# North Somerset Multi-Agency Adult Safeguarding Procedures



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# Missing Adults Policy and Practice Guidance

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## 1. Introduction

The NSSAB missing adult's policy and practice guidance supports partner organisations to respond effectively when adults who have care and support needs, and/or a reduced capacity to protect themselves from abuse or exploitation, go

missing. This applies when a person is missing from either their home, or another place where they are being cared for and supported (i.e. hospital or temporary stay day care). This document should be used alongside partners own internal policies and processes.

In this policy and practice guidance we use the term 'home' to refer to the physical space where a person lives, where they keep their belongings, and where they find shelter.

In November 2021, the Home Office published The multiagency response for adults missing from health and care settings – a National Framework for England. The national framework focuses on people missing from health and care settings (including hospitals and care homes). The National Framework acknowledges the transferability of multi-agency responses in relation to risk and missing adults who are not in health and care settings. Our missing adult's policy and practice guidance is based on this framework, putting multiagency coordination at the heart of preventing and responding to missing people and should be applied by all partners, where appropriate.

Our missing adult's policy and practice guidance also builds upon the policies and processes of Avon and Somerset Police and other partner agencies. It is designed to enable partners to minimise risk by

- a) identifying those who are more likely to be reported as missing, and
- b) reducing the risk of harm by supporting an effective response before people are missing, and when they are identified as being missing.

#### 1.1. What do we mean when we say 'missing'

Throughout this document, the following multiagency definition of 'missing' will be used.

"A missing person is anyone whose whereabouts can't be established and:

- The context suggests the person may be a victim of crime; or
- The person is at risk of harm to themselves or another; or

 Where there is particular concern because the circumstances are out of character, or there are ongoing concerns for their safety because of a previous pattern of going missing'.

The definition was taken from the <u>multi-agency response for adults missing from</u> health and care settings. A national framework for England.

This multi-agency definition aims to provide more clarity on the circumstances that should trigger action by professionals to locate and safeguard someone by including the context of risk.

It is important to remember that every missing incident is different, and it is therefore vital to focus on a holistic, person-centred approach to understanding what might be happening in someone's life and what steps can be taken to protect them if they are at risk.

#### 2. Context

#### 2.1. The national context

Almost 400 adults are reported missing in the UK each day. The prevalence of harm experienced by missing adults may be as high as 75% with 40% of returned missing adults disclosing that they lived through a suicide attempt.

Harm experienced by missing adults include being threatened, sexual assault, self-harm, psychological/emotional harm, and physical harm. In addition to this, up to <u>8 in</u> 10 missing adults have poor mental health.

Based on data from police forces and local authorities, research by Missing People found that people from minority ethnic groups were often missing for longer, less likely to be found by the police, and less likely to be recorded as being at risk, than others.

#### 2.2. Multi-agency support

In 2018 the All-Party Parliamentary Group (APPG) on Missing Children and Adults published an 'Inquiry into safeguarding missing adults who have mental health issues'. The report highlights that Police are often seen as the primary or only agency involved when someone is reported missing. Police are necessarily involved

in missing person investigations at the point of reporting, conducting the search and when a person is found. However, providing an effective response to missing adults is not the responsibility of the police alone. The inquiry recommended more strategic involvement from other agencies, such as those in health and social care. It is vital that we see the response to missing adults as every agency's responsibility.

Multi-agency support is vital for

- effective risk assessment,
- addressing the reasons why people go missing,
- providing the necessary help when it is needed, and
- reducing the likelihood and/or frequency of people going missing again.

### 3. Why do people go missing in North Somerset?

There are many reasons why an adult might be reported as missing. The most common missing adult concerns raised with the Avon and Somerset Police force include:

#### 3.1. People reported missing from hospital settings

 Due to the high proportion of missing adults from hospital settings, Avon and Somerset Police have specific joint working protocols for adults missing from Acute Hospitals and Mental Health Hospitals.

#### 3.2. People reported missing who have poor mental health

 Reports that a person has gone missing when distressed (related to poor mental health) represent a significant proportion of the missing adult reports in Avon and Somerset.

