## **Council Report**

## Managing deliberate self-harm in young people CR64. 1998. 12 pp. £5.00

People who harm themselves should always be taken seriously. This applies in full measure to young people who are under 16 years old. This is not only because commission of an act of self-harm may be a prognostic factor indicating a greatly increased risk of further self-injurious behaviour and suicide, but also because it may be a key indicator of the existence of a range of serious psychiatric disorders, social and relationship problems and abusing experiences.

This report from the Royal College of Psychiatrists surveys what is known about self-harm in young people and points readers to sources of epidemiological information and advice about designing, setting-up, managing and delivering health services for young people after they have harmed themselves.

Among adolescents who harm themselves, the factors that are most likely to be associated with a higher risk of later suicide include:

- (a) male gender;
- (b) older age;
- (c) high suicidal intent;
- (d) psychosis;
- (e) depression;
- (f) hopelessness; and
- (g) having an unclear reason for the act of deliberate self-harm.

Furthermore, deliberate self-harm may be a route by which child abuse or severe failures of child care may come to light. Therefore, this report identifies the responsibility of a range of agencies and sectors of care in commissioning and providing the full range of resources and interventions required by young people who have harmed themselves or are at risk of so doing.

In particular, the report advocates the inclusion of services for young people who are at risk in National Service Frameworks. It calls for a full and longer-term approach to commissioning care by health and local authorities acting together as partners. In England and Scotland, the Health Improvement Programming process should be the vehicle for agreeing and setting the necessary strategic intentions for local services.

At the level of service provision, the College recommends that a range of local services is involved in planning and delivering services, irrespective of trust and other agency boundaries. These include:

- (a) child and adolescent mental health services;
- (b) accident and emergency services;
- (c) paediatrics and child health (including community child health) services;
- (d) general medical services;
- (e) substance misuse services; and
- f) learning disability services.

Therefore, the report recommends that, in each area, a consultant paediatrician and a consultant child and adolescent psychiatrist work together to lead, develop and monitor the local response.

The report identifies and considers a range of particular challenges including:

- (a) assessment and treatment planning process;
- (b) staff training:
- (c) the requirement for cultural, ethnic and racial awareness and, in some circumstances, for interpreters in providing highquality care;
- the particular needs of young people who have a learning disability;
- e) requirements for hospital admission;
- (f) admissions to psychiatric facilities;
- (g) the needs of families; and
- (h) the role of child protection procedures.

This brief report presents the updated policies of the College. While it contains a section on the roles and responsibilities of consultant child and adolescent psychiatrists, it does not present a detailed blueprint for service design as this is considered to require interpretation and awareness of local circumstances. Rather, this document presents a practical policy and strategic framework.

The guidance provided by this report is aimed at health authorities and health boards, NHS trusts, primary care groups/trusts, local health groups and local authorities. It will be particularly helpful to members of the College and practitioners in other disciplines in advising their colleagues at all levels of service management and is supportive of local initiatives in delivering assessment and treatment services of increasing quality.

**Council Reports** are available from the College by mail or telephone order. Cheques should be made payable to The Royal College of Psychiatrists at 17 Belgrave Square, London SW1X 8PG. Further information and telephone orders to Lee Butler: 0171 235 2351 ext. 146 (please quote the CR number where possible).