missing people

Registered charity in England and Wales (1020419)
and in Scotland (SC047419)

A lifeline when someone disappears

Scottish National Missing Person's Framework Implementation Project
Project Report (Full) Year 1
March 2020

Project Background

There are more than 20,000 missing incidents reported to Police Scotland every year, with many more incidents going unreported. In 2018-2019, 60% of investigations related to someone who has been missing more than once, and 63% of investigations related to children.[1] In 2017, Scottish Government published The National Missing Persons Framework for Scotland, which puts Scotland firmly ahead of the curve in its approach to safeguarding and supporting missing people.

The Framework exists as good practice guidance for professionals who are working with and supporting missing people and their families. The Framework's aims are **to prevent people from going missing in the first place, and limit the harm associated with people going missing.** These aims are broken down into four objectives; **prevent, respond, support and protect**:

> *'A missing person is anyone whose whereabouts are unknown and; where the circumstances are out of character; or the context suggests the person may be subject to crime; or the person is at risk of harm to themselves or another.' – National Missing Persons Framework 2017*

- Objective 1: To introduce preventative measures to reduce the number of missing persons episodes
- Objective 2: To respond consistently and appropriately to missing persons episodes
- Objective 3: To provide the best possible support to both missing people and their families
- Objective 4: To protect vulnerable missing people and reduce the risks of harm.

Responsibilities of key agencies when responding to missing are summarised as **eight commitments** that require local and national action:

1) Agencies to ensure that prevention planning takes place locally for vulnerable individuals and groups
2) Agencies to ensure that people most at risk of going missing are treated as a priority at a local level
3) Agencies to exchange proportionate information to ensure that missing people are located quickly
4) Agencies to adopt a consistent approach to risk assessment when someone goes missing
5) Agencies to hold return discussions with young people and adults after they have been missing
6) Agencies to ensure that specialist support is made available to people who have been missing and their families
7) Scottish Government to oversee a programme of activity to raise awareness of missing people
8) Scottish Government to ensure that risks of harm are highlighted in all training and guidance.

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[1] Police Scotland Missing Persons Annual Report 2018/2019.

Some excellent first steps have been made since The Framework was launched, including a national training programme for frontline professionals to raise awareness of The Framework and how to deliver effective Return Discussions; the local piloting of protocols to prevent high risk groups being reported missing, and the development of educational resources for young people.

The Scottish Government's Missing Persons Team has worked hard to disseminate The Framework, to secure support for its agreed definition of missing persons and its shared approach to risk assessment. However, as of 2019, some local areas had not yet identified a partnership to lead on missing persons, or a champion to lead the local implementation of The Framework – key actions to ensure people at risk of going missing are treated as a priority, locally. Furthermore, challenges in implementing The Framework were identified as the following:

- Local information sharing between different agencies
- The consistent use of The Framework's standard approach to risk assessment
- Local agreement on which agency is best placed to deliver Return Discussions
- Knowledge of good practice in preventing and responding to missing incidents
- Limited awareness of support services available for people at risk of being reported missing and families of missing people.

In July 2019, Scottish Government provided £70,000 of funding to Missing People for 9 months of project delivery, the first year of a two year programme of consultancy, training and good practice sharing to ensure the implementation of The National Missing Persons Framework across Scotland, until March 2020. Missing People is uniquely placed to carry out this work, as the only national charity that supports missing and returned children and adults as well as their families left behind.

With 25 years frontline experience in supporting missing people and their families, Missing People work in collaboration with a range of partners across the UK, including local police forces, the UK Missing Persons Unit, and the Child Exploitation Online Protection Centre (CEOP). This project is an opportunity to grow Missing People's experience in Scotland and share our specialist knowledge of missing by providing support to teams implementing The National Framework. It is designed to complement Scottish Government's and Police Scotland's commitment to create a national response to protect vulnerable missing people from harm. It also builds on Missing People's strong working partnership with Police Scotland, following a renewed partnership signing in 2018; and our receipt of multi-year funding from the Scottish Government to increase awareness and the use of our services for young people.