#### 3.3. People with dementia reported as missing

- There is a risk that adults living with dementia may wander, or become
  confused about their location, and subsequently get reported as missing. <u>Six</u>
  in 10 people living with dementia will wander at least once; many do so
  repeatedly.
- Avon and Somerset Police and the North Somerset Safeguarding Adults
   Board have embedded the nationally acclaimed <u>Herbert Protocol</u>. This

- encourages family, friends, or carer providers to record useful information in advance which could be used in the event of a vulnerable person with dementia going missing, such as medication required, mobile numbers, places previously located, a photograph etc.
- As part of the <u>Avon and Somerset Police's Dementia Safeguarding Scheme</u>
   (Herbert Protocol) people can request assistance devices. Assistance devices include Tile Bluetooth tracking devices and NFC wearable wristbands and hangtags, which can be attached to a supplied lanyard. Avon and Somerset Police provide these free of charge (for eligible individuals living with dementia).

#### 3.4. Care Experienced People reported as missing

- Missing adults between the ages of 18-25 who are care experienced are recognised as vulnerable to exploitation. Typically, responses to missing care experienced people require collaboration between Children Services, Adult Social Services, the police, and other relevant partners. If the person had a history of missing episodes as a child they are likely to have a trigger plan logged with police and/or children's services or a plan under the 'Philomena Protocol'. It is important to ensure young people's records are checked to establish whether there is a history of going missing and the reasons for this. Communication and information sharing between partners will be key to this.
- Following the principles of good practice in information sharing, for example with the adult's consent or when there is an over-riding duty to share information, updated information should be shared with the police (for example if a person's address, social circle or habits have changed). It is important to remember that the level of risk a young person faces does not change simply because they have turned 18.

#### 4. Increased risk

There are many other known factors that can contribute to an increased risk of an adult going missing. These include (but are not limited to):

#### 4.1. Living in supported accommodation

Adults who live in supported accommodation are more likely to go missing
due to a multitude of factors including substance misuse, associations and
risk of exploitation. It is important that people who call supported
accommodation their home are appropriately assessed for the likelihood of
going missing. Any assessment must consider person centred specific risks
related to the person and their circumstances/care and support needs.

#### 4.2. Alcohol and substance misuse/in-addiction/during a relapse

 Adults are more vulnerable to all types of exploitation and missing episodes whilst misusing substances, and when trying to obtain money to buy them.

#### 4.3. Domestic abuse

 Domestic abuse can increase the risk of adults going missing. This may include, but is not limited to, fleeing to keep themselves or others safe, feelings of fear, guilt, and shame, coercion and control, and kidnapping.
 Domestic abuse may still occur even when the relationship has ended.

#### 4.4. Learning disability

 Reasons for adults with a Learning Disability going missing could include bullying / harassment, poor physical and mental health, difficulties in engaging with the police and other agencies, lack of suitable accommodation / homelessness, medication issues, addiction, language and communication issues, behavioural problems, transport (getting lost) and meeting strangers online.

# 4.5. Neurodivergent people, including autism, ADHD and additional learning needs

• Whilst there is anecdotal information about the links between neurodivergent people and being reported as missing, there is very little research about how neurodivergence may influence people to go missing, and what neurodivergent people may experience while missing. There is also very little understanding about what support autistic people may need while missing and when they return from being missing. This research is being carried out (in relation to autistic people) by Missing People.

#### 4.6. Exploitation / modern day slavery / trafficking

 Adults experiencing or at risk of exploitation, including Modern Day Slavery, are at increased risk of going missing. <u>They may be missing due to</u> <u>experiencing harm</u>, because they are trying to evade the person (s) who has caused them harm and / or because they do not trust services to help them.

#### 4.7. Mental health

Research has shown that between 30% and 80% of people who go missing
may be experiencing poor mental health. For adults, up to 8 in 10 missing
adults will have a diagnosed or undiagnosed mental health condition.

