



**NONSUICIDAL SELF INJURY (NSSI)
SCHOOL COUNSELOR DOCUMENTATION
Confidential**

Resource Literature

<http://www.selfinjury.bctr.cornell.edu/perch/resources/distraction-techniques-pm-2.pdf>

Student Name _____ Date: _____

Grade: _____ ID#: _____ School Counselor: _____

Student Referred By: _____

What type of injuries were reported/observed:

Scratching, pinching, preventing wounds from healing, punching or banging self or objects, self bruising, sticks objects into skin, cutting, carving, burning, self-bruising, breaking bones. Other:

Step 1: **Please ensure student injuries are evaluated by the school nurse for wound care if open wounds present.**

Step 2: Ask the student if their self injury behavior was an attempt to kill themselves? If the answer is yes, proceed with district suicide protocol.

Consider Tier II or Tier III interventions pending frequency. (1-2 lifetime incidents, 3-10 lifetime incidents, more than 10 lifetime incidents)

Step 3: Assist student in regulating. Identify the feeling, how big and a positive regulation skill they are willing to try in the future. When able to go back to class, send the student back to class.

Step 4: Notify parent. Offer resource list and or permission slip to assist student as needed to co-regulate and or regulate for future occurrences.

Parent/Guardian Notified: Name: _____ Date/Time: _____

Notes:

*Place this form in your **CONFIDENTIAL** file.*