

## POL29 – Missing Service User Policy and Procedure

Serendipity Healthcare Ltd  
Unit 5, Millennium Way, Dunston, Chesterfield, Derbyshire  
S41 8ND



### 1. Purpose

- 1.1 To ensure that staff understand the procedure to follow in the event of a Care Worker being able to access the Service User's home (e.g. via a key in a safe) at the agreed scheduled time but finding that the Service User is not home as expected. This policy must be read alongside the POL36 - Access to Service User's Homes Policy and Procedure.
- 1.2 To ensure that Serendipity Healthcare Ltd responds in a proportionate, considered, and reasonable manner to a missing Service User incident.
- 1.3 To safeguard the wellbeing of vulnerable Service Users.
- 1.4 To support Serendipity Healthcare Ltd in meeting the following Key Lines of Enquiry:

#### Key Question

#### Key Lines of Enquiry

SAFE

S2: How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?

- 1.5 To meet the legal requirements of the regulated activities that Serendipity Healthcare Ltd is registered to provide:
  - The Care Act 2014
  - Human Rights Act 1998
  - Mental Capacity Act 2005
  - Mental Health Act 2007
  - The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2012

### 2. Scope

- 2.1 The following roles may be affected by this policy:
  - All staff
- 2.2 The following Service Users may be affected by this policy:
  - A Service User whose whereabouts cannot be established and where the circumstances are out of character, or the context suggests the person may be a subject of crime or at risk of harm to themselves or another
- 2.3 The following stakeholders may be affected by this policy:
  - Family
  - Advocates
  - Commissioners
  - External health professionals
  - Local Authority
  - NHS

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### **3. Objectives**

- 3.1** To ensure that Service Users have freedom of choice and privacy. This includes the choice to leave the service unless constrained by a Deprivation of Liberty Authorisation or other legal restraint which specifically restricts their freedom in this respect.
- 3.2** To ensure that all staff recognise their responsibility for the safety and security of all Service Users.
- 3.3** To ensure that Serendipity Healthcare Ltd has mechanisms in place to keep up to date with Service Users' whereabouts and maintain their safety and welfare.

### **4. Policy**

- 4.1** Serendipity Healthcare Ltd understands that it provides care for Service Users who may be frail, infirm, or limited in their mobility. Some Service Users may also be confused or easily disorientated and therefore become easily lost. For these reasons, a Service User going "missing" from home may be an obvious cause for concern regarding the Service User's safety and must be considered as a potential emergency.
- 4.2** Any response to a missing Service User will be proportionate, considered, and reasonable. Serendipity Healthcare Ltd will ensure that risk assessments are undertaken prior to care commencing for Service Users who are known to 'walk' and put themselves at risk. Serendipity Healthcare Ltd will also ensure that up-to-date details of Service Users are on file and will consider using the Herbert Protocol for Service Users who are considered at risk.
- 4.3** In the event of a Service User going missing, the following policy and procedure must be adhered to. It is the policy of Serendipity Healthcare Ltd that all staff recognise their responsibility for the safety and security of all Service Users.  
All Service Users have freedom of choice, including the choice to leave their home unless constrained by a Deprivation of Liberty Authorisation or other legal restraint which specifically restricts their freedom in this respect. However, it is necessary that members of staff understand the importance of responding and reporting when a Service User is unexpectedly not at home at the time of an agreed visit.

### **5. Procedure**

#### **5.1 Prevention**

Whilst the emphasis of this policy and procedure is on when Service Users go missing, it is fundamentally vital that Serendipity Healthcare Ltd does all it can to prevent this happening in the first place.

#### **5.2 Risk Assessment Outcomes**

Risk assessments to ensure the safety of Service Users when they leave their home will have one of the following outcomes:

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- **Outcome 1** - A statement that the Service User is able to maintain their safety whilst away from the premises alone
- **Outcome 2** - A statement that the Service User is not able to maintain their safety whilst away from home, except when with a companion who is able to maintain that safety and agrees to do so
- **Outcome 3** - A statement that the Service User is unable to maintain their safety whilst away from home in any circumstances

### Relating to the Above Outcomes:

- Outcome 1 must be accompanied by a copy of the risk assessment held within the Care Plan
- Either of outcomes 2 or 3 indicates that, in the best interests of the Service User, they may be deprived of their liberty
- Where the Service User lacks capacity, this must trigger an immediate referral to Social Services to discuss whether Deprivation of Liberty applies

### 5.3 Record Keeping and Consent

- It is essential to keep up-to-date information for all individuals at Serendipity Healthcare Ltd. Prior to starting care and support with Serendipity Healthcare Ltd, full information about the Service User will be taken which includes addresses (home, work, previous, family), all known and significant locations and descriptive information such as the Service User's skin colour, hair (colour, style), eye colour, height, build, distinctive features (tattoos, physical impairment etc.)
- Where Service Users are known to 'walk about', information on why they 'walk about,' if this is known, will be recorded to assist staff with engaging with the Service User to stay safe and independent
- This will form the basis of information to be shared with the Police when reporting a missing Service User incident. Where possible, Serendipity Healthcare Ltd will seek the Service User's consent to share their risk assessment information with the Police and other relevant agencies to inform a search strategy in the event of them going missing. If they do not have the capacity to consent, consent will be sought from the health-related Power of Attorney. If care is commissioned by health or social services, this will be coordinated in consultation with the Commissioner
- Serendipity Healthcare Ltd will consider the Herbert Protocol to assist with obtaining information that will be useful if a Service User goes missing

### 5.4 Missing Service User Procedure

If the Care Worker has accessed the Service User's home, they are not at home, and this is unexpected:

- Staff will raise the alarm immediately by informing Serendipity Healthcare Ltd or the out-of-hours service. Serendipity Healthcare Ltd will check if there is any record of hospital appointments, admissions, or social activities
- The Care Worker will check any visit records to see if any notes have been left
- Serendipity Healthcare Ltd will try contacting the Service User if they have a mobile phone

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- Serendipity Healthcare Ltd will contact the last Care Worker who visited, if different, to check if they know of the Service User's location
- Serendipity Healthcare Ltd will contact the Next Of Kin or the service users point of contact.
- If the Service User has recently been in hospital, Serendipity Healthcare Ltd will contact local hospitals. Be aware that it is not unusual for vulnerable Service Users to be picked up by concerned motorists who may then drop them at hospitals on their journey some distance away
- It is important here that the Registered Manager has a structured plan to their search and that the search does not place staff or Service Users at risk
- Serendipity Healthcare Ltd will follow the emergency procedure agreed with the Service User at the start of the service to contact family or friends
- If the Service User is unable to be located, the Duty Social Services Team will be contacted for further advice or guidance
- Where contact cannot be made and the judgement of the Registered Manager is that the Service User may be at risk, then the Police will be contacted, and a suitable entry made in the Service User's records. The Registered Manager will consider any medication that might be due as well as any medical or mental health conditions when assessing the risk. Weather conditions will also be considered
- Once Serendipity Healthcare Ltd is aware that the Service User is not at home, the Care Worker will not be permitted to re-enter the Service User's home. This is to ensure the security of the Service User's home and prevent safeguarding incidents arising in the Service User's absence
- The Care Worker will ensure that the home is left securely, and any keys returned to the key safe if applicable

In circumstances where a Service User has not returned from an arranged outing, activity or walk at the expected time, Serendipity Healthcare Ltd must also follow the Missing Service User Policy and Procedure

### **5.5 Communication**

- Families will be requested to telephone Serendipity Healthcare Ltd if the Service User contacts them and relatives will be kept informed at each stage of the search if this is in line with the Service User's agreed emergency plan
- Once the Service User has been found, it is essential that all the parties who were advised of the emergency are contacted again and informed that the search has been concluded
- Serendipity Healthcare Ltd will be aware of any contractual requirements and procedures in relation to No Reply and Missing Service Users and ensure that the policies of Serendipity Healthcare Ltd dovetail with their contractually required and locally agreed procedures

### **5.6 Incident Recording, Review and Notifications**

- The Registered Manager will, at the earliest opportunity, complete an incident form and record details of the incident in the Service User's records. Times of actions and decisions will be recorded as accurately as possible

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- Following a missing Service User incident, Serendipity Healthcare Ltd will investigate the incident thoroughly. The investigation will try to establish why the Service User went missing and how the Service User went missing. The investigation will include any recommendations to prevent the incident arising again
- Serendipity Healthcare Ltd will refer to the CQC Statutory Notification Requirements and submit a CQC Notification following the incident, if required to do so
- Serendipity Healthcare Ltd will also review its local safeguarding adult procedures and raise a safeguarding notification with the Derbyshire County Council, Sheffield City Council, Nottinghamshire County Council Safeguarding Adults Team if there are concerns that a Service User has suffered, or may have suffered, harm or neglect
- Where a complaint has been made in relation to a Service User going missing, the matter will be investigated through the POL11 - Complaints, Suggestions and Compliments Policy and Procedure at Serendipity Healthcare Ltd

### **5.7 Training**

All staff will be made aware and trained in the Missing Service User Policy and Procedure and the steps to take if a Service User is found to be missing.

## **6. Definitions**

### **6.1 Missing Service User**

- A Service User who has left their home but whose ability to manage their personal safety is in doubt, who may or may not be subject to a Deprivation of Liberty (DoL) Authorisation or other legal restraint on their freedom to leave the premises
- A Service User who has left the premises with the knowledge of staff but whose late return is unusual and causing concern
- Anyone whose whereabouts cannot be established and where the circumstances are out of character, or the context suggests that the person may be the subject of crime or at risk of harm to themselves or another

### **6.2 'Walking About'**

- Many people with dementia feel the urge to walk about and, in some cases, leave their homes. Walking is not a problem in itself - it can help to relieve stress and boredom and is a good form of exercise. When a person with dementia often walks about, it can be worrying for those around them and may at times put the person in danger. It may not be clear why the person is walking about, and this is often referred to as 'wandering'. However, this term is unhelpful because it suggests aimlessness, whereas the walking often does have a purpose. Rather than dismissing it, it is important to think about how the person's independence, safety and dignity can be preserved

### **6.3 Herbert Protocol**

- The Herbert Protocol initiative is named after George Herbert, a war veteran of the Normandy landings, who lived with dementia. It is an initiative adopted by many police forces compiled of useful information, which can be used in the event of a vulnerable person with dementia going missing. Serendipity Healthcare Ltd will seek advice from its local police

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force on the initiative in the local area. Although this was designed with care homes in mind, the principles can be applied in a domiciliary care setting with the Service User's consent

### **6.4 Deprivation of Liberty Safeguards**

- The Deprivation of Liberty Safeguards (DoLS) are part of the Mental Capacity Act 2005. The safeguards aim to make sure that people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom
- For settings, such as supported living, adult placement/shared lives or domiciliary care, the Deprivation of Liberty Safeguards cannot be used, so an application must be made to the Court of Protection
- In these settings, care providers (where appropriate, with Local Authority Care Managers) should examine the situation of people who lack the mental capacity to agree to their living arrangements, to see if they appear to be deprived of their liberty considering the Supreme Court Judgment. They may wish to seek legal advice and liaise with the commissioners of the service if they think that they might be depriving someone of their liberty and cannot find a less restrictive option for providing care or treatment

**Reviewed – 28.01.2022**

**Lisa Ward – HR Manager**