#### 4.8. Homelessness

Research suggests that up to half of people who are homeless had run away
or been forced to leave home and that sleeping rough is "a common
experience" for both missing adults and children. There are also links between
going missing as a child and adult homelessness, with research finding that
84% of young homeless people had previously run away before the age of 16.

#### 4.9. Service veterans

 Transitioning from military to civilian life can be challenging, and some service veterans may experience mental health issues such as Post Traumatic Stress Disorder, depression, or feelings of detachment. These challenges can increase the risk of veterans going missing.

Police and partner agencies should always consider if there are other factors involved in a person being reported as missing, for example Honour Based Violence, Female Genital Mutilation, Forced Marriage, or bereavement. Police-officers and partner agencies should provide appropriate information, advice, and referrals in relation to the contributing factors regarding why a person was reported as missing.

# 5. What to do if someone is reported as missing

#### 5.1. A multi-agency approach

Being identified as missing may be an indicator of a range of harms that will require support from a wide variety of agencies. Responsibility for prevention, early physical

searches, reporting, risk assessment, and support for people upon their return should be shared between all professionals, where appropriate to do so.

This approach should ensure that people are only reported as missing to the police when necessary and appropriate. Once someone is reported as missing to the police, they will take responsibility for the investigation, but information and support should still be provided by the reporting agency, where appropriate.

#### 5.1.1. Prevention

People providing care and support to adults who may be at risk of going missing must have appropriate and meaningful conversations with them about this. These conversations should be informative and supportive. People providing care and support should explain when someone might have to be reported missing, discuss potential triggers and what support/coping strategies could be put in place to help. These conversations should never be threatening or suggest that people will be reported as missing to the police as a punishment. People providing care and support should use this conversation to agree what the adult should do if they 'need a break' or need to get away from the setting at any point. The adult at risk of missing should be given the Missing Persons helpline number (116 000), so they can call if they are thinking about going missing at any point.

Where the adult has capacity in relation to related decisions, the conversation should include:

- when they would be reported missing, and what this will mean, including what information may need to be shared with other agencies,
- what may trigger a missing episode and what might help to mitigate this,
- how the person can stay safe if they do leave their home, including how they can keep staff/professionals informed of what is happening if appropriate.

Relevant information about where the person may go or what they may do whilst missing should be recorded, along with details of the people it may be appropriate to contact in the event of the individual going missing. Where the adult lacks capacity in relation to related decisions, conversation should take place with those who know

them best, and with whom the person would likely wish professionals to consult to consider the same points as above.

The information gathered at the preventative stage should form a part of the persons support plan/risk assessments. These must be dynamic documents that are regularly updated (where there are changes to risk, triggers, behaviours, circumstances, and when best practice has been identified to effectively support the person). The plan/risk assessment should be clear about the risks to ensure that any staff member can effectively assess when someone might need to be reported as missing, and so they can share relevant information if they do have to call the police. It should also include the actions to be taken in the case that someone does go missing, including the contact numbers of people appropriate to contact. Where appropriate to do so, the information in these plans should be shared with other agencies.

Where risk of going missing is identified, considerations must be made as to whether other referrals should be made, such as to the GP, mental health support services, Adult Social Services and Housing, Safeguarding, Social Prescribing, and befriending etc.

#### 5.1.2. Responding

The charts in the appendices clearly set out the stages of escalation in relation to a missing adult.

Stage one: Responding to a person at risk of going missing

Stage two: Actions when a person is not where they are expected to be

Stage four: Actions when a person is found or returns

#### 5.1.3. Calling the police

Avon and Somerset Police have a four stage approach to reporting a person as missing. This can be found on their website.

When escalating a missing person to the police, it will be useful to have the following information ready to share:

Full name and date of birth for the missing person.

- Physical description of the missing person, including what clothes and jewellery they were wearing.
- Recent photograph of the missing person.
- When they were last seen and who was the last to see them.
- Where they had planned to go on the day they went missing.
- Contact mobile number for the missing person.
- Name, address and contact numbers of family members and their close friends.
- Details of any medication they take and whether they have this medication with them.
- Information of any online sites of which they might be a member.
- Any other relevant circumstances which may increase the risk to the missing person. This could include problems at work, school or at home or recent changes in behaviour which are out of character.