Missing People has supported every stage of the development and implementation of The Framework – from being a key member of The Framework Development Steering Group, leading the partnership to deliver training to frontline professionals on Return Discussions, and working with Members of Scottish Parliament to gather political support from all parties for The Framework's implementation.

Project Aims

Project aims were the following:

- To ensure that local partnerships and agencies in three police division areas understand the priorities and responsibilities for improving the local response to missing persons and their families in line with The Framework.
- To ensure local partnerships and agencies are more aware of good and innovative practice in preventing missing.

The project team reported to and received input from The Scottish National Advisory Group on missing throughout the project, which is comprised of leads from Scottish Government, Police Scotland, The University of Glasgow, Shelter, and Missing People.

The selection of three local areas in which to work was guided by the National Advisory Group.

Project Activity & Key Outputs

In order to achieve the project aims, the following key activities were agreed with the National Advisory Group:

- Employ a National Coordinator to work closely with partners in local areas and the National Advisory Group.
- Support Professionals to implement The National Framework by mapping, reviewing and auditing current local approaches.
- Support Professionals to implement The National Framework by providing advice, assistance and training in developing a new response in line with The Framework.
- Delivery of an annual conference to share good and promising innovative practice for practitioners involved in preventing and responding to missing incidents.

In July 2019, Missing People appointed a National Coordinator for Scotland, who has been a crucial presence in Scotland, able to build relationships with partners both in the three chosen local areas, and across Scotland more widely.

In order to support professionals to implement The Framework locally, and identify existing good practice, the mapping and reviewing of local policy and protocol was completed for each division. This included reviewing policy and other relevant documentation relating to missing adults and children from Police Scotland, NHS, education, and local authority partners. Documentation was assessed for clear purpose, reference to relevant legislation and national guidance, and good practice.

A set of recommendations for improvement was then created with input from conversations about front-line practice with professionals from Police Scotland, NHS, education and local authorities. Findings and recommendations were then shared with each individual division, respectively, including the identification of good practice in each.

The project team also delivered the following:

- Workshops with 26 professionals to map the respective journeys of missing adults and children in order to clarify roles and responsibilities, locally. Learning will be shared with professionals who attended in a document that can be referred to by all staff.
- Return Discussion 'train the trainer' style training to 9 professionals, locally. Delivery of further training is delayed due to COVID-19. Online access to training will be made available to local areas who did not receive training in Year 1 during in Year 2 of the project.
- We have sold tickets to 100 delegates wanting to attend our Good Practice Sharing Conference which was due to be held in March 2020. Unfortunately, the conference has been delayed due to COVID-19 and will now be held online on the 10th September 2020.

Feedback

Feedback from the mapping and consultancy stage of the project included the following:

"We look forward to working further with the charity to make improvements in the areas identified in the review and appreciate their assistance in respect of delivering these." – Police Scotland

Feedback from 15 professionals who attended our Journey Mapping workshops included:

- 93% scoring the workshops as 'good' or 'excellent'
- Attendees finding the workshops useful for:

  - Identifying gaps in local agency support
  - A networking and discussion opportunity for partners and local agencies
  - Effective understanding of different services' views, workload, and approach
  - Awareness of Missing People's services
  - Information on reporting people missing
  - Understanding different perceptions of risk, locally.

Overall Findings

The project's key findings on areas for improvement were the following:

- Access to relevant and up-to-date protocols and procedures in relation to missing could be improved for all professionals in each local area.
- Stronger protocol could exist for missing adults and their families in all three areas.
- While local senior professional knowledge of The Framework was good, knowledge about The Framework for front-line staff was inconsistent across all agencies and local areas.
- The project highlighted a need for additional resources for the completion of Return Discussions for adults and non-LAC in two local areas.

