**Part 1 should be kept up to date and regularly reviewed by the Care Home / Carer and Social Worker**

|  |  |  |  |
| --- | --- | --- | --- |
| There may be important pieces of information that you are able to provide the police in the event that the person you are caring for has gone missing. Try and have several copies of recent close-up photographs of the person, this may help the police when they are searching for them. | | | |
| This form is interactive and must be completed electronically. Upon completion, it must be stored as an electronic version. It should be updated regularly electronically and part two fully completed following a missing report. This form should only ever be printed on the request of a representative of Cleveland Police, following the young person being reported missing. | | | |
| Part 1 – To be completed when it has been identified the individual is at risk of going missing | | | |
| LCS / Social Care Ref |  | Image result for face shape outline |
| Name in Full |  |
| Previous Name |  |
| Date of Birth |  |
| Ethnicity |  |
| Male / Female |  |
| Current Address (placement) |  |
| Post Code |  |

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|  |  |
| --- | --- |
| Details of Care Order |  |
| Social Worker Name and Contact Details |  |
| Professionals working with Child |  |

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|  |  |
| --- | --- |
| VEMT Yes/ No and date accepted to VEMT |  |
| Provide Evidence and the date of the CSE / CCE incident / evidence to support risk |  |
| Previous Self Harm or suicide attempts – Yes/No  Summary with dates to support risk |  |

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|  |  |  |
| --- | --- | --- |
| Previous Addresses | 1 |  |
| 2 |  |
| 3 |  |
| School / Educational Establishment attended | 1 | Current: |
| 2 |  |
| 3 |  |

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|  |  |
| --- | --- |
| Previous Missing From Home Summary |  |
| Previous Locations Found |  |
| Any Significant dates (examples Birthdays of parents / Deaths |  |
| Significant places of Interest |  |
| Habits |  |
| Hobbies |  |

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|  |  |
| --- | --- |
| GP Name and Address |  |
| Health Conditions |  |
| Medication Required |  |

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|  |  |
| --- | --- |
| General Description |  |
| Height |  |
| Weight |  |
| Build |  |
| Hair Colour |  |
| Eye Colour |  |
| Jewellery |  |
| General Appearance |  |
| Distinguishing Features  (e.g. Scars / Tattoos) |  |
| More detail of distinguishing Features – Tattoos / birth marks / piercings. | |
|  | |

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|  |  |  |  |
| --- | --- | --- | --- |
| Has person got access to money | Yes / No | If So, How Much | £ |
| Has person got a bank account |  | Have you got access to this account (If Not who has) | Yes/No |
| Name of Bank |  | Sort Code |  |
| Account Number |  | Do you hold the password for this account | Yes/No  Password: |

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Has person got a mobile phone | | Yes / No | If So, How Many |  |
| 1 | Number |  | Network |  |
| Make |  | Model |  |
| IEMI Number |  | Mac Address |  |
| 2 | Number |  | Network |  |
| Make |  | Model |  |
| IEMI Number |  | Mac Address |  |
| 3 | Number |  | Network |  |
| Make |  | Model |  |
| IEMI Number |  | Mac Address |  |

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Has person got a social Media Account | | Yes / No | If So, How Many |  |
| 1 | Platform:  Facebook, Instagram etc. | Comments: | Name used by person for this platform |  |
| 2 | Platform: | Comments: | Name used by person for this platform |  |
| 3 | Platform: | Comments: | Name used by person for this platform |  |
| 4 | Platform: | Comments: | Name used by person for this platform |  |
| Social Media activity: Who will they keep in contact with and on which platform? | | | | |

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Information regarding associates and contacts to locate the young person.

List should be reviewed regularly by the children’s home in conjunction with Social Worker.

| **Associations** | | | | | |
| --- | --- | --- | --- | --- | --- |
|  | Name | Address | Association | Mobile / Telephone / contact details | Associated Risks |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 11 |  |  |  |  |  |
| 12 |  |  |  |  |  |
| 13 |  |  |  |  |  |
| 14 |  |  |  |  |  |
| 15 |  |  |  |  |  |
| 16 |  |  |  |  |  |
| 17 |  |  |  |  |  |
| 18 |  |  |  |  |  |
| 19 |  |  |  |  |  |
| 20 |  |  |  |  |  |

**Part 2**

|  |  |
| --- | --- |
| **PART 2 - To be completed when the person goes missing.** | |
| **Description of what the person was last seen wearing. Include clothing colour, designer, labels / brands** | |
| **Shirt/Sweater** |  |
| **Trousers/Skirt** |  |
| **Outerwear, e.g. coat, jacket** |  |
| **Headwear** |  |
| **Gloves** |  |
| **Scarf** |  |
| **Footwear** |  |
| **Jewellery e.g. watch, rings, earrings** |  |
| **Other** |  |