# 6. Local Authority response (incorporating statutory safeguarding adult section 42 enquires)

#### 6.1. Welfare checks – home visits by the Local Authority

North Somerset Council would not usually undertake a home visit to a missing person unless the person had care and support needs or additional vulnerabilities. If that is the case, it may be agreed that a home visit is an appropriate next step.

The following outlines actions for North Somerset Councils staff in such circumstances.

If when visiting the address, there is no response:

• Check for signs of activity by looking through and/or listening at the letter box and looking through windows or open doors.

- If possible and safe to do so, go around the outside of the house; there may be better views into other ground floor rooms.
- If there is a garden, check as there may be some response from there.
- Attempt to ring the person on their landline or mobile phone.
- Check if the person is, or appears to be at home, but is unable to, or deciding not to respond.
- Where it is appropriate, approach a neighbour who may have a key or have some idea of the service user's activities.
- Contact family members or friends if their number is known.

If there continues to be no response, consider:

- Leaving a calling card with your details asking them to contact you as soon as possible.
- Contacting your immediate line manager and discuss potential risk concerns –
   what should you do? Whom should you contact?
- Call Police if you think the risk is significant and you have concern for safety or life.

If you can hear or see the person from outside the house and you consider there is an indication they are at risk of significant harm and there is no open access:

- Do not immediately break in.
- Contact Police and discuss the situation.
- Consider and be aware for your own safety.
- Take any further action on advice of Police.

If you can hear or see the person from outside the house and you consider there is an indication they are at risk of significant harm and there is open access:

- Attempt to seek immediate consent from the person to enter the property to provide them with assistance.
- If the person is unable or refuses consent contact the Police and discuss the situation.
- Consider and be aware of your own safety.

Take any further action on advice of Police.

#### 6.2. Safeguarding adults' response

The matter of an adult with care and support needs going missing is not in and of itself indicative of a risk of abuse and neglect. In order for North Somerset Council to enact its statutory duty to enquire there would need to be additional elements of concern such as:

- Coercion & Control
- Neglect
- Exploitation or significant risk thereof (Financial/Criminal/Sexual/Trafficking)

If an adult is reported as missing to North Somerset Council and they meet the statutory criteria for safeguarding adults, Safeguarding Adults Procedures will be instigated, ensuring that partner agencies are involved where appropriate.

In accordance with the statutory criteria at Section 42 of the Care Act 2014, local authorities must make enquiries or ensure others do so, when there is reasonable cause to suspect that an adult in its area:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- is experiencing, or at risk of, abuse or neglect and;
- as a result of those care and support needs is unable to protect themselves
   from either the risk of, or the experience of, abuse or neglect

Safeguarding adults responses devised as a result of a Section 42 enquiry where the person going missing was a feature, might include actions such as:

- completing a trigger plan or appropriate protocol (i.e. Herbert, Winnie etc)
- clarity on who will be notified when there is a concern about the person going missing
- assessment of mental capacity in relation to the missing episodes
- consideration of legal powers available e.g. Mental Capacity Act, Mental Health Act, Inherent Jurisdiction
- Flagging the person's vulnerability on relevant agency records

- Action against any alleged perpetrators, including disruption activity
- Sharing information about the missing person particularly with the Lighthouse Team (missing person coordinators) within Avon and Somerset Police, Social Care Teams, Local Hospital or Mental Health Trusts.
- Agreeing safety plans with the person to reduce risks should they go missing
  in the future e.g. where might be a safe place to go, planning how to get
  home, ability to communicate with someone for help
- Addressing the reasons why the person might be going missing
- Supporting family members / carers or staff caring for the person who has gone missing

If, however, there are concerns about the safety and wellbeing of the person or others, a decision may have to be taken to share the details of the location with relevant agencies and within the context of statutory duties and powers to enable safeguarding actions to be taken (e.g. assessment under the Mental Health Act (MHA) or Mental Capacity Act (MCA).

