

## *Self harm assessment of risk/safety (SHARS)*



Most approaches to self-harm either confuse it with suicide, or do not separate the two because of the difficulties of doing so such as co-morbidity (many people who self harm are also suicidal) or the ambivalence (some people, especially young people have difficulty separating them or cannot do so). The difference between the two is essentially intent. Suicide has the direct intent to die; self-harm does not have direct intent to die. This scale attempts to help people who harm themselves and others concerned to consider the risks involved in order to make choices for the future, such as how do I live with my self harm and how can I keep myself safe.

This scale is based upon judgement. The Judgement should be that of the focal person together with their contact people and family/support. We also then try to apply a value to those judgements, to give us some base to make judgements about safety and how things change. We will keep it simple and ask you to score your judgement from 0-5, this judgement should be the consensus/compromise opinion of the parties involved or alternatively all parties can score separately and record a mean, my experience however is that a mutual approach is generally more helpful

The Five factors that are important in considering risk and safety are:-

1. Intent
2. Directness
3. Control & Current distress
4. Repetitiveness
5. Potential lethality

The latter three are much easier to judge than the first two.

## Intent

How clear are you that your intent now is not to die?

Useful questions. Do you do what you do, to end all your feelings, or do you do it to feel better? Score how clear you are. People who are very clear that they do what they do to survive score toward 0, people who are unsure or unclear score toward 5, people who believe that they may be suicidal should not use this scale.

0 \_\_\_\_\_ 5

## Directness

How directly linked is your self-harm to your present feelings and your life history, do you know?

Useful questions. To what degree is your self-harm related to how you feel? Is your self-harm related to something that happened in your life? Do you know why you self harm?

Score people whose self harm is absolutely linked to how they feel or have a good understanding of why and how they self harm should score toward 0, people who don't yet know or there is no predictive relationship and don't know how or why they self harm should score toward 5

0 \_\_\_\_\_ 5

## Control & Current distress

To what degree do you have control over if, when and how you injure yourself?

Score the extent to which you are able to control when, where, how and to what degree you self harm.

Useful questions, How often do you think about harming yourself, how often do you do it? Why are there differences between the two? How many different ways do you self harm. Consider the most recent time you harmed yourself, how able do you currently feel to limit it. Do you actually limit your self-harm, how far will you go, can you stop doing it?

Consider any current levels of distress that can affect your ability to limit or make choices in your self harm?

0\_\_\_\_\_5

## Potential lethality/Damage

Considering the way you self harm, regardless of what your intent is, how likely is it that you could die as a result of it, through accident or mistake? Some forms of self-harm are far more potentially lethal than others.

Other potential outcomes can be also very negative such as brain damage, Organ damage, loss of ability, relationship damage, child protection concerns for parents of children and should also be considered.

Useful questions. Do you set limits to your harm and keep to them? Do you make efforts to keep yourself safe? Have you had any "near misses"? Do you make plans to keep yourself safe and to reduce risk? Do you do other things to hurt yourself less, such as harming in a less hurtful way some of the time or doing it when you know others will stop or detect you? People who have changed their method of self-harm recently should always have potential suicidality excluded.

People who make efforts to protect themselves and whose self harm method is unlikely to result in death and with a safe history with no accidents and little impulsivity should score toward 0, People with a very recent commencement, showing patterns of increase or escalation, who are difficult to predict and are impulsive with near misses should score toward 5.

Remember that some forms of self harm are more likely to result in death regardless of intent and are less predictable in outcome, like poisoning with drugs or using ligatures (this may also be linked for some people to the degree of control that people have).

0 \_\_\_\_\_ 5

## Repetitiveness

How often do you now self harm?

Useful questions. Are there predictable patterns in your self-harm? Is it increasing or is it changing? How often are you currently injuring yourself?

People who are stable and predictable in how often they self harm, who are not increasing frequency or are decreasing in frequency should score toward 0. People who are showing patterns of escalation in intensity and severity should score toward 5

0 \_\_\_\_\_ 5

## Conclusions and Judgement

The scores A--E should in themselves lead you to a judgement about the potential risk and safety associated with the persons self harm, the figures have no validity above the fact that they reflect the consensus view of this risk and an also demonstrate changes in risk and safety over time. They can also be a factor in guiding you about when others should and should not intervene.

On a scale of 0-5 how risky/safe do you think the person is today?

**Overall Judgement** \_\_\_\_\_

### Management Plan

You now should try to negotiate with each other ways of moving forwards. Some people are happy to take risks with their lives but remember, it may not be just your risk! Workers and people who care about you may also have feelings and responsibilities that should be considered. Some people may want to reduce the risks that they face. If this is the case then I would recommend that you do one of two things, reduce the risk or keep yourself as safe as possible.

Remember that risk and safety change over time and this should be reviewed whenever there are significant changes in the persons self harm or other social or emotional circumstances.

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