Safeguarding/Child Protection- initiate local policy (seek support from Safeguarding Lead in your organisation) ② to ⑤, ⑧
- First Aid ④
- Involve parents/carers as appropriate for circumstances and young person

The numbers refer to the main toolkit (clear) e.g. ③ or appendices (solid) e.g. ② e, ⑤ d etc.

Lower ④ ⑤ ⑦ (primary)	Medium ④ ⑤	Higher ⑤ d
<ul style="list-style-type: none"> <li>• Self-harm disclosure (without current episode)</li> <li>• Old/copycat wounds</li> <li>• Superficial wounds</li> </ul>	<ul style="list-style-type: none"> <li>• Self-harm would require medical attention (if this can be managed by basic first aid in your setting this could REDUCE TO LOWER)</li> <li>• If known to self-harm this might make risk lower</li> </ul>	<ul style="list-style-type: none"> <li>• Overdose attempt (suspected or actual or ingestion of other materials)</li> <li>• Suicidal intent/tendencies/ planning or action</li> </ul>

Consider other risk factors eg: Drugs and alcohol, Child protection or safeguarding issues, risky behaviours, previous bereavement (or anniversary of a bereavement) and environmental factors (② and ③): CNWL

**Seek external medical attention**

Call 999 and/or access Milton Keynes A&E department for medical treatment and assessment by MK CAMHS LIST (Liaison Intensive Support Team) ⑧  
OR Request an Emergency GP appointment (office hours, weekdays) or NHS 111 outside these hours

**Initial risk management plan: Main ③ Appendix ⑤**

(Explain to child and young person and try to actively involve) ⑥ ⑫

- 1) First Aid ② d
- 2) Follow school (or setting) self-harm policy ④
- 3) Notify nominated self-harm lead ③
- 4) Notify parent/carers, GPs and school setting immediately ⑪ ⑧ (with consent)
- 5) Liaise with named CAMHS worker or CAMHS if already referred or on caseload ⑧ c
- 6) Consider underlying causes? Are there safeguarding considerations (is a MASH or CAMHS referral or discussion required?) ③ ⑧
- 7) Undertake Initial Assessment and Document ④ b ⑤

**Follow up and on ongoing support plan:**

- Facilitate return to school; risk assess ⑤ ⑪ ⑫
- Give child/young person information ⑩ ⑫
- Begin to develop support and safety plan/well-being plan ⑥ ⑦
- Identify peer, staff and professional support ⑥ ⑧ Main Document ③

**Think!**

- Liaise with named CAMHS worker (if one), Pastoral support and Link person ⑥
- Any regular meet ups/check ins: Continue to assess ⑤ ⑥
- Liaise with health and other professionals if being seen outside school e.g the GP ⑧
- Identify whether other peers are at self-harm risk and support ③ ⑩ to ⑫

**Section B:**

For statutory and specialist services