The project's key findings on good practice were:

- A Missing Person Partnership Protocol as an excellent example of good practice as a comprehensive, multi-agency local approach to missing aligned with the prevent, respond, support and protect objectives from The Framework.
- Good practice exists in two local areas with professionals frequently promoting and using The Herbert Protocol to respond to missing adults with dementia.
- Information sharing pathways in regards to LAC in two local areas are well established between partners. One local area shows particularly good practice in regards to daily telephone briefings between Police Scotland and local care home staff, and in its procedure for supporting young people from a local health care setting.

Project Findings: Good Practice Key Themes

Initial mapping of policies and protocols within each local area revealed a need for clarity regarding processes, procedure and responsibilities for professionals in two local areas. Workshops that were held to help with this were successfully attended and learning documents shared afterwards. Return Discussion training was a need identified for all three areas, and knowledge of The National Framework varied between agencies, with more senior staff having the most knowledge and understanding of the Framework's existence and objectives. One local area's Partnership Protocol emerged as a particularly strong area of good practice. Additional findings related to multi-agency working, children, and adults – including those with dementia.

Multi-Agency Working

Multi-agency working is vital in responding to missing for, but not limited to, effective risk assessment; addressing the reasons why someone goes missing; providing necessary support, and reducing the likelihood of future missing episodes.

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Multi-agency working involves the consideration of the support needs of an individual from all relevant agencies such as the police, education, NHS and the local authority in the context of a missing episode, or repeat missing episodes.

Examples of good multi-agency working were seen in all three areas. All agencies across the three local areas consistently use the low/medium/high risk assessment and understanding of missing as suggested and defined in The Framework. Operational Working Groups also meet regularly across all three areas where the support needs of children in particular, are discussed by a number of relevant local agencies. Information sharing from Return Discussions is a key part of this process. There is consistent communication and information sharing between relevant agencies to safeguard children and young people and inform children's care plans, for example.

Area 1

- Joint Action Forms are used between police and residential care home staff, and between police and local mental health units to share up to date information, such as recent associates of children and young people at risk of going missing.

Area 2

- A police and local hospital Liaison Meeting takes place every 6 weeks between the local Missing Persons Operational Coordinator (MPOC) for Police Scotland, Charge Nurses and senior management, at which missing adults and general hospital issues are discussed.
- The MPOC delivers regular input sessions to staff at two local hospitals on missing, highlighting the National Missing Persons Framework, up to 5 times per year.

Area 3

- Area 3's Missing Person Partnership Protocol is an excellent partnership agreement detailing a strong approach to a multi-agency response to missing, with a clear focus on ensuring that the objectives of The National Missing Persons Framework are achieved. It is inclusive of a wide range of agencies Police Scotland; the local authority; the NHS; the local Health & Social Care Partnership; Criminal Justice; Education & Children's Services; Scottish Care; Multi-Agency Public Protection Arrangements (MAPPA); Housing and Public Protection; the Scottish Prison Service; and third sector organisations. The Protocol outlines an information sharing network between these agencies, to ensure appropriate and timely information is shared, in reference to information sharing protocols already in place.
- Agencies across Area 3 have a clear understanding of their roles and responsibilities around missing from reporting to return procedure, made clear within The Protocol.

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Children

All three areas take a multi-agency approach towards the safeguarding of missing children, led by the MPOC. There is regular contact with residential homes and consistent approaches to reporting and managing risk around missing children.

> *Children accounted for 63 per cent of missing person investigations in Scotland between 2018 and 2019, of which 50 per cent were looked-after. The right support for children who go missing is crucial to identify any ongoing risk or factors which may make them more likely to go missing again, or establish whether they have come to harm whilst away.*

Area 1

- Residential homes in Area 1 are consistently using 'absent' as a category for children and young people who are away from home without authorisation considered to not be at risk. Where used appropriately, and having considered the level of risk, this procedure is working positively to reduce the number of children and young people from residential care being reported to police.
- Regular training is delivered by police and children's services to management staff at residential care homes. Focus is on upskilling and refreshing knowledge on risk assessment and missing risk categories
- The role of the Young Runaways Coordinator allows Police Scotland to work closely with residential homes, social work, and schools to prevent recurring missing episodes. The Coordinator will also take actions away from IRD meetings, liaise with social workers, and attend additional risk-management meetings, working to identify hidden harm on a daily basis.