#### 6.3. Responses outside of the safeguarding adult's framework

An adult might be reported missing to North Somerset Council even if statutory safeguarding adults criteria are not met (i.e. the missing person might be receiving a service from the local authority). If an adult is reported as missing to North Somerset Council and they do not meet the statutory criteria for safeguarding adults, North Somerset Council must determine what the appropriate referral pathway must be. This could include, but is not limited to:

- If an adult without care and support needs is missing and there is concern that the individual, and / or other individuals, is experiencing, or at risk of, abuse or neglect then Avon and Somerset Police should be notified.
- If the adult is in receipt of social care services but not at risk of abuse or neglect, then the service / allocated worker should be notified.
- If the adult is open to the <u>Multi-Agency Risk Management (MARM)</u> framework, notify the MARM Coordinator by calling Care Connect on 01934 888801 and if applicable, the allocated worker.

- If the missing adult is care experienced and aged 18 -25, then check to see if they have an allocated looked after team worker such as a personal adviser
- Consider local referral pathways. Examples include:
  - Adult social care
  - Housing advice
  - Multi-Agency Safeguarding Hub (MASH)
  - Multi-Agency Risk Management (MARM)
  - Domestic Abuse support
  - Substance misuse services

## 7. Police response

#### 7.1. Levels of risk

All missing person reports sit within a continuum of risk from very low risk to high risk cases that require immediate, intensive action.

Avon and Somerset Police use the following nationally agreed risk assessment when deciding on the investigation each missing person report requires:

- Very low risk there is a very low risk of harm to either the subject or the public
  - Actions to locate the subject and, or gather further information should be agreed with the informant and a latest review time set to reassess the risk

#### Low risk

 The risk of harm to the subject or public is assessed as possible but minimal. Proportionate enquiries should be carried out to ensure that the individual has not come to harm.

#### Medium risk

- The risk of harm to the subject or public is assessed as likely but not serious. This category requires an active and measured response by the police and other agencies in order to trace the missing person and support the person reporting.
- High risk

- The risk of serious harm to the subject or public is assessed as very likely. If circumstances are high risk the Police should be contacted. Circumstances would be considered high risk when the risk posed is immediate and there are substantial grounds for believing that the subject is in danger because of their own vulnerability. Examples where this may be the case are;
  - The presence of dementia or learning disability leading to the person lacking awareness of their immediate surroundings.
  - History of significant harm from previous missing episodes
  - Evidence of concern from other recent interactions/visits/appointments (i.e. expressed suicidality or disclosure of abuse)
- This category almost always requires the immediate deployment of police resources. Action may be delayed in exceptional circumstances, such as searching water or forested areas during hours of darkness. A member of the Police senior management team must be involved in the examination of initial lines of enquiry and approval of appropriate staffing levels. Such cases should lead to the appointment of an investigating officer (IO) and possibly a senior investigating officer (SIO), and a police search adviser (PolSA). There should be a press / media strategy and / or close contact with outside agencies. Family support should be put in place where appropriate.

The level of risk will impact what immediate action a professional will take.

Minimum actions will be undertaken by the police in all missing persons cases, in line with the <u>College of Policing's Authorised Professional Practice</u>. This includes:

If the missing person is aged under 18, local children's services will notified (immediately if deemed to be at high risk).

#### 7.5. Right Care Right Person

Right Care, Right Person (RCRP) is an operating model which involves the police working with partners to identify the most appropriate agency to respond to the

needs of vulnerable people and provide the care and support they require. The primary aim of RCRP is to ensure members of the public get the best possible care from the most appropriate service.

RCRP is supported by a National Partnership Agreement, a collective national commitment from the Home Office, Department of Health & Social Care, the National Police Chiefs' Council, Association of Police and Crime Commissioners, and NHS England to work to end the involvement of police in responding to incidents involving people with mental health needs where such involvement is inappropriate and avoidable.

