

Missing persons

This procedure is referred to by CQC as 'Absence without Authority'

This document is relevant to:	
Central Support Services	
Education	
Services for Disabled Adults	✓

Purpose

To provide a procedure for staff to follow if a service user goes missing.

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Introduction

- 1 This procedure is to be followed where a user of our services who is considered to be vulnerable in certain situations is presumed missing.
- 2 Where appropriate, risk assessments should be drawn up to cover particular concerns discussed with the service user and staff. Any such intrusion into her/his privacy should be carefully explained, with a view to not undermining her/his independence.

Procedure

- 3 When a service user is thought to be missing the following checks must immediately be carried out:
 - Any known arrangements or appointments that had been made
 - The time and place she/he was last seen by staff or others
 - If the missing person had indicated to anyone else any intention to go out and any information as to where
 - The service user's regular movement chart if applicable
 - Her/his mobile phone number if applicable
- 4 If these checks do not achieve a result, the senior person on duty and the on-call service manager should be informed. This should be followed by:
 - A check with any other involved agencies, colleges, training centres, friends etc to see if they know of the person's whereabouts
 - A search of the surrounding area, including the service user's private accommodation, other buildings and the grounds surrounding her/his accommodation, and the place she/he was expected to be.
- 5 In the event of the missing person still not being found the following actions should be instigated as quickly as possible, ensuring that other people being supported are not placed at unnecessary risk whilst staff are off site:
 - A search of known local haunts: shops, pubs and any other places which may be known to the missing person
 - A telephone call to the local hospital casualty department to see if she/he has been admitted.
- 6 If the steps specified in paras 3-5 above have been taken but without the person being found, then all the following should be informed:
 - On-call Quality & Performance manager
 - Police (see paragraph 9 below)
 - Duty social worker of the commissioning authority
 - Next of kin (The on-call / operations manager must determine who will inform next of kin, and at what point this should be done)
- 7 CQC should be informed within 24 hours of the incident.
- 8 All those informed must be kept up to date about the situation.

- 9 **Contacting the police.** The following details must be provided to the police:
 - Name and address of the service user
 - A visual description including: clothing, height, build, hair colour and length, shaven or not, colour of eyes, ethnic origin, dentures, spectacles, visible scars or marks and any peculiarities or other distinguishing features
 - A full description of events leading up to her/his disappearance, and her/his last known whereabouts
 - Any known limitations, preferences or established habits, which may help the police to find her/him
 - Details of current medication
 - If the missing person is in possession of money, and how much
 - Places she/he may frequent.
- 10 The police should also be advised of any particular concerns, including the service user's mental and physical health, especially if she/he has previously attempted suicide or deliberate self-harm.
- 11 **When the service user returns or is found.** Notify the police, next of kin, the on-call service manager and on-call Quality & Performance manager and anyone else involved or concerned immediately the person returns or is found.
- 12 **Record-keeping.** Care records should contain a photograph of all service users which can be used for identification purposes should the service user go missing. This must be obtained with the service user and/or family's permission. Should this permission not be given staff must enter on to the service users record a detailed written description for use should this be required.
- 13 A full report of the circumstances surrounding the incident should be made on the service users care records, with copies made available upon request to her/his family, the commissioning authority and CQC . The report should include the following information:
 - The date and time when the service user became missing
 - Details of the incident, including specific places visited if known
 - The action taken
 - Who was informed - how and when
 - The time the service user returned or was found
 - Any medication that has been missed.
 - A Livability incident form must be completed
- 14 All incidents should be discussed with the Quality & Performance manager responsible for the service and the appropriateness of the service's response to the incident reviewed. The Quality & Performance manager will determine the need for an investigation or any further action.

Training

- 15 All staff will receive training in this procedure as part of their induction. Refresher training will be provided to staff as necessary.

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Consult Basecamp or the Public folder for the latest version of this procedure.

Document Control

Reviewers:

Name	Position
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