Area 2

- Police Scotland and local children's residential homes are holding Prevention Meetings every 24 hours regarding high-risk looked-after children
- Children who meet threshold receive support from the local Multi-Systemic Therapy Team
- Families of children missing from home are sent 'Prevention Letters' by the MPOC, after two or more missing episodes.

Return Discussions

Return Discussions for children missing from residential care and 'Return to Ward' discussions for adults missing from NHS settings are completed within 72 hours of a person's return, across all three areas. Safeguarding information from Return Discussions is consistently shared with MPOCs to inform any future missing prevention strategies and multi-agency work.

Area 3

- Area 3's Missing Persons Protocol details a Return Discussion Interview Pro-Forma for use by all relevant agencies in the completion of Return Discussions. This creates quality assurance in the

recording of significant information and prompts the consideration of significant factors associated with missing from Return Discussions.

- A high number of Return Discussions are completed in Area 3. The majority of these are completed by social workers, and it is reasonable to expect that this completion rate is due to social workers being assigned this responsibility, instead of police. This procedure demarks a clear pathway in terms of roles and individual agency responsibility when a person returns from missing, which contributes to a clear understanding of the difference between Prevention Interviews (Safe and Well Checks) and Return Discussions.[2]

Adults

Police and the NHS in all three local areas are all regularly using and promoting the Herbert Protocol and Purple Alert in the interest of prevention and support for missing adults with Dementia.

Area 2

- Accident and Emergency at local hospitals have a preventative poster campaign to encourage patients to tell staff if they intend to leave.
- Further preventative measures exist within local hospitals to safeguard vulnerable adults with Dementia who may go missing from their wards, including The Pass Plan Protocol.[3]
- Regular training on the Herbert Protocol occurs across Area 2, in hospitals, to church groups and GP surgeries multiple times a year.
- A letter is sent to families and carers of individuals diagnosed with dementia on the MPOC's behalf as part of post-diagnostic care, and in instances where an individual with dementia has returned from missing, and did not previously have a Herbert Protocol form completed.

Public Health

The local inclusion of public health is an important step to ensuring consistent and inclusive multi-agency response and support for missing people and their families.

Going missing may be the first indication that there are problems or vulnerabilities for a person. A Return Discussion is an opportunity to support the individual who has gone missing and identify any underlying causes, including any ongoing risk of harm and an opportunity to refer the individual to appropriate support services. In Scotland, 87% of Return Discussions are completed by police.

'Evidence suggests that up to 80% of adults who go missing have one or more mental health problems … adults with dementia, although only making up around 3% of the people who are reported missing, remain one of the most vulnerable groups.' - National Missing Persons Framework, 2017

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[2] Although we cannot prove that this procedure has resulted in the high completion rate of Return Discussions without further evaluation, we suspect that it is likely to be a significant factor.

[3] The Pass Plan Protocol is a document populated for every patient upon admission into hospital. It identifies the conditions under which patients are able to leave a ward, any past medical history that is relevant and an evaluation of risk. It also identifies what is the most appropriate course of action to take should the patient go missing from that hospital.

Area 2

Missing People also identified a positive partnership between Police Scotland and the NHS as a key area of opportunity on which to build on existing good practice and professional relationships.

- Local use and promotion of The Herbert Protocol by Police Scotland and the NHS through inputs, posters and leaflets has been successful.
- A poster campaign by Police Scotland to reduce those reported missing from acute care exists at a large local hospital.
- The Pass Plan Protocol in place at the hospital exists as good practice in contributing to the prevention of patients going missing.