The deployment of police officers should always be carefully considered and stand up to rigorous scrutiny to demonstrate the deployment was justified, proportionate and necessary. Under no circumstances should the default position be to deploy police without first considering the RCRP threshold and whether there is a more suitable agency to respond to the incident.

The threshold for a police response under RCRP is to:

- Investigate, prevent or detect, a crime that has occurred or is occurring.
- Protect people when there is a real and immediate risk to the life of a person.
- Protect people when they are at a real and immediate risk of being subject to serious harm.
- Protect a child subject to a real and immediate risk of significant harm.

The police will apply this threshold when considering Concern for Safety and Suicidal incidents, with it directly reflecting the legal responsibilities for the police to act and in turn their legal powers to do so. This will enable the police to direct their resources to the most serious concerns and to involve the most appropriate agency at the right time for the benefit of those at risk.

When taking a report of a missing person, Police will consider as to whether a Safeguarding Adults Concern should be raised.

If there is an immediate threat or serious harm, always dial 999.

#### 7.6. Police welfare checks

The police will only undertake welfare checks under the following circumstances:

- There is an identifiable and immediate risk to life or property
- The vulnerable person is suffering or at risk of suffering immediate and significant harm
- It is reasonably believed that a crime has been committed, is being committed or is about to be committed.
- It is believed that a breach of the peace occur.

#### 7.7. Police powers in relation to searching addresses for missing persons

Where a capacitated adult is found, the police can do no more than confirm they are fit and well at the point in time they are located. Police can only gain entry to an address under S.17 PACE to "save life or limb". There must be reasonable grounds to believe that entry is required to effectively save life or prevent serious harm.

#### 7.8. Misper Co-ordinators

With the consent of the adult, or in circumstances where there is a real and apparent care need, the Misper Co-ordinators within Avon and Somerset Police will share information with relevant partners.

## 8. Post missing engagement

If a missing adult with capacity is found and does not wish their whereabouts to be revealed, the person making the original report should only be told that the missing person has been located and not informed of their whereabouts.

#### 8.1. Avon and Somerset Police Prevention Interview

Avon and Somerset Police will attempt to carry out prevention interviews for all missing adults reported to Avon and Somerset Police. The Prevention Interview is carried out as part of the found process and is an important step to establishing the reasons for the missing episode and identifies early opportunities to minimise future harm to them. This may include referring to person to other support services.

It is recognised that on some occasions police officers in uniform may not always be the most appropriate professional to conduct the prevention interview with a found adult. If another professional is involved with an adult who has had a missing episode, they could complete a return interview. This would be a supportive interview and would be considered good practice, with the aim of reducing the likelihood of future missing episodes. Return interviews conducted by professionals must be shared with the police, where there is consent to do so.

#### 8.2. Post missing wellbeing, engagement, and information sharing

Any discussion may identify risk factors, crimes or issues affecting health and wellbeing. Where relevant, information should be shared with appropriate partners. Unless there are reasons to override consent, then consent should be obtained. Sharing information, with the consent of the adult, would be helpful as it would potentially reduce the number of times that the person is asked similar questions by several different agencies.

Information from return home interviews done by professionals not working for Avon and Somerset Police should be shared with them, with consent, to support planning moving forward.

Following a missing episode, the returned person should be offered the opportunity to receive further support. Professionals should consider the options and ensure appropriate signposting is put in place. This may include escalating the health or social care available to the person based on a mental health or Care Act Assessment. This may involve referral into mental health services, referral to a GP, signposting or referrals to local charities or other support services, and signposting to national helplines relevant to the persons experience.

If the person is vulnerable, they may not have the capacity to navigate accessing support alone. It is important processes are made clear and accessible and that, if necessary, there are options for being supported through the process.

Professionals should recognise the vulnerability a missing episode creates and in order to prevent against future harm should ensure appropriate information, advice, guidance and signposting is provided to a Missing Adult. For any person identified who poses a risk of harm to a missing adult disruption activity should be put in place.

If there are repeated concerns about the person engaging in behaviour that causes high levels of harm to themselves and it is felt the risks could be mitigated using a multi-agency response, it may be appropriate to refer the person into <a href="MARM">MARM</a> by calling Care Connect.

