



# SPC Kilkenny

## Missing Person Policy

Policy Number	Policy Developed by	Date Developed
03 - Schedule 5	Irene Davitt	13.09.2016
Version	Amendments	
2	Full review of policy, Flow chart updated	
Reviewed by		Review completed
Annemarie Murphy, Mirjam Lettner		12.08.2021
CEO signature		Next Review Date
		12.08.2023

### Mission Statement

Utilising our resources and skills to provide intentional supports for the people we support; enabling them to live full and inclusive lives by contributing to and enriching the fabric of their local communities.

SPC partners with external agencies and community services to facilitate '*ordinary lives in ordinary places*'

### Vision Statement

People supported will live a good life, in their own home, with supports and opportunities to become active, valued and inclusive members of their local communities.

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## **1.0 PURPOSE OF THE POLICY**

- 1.1. The purpose of this policy is to establish clear and defined procedures for locating and returning the person we support to his/her home and to safeguard the person we support.
- 1.2. SPC has a duty of care to ensure that the whereabouts of the person we support is known at all times, and to have a strict protocol in the event that the person we support is found to be missing without notifying anyone from his/her home.
- 1.3. SPC will carry out an assessment of needs on admission to the residential services and refer to the H.S.E. for provision of alternative community supports as required.

## **2.0 SCOPE OF THE POLICY**

- 2.1. This policy applies to all the person we support availing of support in SPC.
- 2.2. This policy applies to all staff employed by St. Patrick's Centre, (Kilkenny) including those contracted for services, seasonal workers, volunteers, visitors, and the people who use our supports/ families.

## **3.0 CORE PRINCIPLE UNDERPINNING THE POLICY**

### **The balancing of rights and risk**

- 3.1. Each person's right to independence and freedom of movement both within and outside of the home.
- 3.2. Unnecessary restrictions are not in place on a person's right to freedom of movement.
- 3.3. Staff are responsible for promoting an active and flexible approach to managing potential dangers in order to minimise restrictions and promote independence.
- 3.4. Staff should support people to be as independent as possible based on their individual support and supervision requirements and personal wishes.

- 3.5. Staff should develop strategies to reduce the impact of any identified risks and complete a risk assessment if it is suspected that a person is at risk of going missing.
- 3.6. If a person is subject to a restriction based on the level of risk being unacceptable, the reason must be documented, including any assessments used to determine the use of restrictive options.
- 3.7. Documentation of the restriction must include evidence of all strategies considered and tried in attempting to reduce or manage the risk. Staff must act in accordance with SPC's Policy and Guidelines on the Prevention of or use of Restrictive Practices.

#### **4.0 DEFINITIONS**

- 4.1. For the purpose of this policy a vulnerable adult is a person over the age of 18 who is or may be in need of community support services by reason of an intellectual disability, and is or may be unable to take care of him or herself, or is or may be unable to protect him or herself from significant harm or serious exploitation, as defined in his/her Personal plan.
- 4.2. The term missing as used in this document applies to the person we support who absent themselves without notifying anyone from their place of residence or who fail to return within an agreed period of time without making contact with staff.
- 4.3. The person we support is not considered missing if their whereabouts are known but they are refusing to return to their residential house and there is no immediate risk to themselves or others. Options such as contacting the emergency governance person, staff member, family or friends to discuss and negotiate with the person we support about returning to their house must be considered. See missing person's flowchart.

#### **5.0 STANDING OPERATING PROCEDURE (SOP)**

- 5.1. Each Community home will have a Missing Persons Standard Operating Procedure specific to their area.

## **6.0 RESPONSIBILITIES**

- 6.1. The PIC/Team Leader/Shift Leader will notify the Emergency Governance manager and Community Service Manager who will co-ordinate information between the relevant parties as required.
- 6.2. Community Service Manager will notify the Director of Services and CEO.
- 6.3. The Community Service Manager or Social Work Department will liaise with the H.S.E. and with the family of the person we support.
- 6.4. The Community Service Manager will notify the Chief Inspector in writing within three working days of any unexplained absence as per Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013, under Notification of Incidents (or for the purposes of this policy as defined as a resident missing from their residential home).
- 6.5. The CEO and/or Director of Services is responsible for any communication with outside agencies such as the media in relation to a missing person.

