A Client has Self Harmed

Assess:
What is the level of harm? Is the client intoxicated and/or at high risk?
What is the duty of care to you, the client, and the agency?

Stabilise Injury: Immediately Provide First Aid (according to your qualification)
Follow Program policy about first aid responses to self harm. Make sure you use the appropriate personal protective equipment (e.g. gloves). If blood is involved, be blood aware and treat the scene as one involving a blood-borne virus. Assess the surrounding area and prevent further risk of harm.

Physical Emergency: Medical Response Required

Urgent Priority: Phone 000 to get the ambulance. The client is taken to a local hospital.

Medium Priority: Phone the client’s GP and ask for an emergency appointment.

Psychiatric Emergency: Mental Health Response Required

Urgent Priority: Phone MH Services Helpline Triage: 1800 332 388 to get urgent assessment

Medium Priority: Phone MH Services Helpline: 1800 332 388; ask for MH referral options

Assess and Respond: Intermediate Safety Planning
If the client is not admitted to an inpatient medical or psychiatric facility, assess the client’s safety and risk for the next 72 hours. Negotiate with the client a ‘No Self Harm’ therapeutic contract and contingency planning for risk of harm. Refer the client, where appropriate, to crisis counselling support. If the client identifies a good support network, collaboration may help to keep the client safe.

Document and Debrief: Critical Incident Reporting
If this has not occurred already, ensure that management are informed in detail of the client’s self harm and subsequent practitioner responses. Complete a critical incident report form, and document everything in the client’s case notes/file. Arrange debriefing for yourself and others affected by the client’s self harm, practice self care. Discuss the incident with your clinical supervisor.

Throughcare Follow-up: Ongoing Contact with Client
If the client continues in the service, negotiate safety planning measures with the client. Once information sharing protocols are in place, maintain a partnership approach with the client’s treating medical and/or psychological practitioners. Support the client to develop enhanced coping skills.
Self Harm Emergency Contacts & Potential Referral Options

Emergency Services: Phone 000
Ambulance, Police, or Fire Brigade

Mental Health Services Helpline
Phone 1800 332 388 (24 hrs statewide)
Triage, Referral, Information & Advice

Department of Emergency Medicine,
Royal Hobart Hospital
Phone (03) 6222 8423

Department of Emergency Medicine,
Launceston General Hospital
Phone (03) 6348 7924

Department of Emergency Medicine,
North West Regional Hospital Burnie
Phone (03) 6430 6633

Department of Psychological Medicine
Royal Hobart Hospital
Phone (03) 6222 8805

Spencer Clinic Psychiatric Unit, Burnie
Phone (03) 6430 6575

Parkside Community Mental Health
Phone (03) 6434 6434 (Burnie)

Clare House (Child & Adolescent MH)
Phone (03) 6233 8612 (Hobart)

Lifeline Telephone Counselling
Phone 13 11 14 (24 hrs statewide)

Salvo Care Line (Suicide Prevention)
Phone 1300 36 36 22 (24hrs statewide)

Poisons Information Line
Phone 13 11 26 (24 hrs statewide)

Beyond Blue Depression & Anxiety
Information & Referral Helpline
Phone 1300 224 636 (24 hrs statewide)

Hobart Women’s Health Centre
Phone (03) 6231 3212

Women’s Health Information Service
Phone (03) 6334 8335 (Launceston)

Sexual Assault Support Service
Phone (03) 6231 1811 (Hobart)
Phone (03) 6334 2740 (Launceston)

North West Centre Against Sexual Assault (CASA)
Phone (03) 6431 9711

Phoenix Centre (Refugees, Trauma)
Phone (03) 6221 0999 (Hobart)

Drug & Alcohol Clinical Advisory Service
Phone 1800 630 093 (24 hrs statewide)

The Corner Youth Health Centre
Phone (03) 6334 0800 (Launceston)

The Link Youth Health Service
Phone (03) 6231 2927 (Hobart)

Youth & Family Focus
Phone (03) 6424 7375 (Devonport)

Holyoake (Families, Individuals, Youth)
Phone (03) 6224 1777 (Hobart)

References: This document was designed around an adapted model from the following resources:
WA Network of Alcohol and Other Drug Agencies (WANADA) (2008) Crisis Referral Tool for AOD Services
Drug and Alcohol Office Workforce Development Branch: Western Australia.


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Disclaimer: This information is provided on the basis that readers will be responsible for making their own assessments of the mental health emergency in question. It is not a substitute for appropriate professional training or qualifications.