### 9. Repeat missing episodes (Winnie and Herbert Protocols)

It is recognised that repeat missing adults are at risk of harm and it is important for all agencies to apply a preventative problem-solving approach to repeat missing episodes.

Within the 'golden hour' of all episodes, it is imperative that as much information is made available as soon as possible to Avon and Somerset Police.

In circumstances where an adult has support from a professional and it is identified they are likely to go missing the <u>Herbert</u>, or <u>Winnie</u> Protocol form should be completed.

# 9.1. Herbert Protocol (Adults at risk of going missing with dementia/Alzheimer's)

There is a risk that adults living with dementia can get lost and go missing. Avon and Somerset Police have adopted the nationally acclaimed Herbert Protocol.

Organisations that provide care and support for people with dementia are encouraged to consider the risk of a person going missing as part of the 'pre-service' assessment. If a person is identified as at risk of going missing, with their consent, or if considered to be in their best interests following an assessment of their mental capacity, the Herbert Protocol should be followed.

This encourages carers to record useful information which could be used in the event of a vulnerable person with dementia going missing. Carers, family members and friends can complete the <a href="Herbert Protocol">Herbert Protocol</a> form in advance, which records all vital details, such as medication required, mobile numbers, places previously located, a photograph etc.

# 9.2. Winnie Protocol (Adults at risk of going missing without dementia/ Alzheimer's)

The Winnie Protocol has been designed alongside existing successful Herbert and Philomena Protocols and is a form which is designed to be used by any person who supports the individual as part of an 'information sharing' process whenever a person is identified at risk of going missing.

It is recognised that the protocol would have to be implemented with the consent of the individual and it should be explained that the information requested is only to be used in order to help that person keep safe in the event of a missing episode.

Once the form has been completed as part of a registration process it should be held by the relevant professional or agency (usually the service which has the most contact with the adult) and used to provide police and other agencies with access to all relevant information should a missing episode be identified. The form should be held in a place which is accessible 24 hours a day and can be copied and provided in an electronic form or paper-based form to police. This will help police at an early stage to correctly identify the risk which that missing person is at and prioritise early activity to locate the missing person.

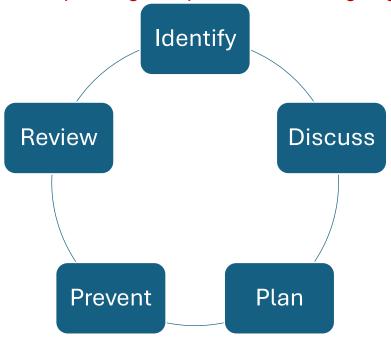
All agencies should be encouraged to complete the most appropriate protocol (Herbert or Winnie) with adults who they support and repeatedly go missing as a way of demonstrating their duty of care. Consent must always be obtained.

In circumstances where adults are going missing and it is suspected that the missing episodes are linked to coercion/control and exploitation the safeguarding partners should consider whether the adult is able to make capacitated decision, free from coercion, about their safety and is able to keep themselves safe from abuse or neglect. Mental capacity assessments should be completed and where required best interest decisions made to keep the person safe from abuse or neglect.

Where an adult has gone missing, and it is identified they have care and support needs and are at risk of abuse or neglect police will submit an adult concern notification. Where it is not immediately apparent that an adult has care and support needs but repeat missing episodes are identified the Police MFH Coordinator will

submit an adult concern notification to prompt a safeguarding notification and multiagency problem solving approach.