## **7.0 CONFIDENTIALITY**

- 7.1. Article 40.3.1. in the Irish Constitution sets out that privacy is a core personal right and confidentiality stems from this right.
- 7.2. All staff involved in a missing person incident must be aware of the importance of maintaining confidentiality.
- 7.3. The decision to disclose information must be based on a need-to-know basis.
- 7.4. Although every case must be considered on its merits, the person's confidentiality will usually not present a barrier to providing basic information about the person we support's absence to people such as other residents of the house and those who the person is likely to contact, who may be able to assist in locating the supported person.

## **8.0 PROCEDURES – MISSING PERSON FLOW CHART**

- 8.1. The PIC/Team Leader/Shift Leader on duty will contact the Community Service Manager or Emergency Governance Person on duty to inform them that a supported person is missing. The Community Service Manger or Emergency

Governance Person will have overall responsibility for contacting the relevant staff and co-ordinating the search.

Spontaneity

- 8.2. The Community Service Manager or Emergency Governance person on duty when the person we support is found to be missing from his/her home will organise two search groups within local area of home or community setting where person supported went missing.
- 8.3. Staff member reporting the person missing from their home to include information about physical and mental health of person supported at the time of absconding.
- 8.4. Communication between search groups to be held via mobile phones and/or walkie talkies from missing person grab bag. Ensure a staff member is available at the person's home, in case person returns to their home.
- 8.5. A local map from the missing persons grab bag should be used for the search.
- 8.6. The Community Service Manager or Emergency Governance person on duty will also make telephone enquiries to locations where the person we support may visit such as family, local shops etc. Where a person has a mobile phone, this should be contacted initially and continue to be dialled as search continues.
- 8.7. Once a decision is made to report the person we support as a missing person the Community Service Manager or Emergency Governance Person on duty will contact the relevant Garda Station and report the individual as missing. Inform Gardai about what person supported was wearing and request "Pulse Number" of Gardai for further communication.
- 8.8. The Community Service Manager or Emergency Governance Person on duty will also inform:
  - Family Members
  - Director of Services
  - CEO
  - MDT Team as necessary
  - HIQA monitoring notification
- 8.9. The Community Service Manager/Emergency Governance Person must keep accurate records.
- 8.10. The Community Service Manager/Emergency Governance Person must communicate with all parties involved.

- 8.11. The staff on duty who reported the absence/ missing person must complete an Internal Notification.
- 8.12. Each SPC community home is provided with a missing person grab bag. Content of the missing person grab bag is as follows:
- Local map
  - Rescue sheets
  - Walkie talkie
  - First aid kit
  - Drinking water
  - Food/snack

Items can be added individualised to the people supported in each home.

- 8.13. When person supported is found/returning to their home, a medical check with their GP or Care Doc to be completed.
- 8.14. To ensure the physical and psychological wellbeing of the person after returning to their home offer favourite food, drinks, shower and reassurance.
- 8.15. In the event of a member of the public being involved e.g finding the person, SPC to obtain the contact details and a statement of events from them also.

## **9.0 DEBRIEF**

- 9.1. Following the incident, a debrief meeting must be arranged by the Community Service Manager and PIC with all staff involved in the incident and involve MDT members as necessary.
- 9.2. Additional support for staff, the person we support and the person's family is provided by a referral to the Social Work Department and the Employee Assistance Scheme (EAP).
- 9.3. Staff will ensure the person we support has appropriate opportunity and time to discuss their reasons for leaving their home without informing the staff and how this can be avoided in the future. The person we support must be involved in reviewing their risk assessment and support plans in light of the incident. Referrals to other services such as psychology may be considered.