Area 3

- Missing People recognise the effective inclusion of the NHS within local Missing Persons Protocol as an example of good practice, and that this inclusion is a key area of opportunity on which to build on existing good practice and professional relationships.

Project Findings: Areas for Development

Improved Return Discussions

There is currently low completion of Return Discussions by the majority of partner agencies in all three local areas, particularly for adults and children missing from home. In Areas 1 and 2 in particular, there exists a lack of clarity around process and procedure for the completion of, and information sharing from Return Discussions, as well as the absence of a standardised Return Discussion from. In addition, protocol explicitly stating that adults are to be given a choice on who is to complete their Return Discussion, as per The National Framework, is absent in all three areas.

Children and Young People

Existing good practice around children and young people could be more clearly defined in the majority of areas, with an emphasis on prevention. Return Discussions and prevention work for children missing from home is currently only completed by the MPOC in Area 2. Multi-agency work for children in residential care could be improved through discussion between agencies on a regular basis, particularly in Area 3.

Improved Multi-Agency Working & Information Sharing

There exists a local need to establish clear and consistent multi-agency protocol and procedure for reporting adults and children missing, with particular attention on completing Return Discussions, and establishing a clear difference between Return Discussions and Safe and Well Checks in all three areas. Local emphasis on support and completion of Return Discussions for LAC in particular, leaves room to build on effective procedure, protocol, and practice around children and adults missing from home. In Area 2, Missing People has identified partnerships with the NHS as a key area of opportunity on which to build on existing good practice and professional relationships.

Missing People have also found that in one local area, police 101 call handlers are using a *Green/Amber/Red* risk assessment for missing persons, inconsistent with the type of risk assessment used by the police and other agencies, and The National Missing Person's Framework.

Public Health

Local multi-agency groups that meet regularly in order to share local information about patients missing from NHS care, to include sharing relevant information from Return Discussions that could inform improved prevention planning and response to missing patients do not currently exist in Areas 1 and 2.

Where protocol advises NHS staff on timings to report a person missing from NHS care based on perceived level of risk (although this exists as stand-alone NHS Protocol), The Framework recommendation would be to report a missing person as soon as they meet the definition of a missing person, that is, 'anyone whose whereabouts are unknown and, where the circumstances are out of character; or the context suggests the person may be subject to crime; or the person is at risk of harm to themselves or another.'

The Herbert Protocol is recognised as a valuable tool in all three areas. However, it is not currently not widely used in Area 3 as a means of supporting those at risk of going missing with dementia.

Improved Support for Missing Persons and their Families

The project team found a lack of local signposting to support services for missing persons and their families, including to Missing People and other third sector organisations in all three local areas.

Recommendations

A set of key recommendations was created for each local area. Police Scotland, NHS, Education and the relevant local authority were invited to input on the creation of these recommendations. For all three areas, recommendations included the following:

Improved Return Discussions

- A standardised Return Discussion form should be used consistently by all partners and agencies completing Return Discussions. The Return Discussion form outlined in Area 3's *Missing Persons Protocol* is an example of good practice.
- The MPOCs at Police Scotland should manage a log of completed and outstanding Return Discussions, including with a record of who is best placed to conduct the Discussion.
- The MPOC should establish a process of quality assurance for the completion and review of Return Discussions. This should include agreement about how best to review and share information from Return Discussions with relevant local agencies, in line with Framework recommendations (this should also inform any established protocol).
- All those responsible for managing and delivering Return Discussions should complete specialist training on how to best deliver the discussions.

Grow Existing Multi-Agency Working and Information Sharing

- Local areas should establish a clear and consistent multi-agency protocol and procedure for reporting adults and children missing, with particular attention to defining a clear difference between Return Discussions and Safe & Well Checks. The MPOC and local authority missing lead for children and adults, should ensure that a mapping exercise is undertaken where the roles and responsibilities of agencies are clarified and mapped, respectively. Agencies involved in this exercise should include, at a minimum, Police Scotland, NHS, and local authority leads.
- Agreed protocol and procedure, and each relevant agency's role and responsibilities should be available publically (for example, on a local authority's website) in order to be accessed by staff and ensure that families of missing persons are informed of any available support.
- Multi-agency Operational Working Groups should be established in each area by the MPOC, local authority lead on missing, or Missing Person's Champion for children and adults respectively. These groups should have representation from local agencies most relevant to missing children and adults, including dementia and mental health.
- Joint Action Forms detailing important individual information should be used by local agencies to enhance multi-agency working and communication.

