Protocol for Immediate Response to Self-Injury

For Teachers, School Staff, Nurses, and School-Based Mental Health Professionals

If you become aware of a student who is self-injuring, or even suspect that a student may be engaging in self-injury, follow the steps below. Early recognition and compassionate response are essential for student safety and recovery.

For Teachers & All Non-Mental Health Staff

- **Stay calm and supportive.** Approach the student with a nonjudgmental and empathetic attitude. Avoid showing shock, disapproval, or frustration.
- Ask simple, clarifying questions. For example: "I noticed this mark—are you hurt?" or "Can you tell me what happened?" Do not press for details.
- If there is a visible or fresh wound:
 - Escort or refer the student directly to the school nurse.
 - Notify the school counselor or psychologist right away.
- If the student confirms self-injury:
 - o Refer the student to the school counselor or psychologist.
- In case of severe injury or uncertainty: Call 911 immediately. When in doubt, err on the side of emergency response.

For the School Nurse

- Provide direct wound care and assess whether emergency medical services are needed.
- **Ensure immediate communication** with the school counselor or psychologist so that a mental health follow-up can occur the same day.
- Document the incident according to school/district protocols.
- If in doubt, call 911.

For the School Psychologist or Counselor

- Clarify confidentiality. Remind the student of the limits (i.e., safety concerns must be shared).
- Screen for suicide risk. Use your district's suicide assessment protocol. If suicidal
 ideation or intent is identified, follow your school's suicide crisis response procedures
 immediately.

- **Determine intent.** Use an informal interview to confirm whether the behavior is intentional self-injury versus an accident.
- Engage parents/guardians.
 - Unless contraindicated for safety, contact parents and request they come to school.
 - Provide parents with the **Parent Fact Sheet** and referral information for outpatient therapy, crisis services, and/or medical follow-up.
 - Have parents sign a notification form confirming they were informed and received resources.
- Use professional judgment. If notifying parents is unsafe, consider mandated reporting (e.g., Child Protective Services) or other protective actions consistent with state law and district policy.
- Follow-up care:
 - Check in with the student within 5–7 days.
 - Schedule regular well-being check-ins every 2–4 weeks
 - o Document all interventions and contacts carefully.
 - Guidance for providing ongoing support.

Key Reminders

- Never promise secrecy. Always prioritize student safety.
- **Model calm concern.** Students may feel embarrassed or fearful; your response sets the tone for support.
- **Encourage professional help.** Self-injury is often a sign of underlying distress; therapy and support services are essential.
- When in doubt, act. If you are uncertain about the severity, contact emergency services and notify your school mental health team.

Downloaded from www.EducatorsAndSelfInjury.com