## **10.0 TRAINING**

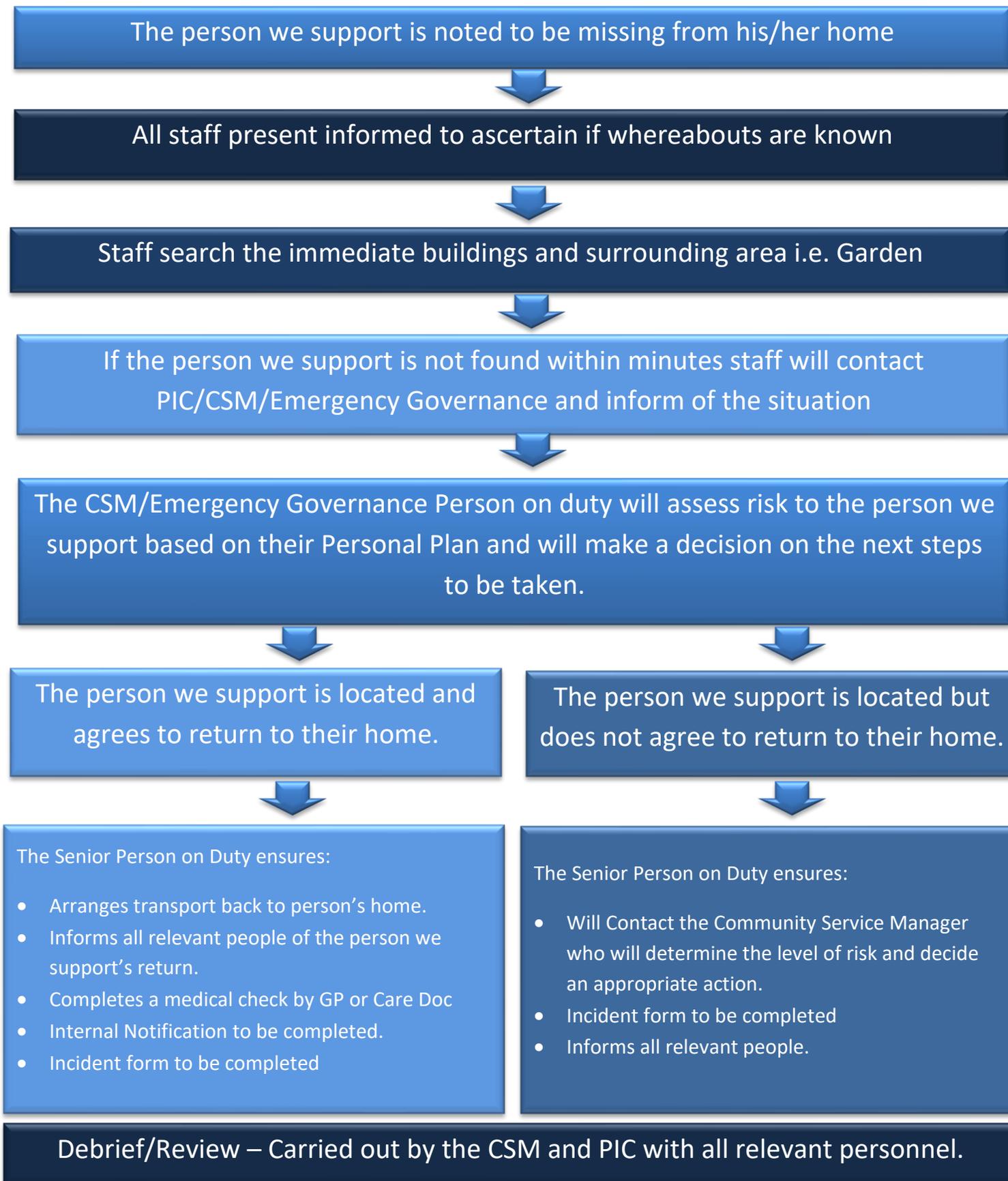
- 10.1. All employees must be aware of and comply with the procedures within this policy.