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|  |  |
| --- | --- |
| **Time and date last seen and by who.** |  |
| **Location last seen** |  |
| **Circumstances of missing episode (e.g. argument with staff/peers, gone to meet friends, has not returned home etc.)** |  |

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|  |  |
| --- | --- |
| **Steps taken to contact / trace young person** | |
| **Bedroom searched** | **Yes / No** |
| **All rooms in home address searched** | **Yes / No** |
| **Grounds/area around house searched** | **Yes / No** |
| **Attempts made to contact Young Person (Time dates and method – e.g. 23:00 rang mobile 07\*\*\*\*\*\*\*\*\*\*\*\* - No answer, voicemail left or text sent)** |  |
| **Contacted friends / family (give details)** |  |
| **Frequented areas checked (give details)** |  |
| **Other methods to trace and ensure YP is safe (give details)** |  |

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**CURRENT RISKS**

|  |  |
| --- | --- |
| **Current Warning markers/information** | **Please provide evidence to support each risk** |
| **Suicidal** |  |
| **Self-Harm** |  |
| **Depressed** |  |
| **Confused** |  |
| **Alcohol** |  |
| **Drugs (identify Personal use or dealing and type of drug)** |  |
| **Violent** |  |
| **DoLs Status** |  |
| **VEMT Marker** |  |
| **Child Sexual Exploitation** |  |
| **Child Criminal Exploitation** |  |
| **County Lines** |  |
| **WEAPONS (describe what)** |  |
| **Other (describe)** |  |

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|  |  |
| --- | --- |
| **Persons posing a risk TO the Missing YP (include age and address where known)** | **Please provide evidence to support.** |
|  |  |
|  |  |
|  |  |

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|  |  |
| --- | --- |
| **Risk posed BY the Missing YP To the following (include age and address where known)** | **Please provide evidence to support** |
|  |  |
|  |  |
|  |  |

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|  |  |
| --- | --- |
| **List of on-going actions to be undertaken by reporting person/organisation**  **e.g. Missing YP to be contacted by telephone every hour/ List of address to be visited** | **Please provide time date and staff assigned with conducting enquiries.** |
|  |  |
|  |  |
|  |  |

**Guidance**

1. **BOTH parts of this form should be updated and kept in an electronic format.**
2. **Call 101 to report the missing episodes / 999 only for emergency.**
3. **Inform the call handler that Philomena Protocol risk assessment document has been completed and send to** [**contactmanagement@cleveland.pnn.police.uk**](mailto:contactmanagement@cleveland.pnn.police.uk)**.**
4. **Please update control room regularly with enquires conducted.**
5. **Should the Missing YP be found, inform police as soon as practicable.**
6. **Please contact the VEMT problem solving team for further advice.**

A young person moves in to your Home.



Yes

No

Is there a history of going missing or a likelihood of going missing?

PHILOMENA PROTOCOL

**No further action**will be required under the Philomena Protocol. Refer to your own operating policies.

**POTENTIAL MISSING EPISODE**

The young person fails to return to the address and their whereabouts cannot be established.

In all other cases – conduct immediate, basic measures to locate the missing person, referring to the **Tees Protocol for Children Missing from Home and Care** for guidance.

Use **Part 2** of the **Philomena Protocol Document** to fully document any steps taken to locate the missing person.

You should record the time and details of these enquiries as this will assist any joint enquiry between you and the police.

If the child or young person is located safe and well by staff, **no further action** will be required under the Philomena Protocol. Refer to your own operating policies.

If, despite completing basic measures to locate the missing person, their whereabouts still cannot be established email **Part 1 and Part 2** of the **Philomena Protocol Document** securely to [contactmanagement@cleveland.pnn.police.uk](mailto:contactmanagement@cleveland.pnn.police.uk)

Call **101** (or use an agreed electronic method) to report the child or young person missing. Provide as much detail as possible quoting the **Philomena Protocol**.

Discuss the joint enquiry with police in order to trace the young person as quickly as possible.   
Continue to actively visit locations, family and associates.  
Record these enquiries and regularly update police until the young person is safely located.

If it is believed that the young person is at serious or immediate risk of harm call **999**.

Consult with the VEMT team to establish any additional information relevant to the **Associations** section of the form to help risk assess associates and locations

**STORE BOTH PARTS SECURELY**   
either electronically or on paper where they can be accessed by staff on duty 24hrs a day in case the young person is reported missing.

Inform the VEMT Coordinator that the initial paperwork is complete. A police marker will then be placed on your location to inform officers that the **Philomena Protocol** applies to the young person living at your address.

Complete **Part 1** of the **Philomena Protocol** document and retain **Part 2**.