Self-harm: local identification of needs

City of York Council

EXECUTIVE SUMMARY

Self-harm is reported to be a growing concern and issue locally. York does have slightly higher rates of hospital admissions due to self-harm than England average rates and anecdotal and audit information from a range of sources identifies growing concerns about increases in self-harm.

There is a current gap in the availability of comprehensive and robust data to be able to clearly identify the full scope of the issue. There are inconsistent ways of recording, reporting and sharing self-harm related information about risk and prevalence where an incident does not result in a hospital admission. Where self-harming behaviour does result in a hospital admission, there is a good availability of local data but this does not provide a full picture about the scope of self-harm.

A range of services and staff groups identify self-harm as a concern but information about the prevalence of this behaviour is not consistently collected or shared between services.

There is a lack of readily available advice and information for people to access about self-harm, how to identify when self-harming behaviour may be happening, what to do and how to support someone who is self-harming.

There is a reported lack of clear referral options for people who are known to be self-harming. Threshold criteria for access to mental health support services for people who are self harming but have no diagnosed mental health conditions are reported to be too high for people to be eligible to access. However, it should be noted that local child and adolescent mental health services are providing a good level of support to those young people who are accessing hospital services in relation to self-harm. There is also a joint pilot scheme to provide more support

into the York Hospital Emergency Department (ED) in order to be better able to support people with mental health needs who are not admitted to hospital. This includes supporting people who are presenting to the ED with self-harm injuries.

There still exists a stigma around self-harm and the local health and social care system might benefit from a focus on training key staffing groups to be able to better support people who are self-harming. By supporting staff to be able to respond effectively to someone who is self-harming, it may make it easier for people to ask for help around self-harm and mental health support needs.

From this paper, there are four areas recommended for local consideration:

- To strengthen the identification and recording of self-harm related problems that do not result in a hospital admission. This will establish a baseline measurement of the extent of the issue and help raise the focus on the importance of accurately being able to identify self-harming behaviour. Without being able to accurately identify how much self-harm is happening it is not possible to demonstrate a suitable response to it.

- To develop and enhance a local offer of information, advice and training to key staff groups and people most at risk of self-harm. This will reduce barriers to people who self-harm seeking help and improve the ability of staff to be able to respond to self-harming behaviour and risks effectively.

- To be able to offer evidence based interventions that are effective in reducing self-harming behaviour and clear referral routes into this support. This would also contribute to removing barriers for people to ask for help.

- To seek assurance that appropriate and adequate pathways exist which allow people who self-harm to receive support. This would include clarity that; self-harming behaviour among adults is assessed and risk assessed by service providers; there are clear pathways into support where self-harming behaviour is identified

which should include consideration of referral processes for adults and children from Emergency Department and referral from schools into CAMHS.