10.2. Missing Person Policy must form part of and be discussed during all induction of new employees.

**11.0 MISSING PERSONS POLICY SHOULD BE READ IN CONJUNCTION WITH THE FOLLOWING DOCUMENTS / POLICIES:**

- Admissions Policy
- The Person's Personal Plan
- Incident/Accident Pathway
- Confidentiality Policy
- Risk Management Policy
- Restrictive Practice Policy
- SPC Safety Statement

12.0 APPENDIX 1 – MISSING PERSONS FLOWCHART





## Risk Assessment Form St. Patrick's Centre (Kilkenny)



<b>Date of Assessment &amp; Planning Meeting:</b>					
<b>Person Supported:</b>				<b>D.O.B.</b>	
<b>House:</b>					
<b>Meeting attended by:</b>		<b>Name:</b>		<b>Role:</b>	
<b>What is the Risk:</b>					
Risk Description	Impact/Vulnerabilities	Existing Controls Measures	Additional Controls Measures	Person's Responsible for Action	Review Date
<b>Initial Risk</b>			<b>Remaining Risk (To its Lowest Possible Level)</b>		

Likelihood	Impact	Initial Risk Rating	Likelihood	Impact	Remaining Risk Rating	Status (Green/Amber/Red)

**Additional Controls (Actions) Review Sheet**

Number	Additional Controls	Additional Control (Action) Summary Update	Person Responsible for Action (If Changed)	Action Status Behind schedule/On Schedule/Complete Schedule	Next Review Date

Please sign and date the below confirming that you have read and fully understand the contents of the above mentioned "Risk Assessment"

↓ ↓ ↓ ↓

Signed By:

Date:

Signed By:

Date:

**\*ACTION:** *If additional control measures are completed, please review & update a new Risk Assessment Form.*

**Internal Notification of any allegation of suspected or confirmed abuse of any Person Supported**



Form to be completed and forwarded to the PIC/Designated Officer

Name of alleged victim		Date of Birth	
Address		Unique Identifier Number	

**Details**

Name of the person completing this form	
Position of reporter <i>(person supported, relative, staff member etc)</i>	

Date of alleged abuse		Time of alleged abuse	
Date you reported alleged abuse to line manager		Time of report of alleged abuse	
Location			

**In the event of a disclosure complete the following details**

Name of Witness			
Disclosed to		Date of Disclosure	
Location of Disclosure		Time of Disclosure	

**Type(s) of Abuse Alleged**

Physical Abuse	<input type="checkbox"/>	Financial/Material Abuse	<input type="checkbox"/>	Discriminatory Abuse	<input type="checkbox"/>
Sexual Abuse	<input type="checkbox"/>	Neglect & Acts of Omission	<input type="checkbox"/>	Organisational Abuse	<input type="checkbox"/>
Psychological Abuse	<input type="checkbox"/>	Emotional Abuse	<input type="checkbox"/>	Self-Neglect	<input type="checkbox"/>

**Details of Alleged Abuse**

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Person allegedly causing concern	
Address of Person allegedly causing concern	
Unique Identifier Number	
Contact Number	

**Tick all that apply**

Staff Member	<input type="checkbox"/>	Peer	<input type="checkbox"/>
Relative	<input type="checkbox"/>	Volunteer	<input type="checkbox"/>
Visiting Care Worker or Professional	<input type="checkbox"/>	Unknown	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>		

<b>Pen Picture of vulnerable person</b>
<i>A Pen-picture is a written account [ 4 to 5 lines] of personal and confidential information about a person such as age, gender, where they live, disability, diagnosis and personality traits etc.</i>
<b>Status of the person supported</b>
<i>Describe the current status of the person supported, for example physical and/or mental state</i>
<b>Immediate actions taken</b>
<i>Outline immediate actions taken including actions taken in regard to both the person supported and the alleged abuser.</i>
<b>Additional information relevant to the alleged abuse</b>

Notification Information	Yes	No	By Whom	Date
Has the person supported been informed that an internal notification has been processed	<input type="checkbox"/>	<input type="checkbox"/>		
Have the Gardai been Notified	<input type="checkbox"/>	<input type="checkbox"/>		
Has the person supported's contact person been notified	<input type="checkbox"/>	<input type="checkbox"/>		
Name of contact person and nature of relationship to vulnerable person (i.e. family member/ advocate etc)				

<b>Declaration</b>			
I, the undersigned, declare that the information I have provided in this notification form is true to the best of my knowledge and belief.			
Name (Please Print)		Position	
Signed		Contact Number	

<b>To be completed by Social Worker/Designated Officer on receipt of this form</b>			
Name (Please Print)		Position	
Signed:		Contact Number	
		Date Received	