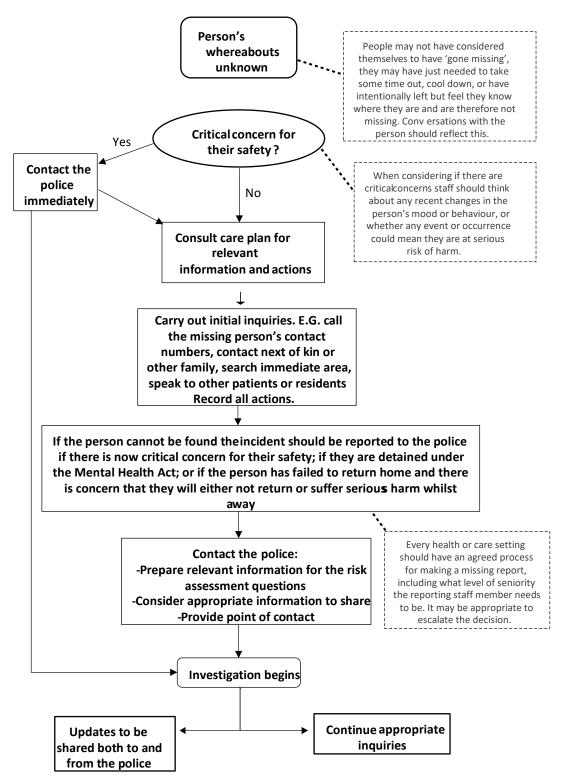
Appendix 1: Responding to a person at risk of going missing



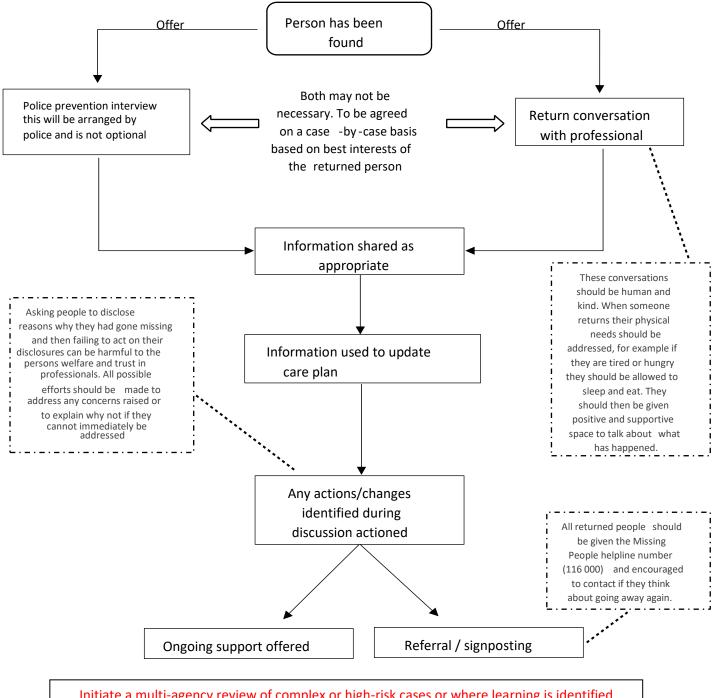
- 1. Person is identified as at risk of going missing.
- 2. Those will an established relationship with the person (i.e. key worker, preferred support staff, or social worker) should have a conversation with the person. Conversations should be supportive and informative. They should never be threatening with any suggestion of punishment. Discuss
  - Potential triggers
  - What the person should do if they need a break or want to get anyway from their home
  - When you will have to report the person missing
  - What the response might look like
  - Provide the person with phone numbers they can use to inform people when they are thinking of out and about without anyone knowing. The missing persons helpline number is 116 000
- 3. Turn the discussion into a plan.
  - This could include creating a Risk Enablement Plan <u>North Somerset Council</u> -Adult Social Services - Risk Enablement Policy

- This could include updating your internal care and support plans (such as a Positive Behaviour Plan).
- This could include updating a person Risk Assessments.
- Reminder to consider mental capacity around making the decision to go missing. Where appropriate follow your internal mental capacity and best interest processes.
- It must be recorded somewhere and must be accessible to those who have permission to access the person's file.
- 4. Consider appropriate information sharing to ensure that preventive measures are actions effectively.
- 5. Set a review date and review the plan with the person.

# Appendix 2: Actions when a person is not where they are expected to be



## Appendix 3: Actions when a person is found or returns



Initiate a multi-agency review of complex or high-risk cases or where learning is identified