Public Health

- A one-page protocol for NHS staff on the reporting process when a patient goes missing from a healthcare setting should be created by the NHS lead on missing and the MPOC.
- The Herbert Protocol should be used by NHS staff with Police Scotland, as a means of supporting those at risk of going missing with dementia. Where appropriate, an extended Herbert Protocol should be used to include mental health patients who are at risk of going missing.
- Local action plans should be developed for the continued promotion of The Protocol community-wide by Police Scotland through inputs, posters and leaflets, as well poster campaigns in NHS healthcare settings to reduce those reported missing from acute care is also recommended.
- Local multi-agency groups should be created and meet regularly in order to share local information about patients missing from NHS care, to include sharing relevant information from Return Discussions that could inform improved prevention planning and response to missing patients.

Improved Support for Missing People and their Families

- Signposting to Missing People's core services should be included within standard procedures for all agencies, where possible – to include signposting on documentation, leaflets and information supplied to missing persons and their families during and after a missing episode. Signposting provided to missing people and their families and/or carers should also include Purple Alert, developed by Alzheimer Scotland,[4] where appropriate.
- Missing People to deliver 1-hour inputs or 7-minute briefings via video to local professionals to raise awareness of our core services, where required.

What Worked Well

Scottish Government have initiated a ground-breaking approach in the creation of a National Missing Persons Framework and context for the local delivery of support around its implementation. Oversight from The National Advisory Group throughout the project was invaluable for the selection of, and our approach within, all three local areas and multiple agencies.

The facilitation of journey mapping workshops in 2 local areas were a key success of the project, resulting in the clarification of procedure and responsibility for local partners, and evidencing fundamental gaps in local service delivery for adults and children missing from home, in particular.

This project funding Missing People's first National Coordinator for Scotland was fundamental to relationship building to ensure local acknowledgement and the effective implementation of The Framework. As a point of contact for the project, the National Coordinator post has enabled Missing People to have a presence in Scotland that allows for multiple opportunities to raise awareness of our 24/7 helpline and core services to Police Scotland, Education, NHS staff and local authority staff. These agencies can then in turn, signpost more missing people and their families in Scotland to access wrap-around support that contributes to meeting The Framework's four objectives; to prevent, support, respond, and protect.

Challenges and Lessons Learned

Challenges of the project have included getting initial 'buy-in' from partners in the three local areas, and receiving relevant local policy and procedure documentation and local information, on time. This challenge could possibly have been because of the way in which the areas were selected. Selection was decided with input from the Advisory Group, based on close geographical location, figures of completed Return Discussions, and anecdotal evidence of need. This suggests that the project would benefit from the selection of any new local areas by a different process, whereby the areas themselves identify their need for support. A process that involves local area putting themselves forward for support would also

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[4] For more information, please visit:
www.alzscot.org/living-with-dementia/staying-independent/helpful-apps/purple-alert

have led to the project team being able to identify key local partners from different agencies quicker, in each area. This is a change in process which we implemented in Year 2 of the project.

The project also had its challenges due the Covid-19 pandemic. Our conference sold out with over 100 delegates due to attend, however this has had to be delayed and its format changed to be held online. However, this has enabled us to invite more professionals to attend and not be limited on delegate numbers. Covid-19 also delayed the delivery of training for one local area, which we have now adapted to be delivered online for Year 2 of the project. Consistency of a named contact within in agency involved with the project, was also sometimes difficult when Covid-19 meant that professionals from statutory agencies were needed for other priorities.