

THE HERBERT PROTOCOL VULNERABLE ADULT MISSING PERSONS PROFILE

This form and the information is intended to assist relatives, care workers, partner agencies and the police if the person it refers to goes missing. Please fill in these sections and keep it in a safe place. If possible please complete the electronic version of the form which is available to download from www.gmp.police.uk/HerbertProtocol

The form contains a lot of questions – do not worry if you don't have, or cannot get, all of the information it asks for – some of it won't apply to everyone. There are sections intended for professional carers. Please don't worry if you do not understand what they mean.

Please save the form – either in electronic format or handwritten – in a place where it can easily be found if the person it refers to goes missing.

It may need to be located quickly, at any time of the day, by the person who may need the information to begin the initial searches. It would be helpful if you make several copies, which can be kept safely by care workers, neighbours or relatives. It should be kept up to date and be transferred with the person if they move. When complete the form will contain personal information and must be stored appropriately to protect the person's privacy. However, if the person goes missing, sharing the information with professionals, including the police in order to protect and safeguard the person will become proportionate, necessary and justified.

The police will only ever ask for the form if the person is reported missing. Thank you for taking the time to complete it. It could help to save someone's life.

BACKGROUND DETAILS OF THE PERSON	
First name	
Last name / Family name	
Reason for vulnerability. Eg dementia, autism etc.	
Known as / Nickname	
Language spoken	
Previous / other language spoken	
Mobile number(s), network, make, model, IMEI number, Mac address	
Is there a Find My Phone or other Location APP activated on it? If so give details	
Do they have a GPS Tracker? If yes, give details	
Current address	
Postcode	
<p>Please attach a recent photo here.</p> <p>Please find one that is up to date and a good likeness of the person.</p>	

NEXT OF KIN DETAILS

Name	
Contact number(s)	
Contact address	
Postcode	
Email	

PHYSICAL DESCRIPTION

Date of birth / age		Sex / Gender	
Race / ethnicity / complexion		Build	
Height		Weight	
Hair colour / cut		Eye colour / glasses	
Marks / scars / tattoos			
Other distinctive feature (eg: facial hair etc)			

ROUTINE (IF RELEVANT)

Please detail the person's routines in this section including visitors, weekly shop, walk to the post office, weekly hobby, clubs etc. Please include the location and address where possible.

DAY	MORNING	AFTERNOON	EVENING
	Example: Goes to day centre at East Oxdown Community Centre, Gas Street, Oxdown	Example: Afternoon walk in the local park	Example: Spending the evening at home watching television
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

FRIENDS / CONTACTS

Name	Address	Association	Phone number(s)

PLACES OF INTEREST, ADDRESSES OF NOTE / WHERE THEY MAY GO TO

Previous address	
Childhood address	
Family address(es)	
Places of interest of significance - For example – old school, a favourite walk or a place to visit, a cemetery, former place etc	

JOBS, INTERESTS OR HOBBIES

Where did / do they work? (State most recent and historic jobs)

Favourite pub / club / sports ground / allotment / shop etc
Favourite activities. Eg: bowling, cricket, fishing, library, cinema, trainspotting etc
Regular holiday destinations
Particular or special interests
Reoccurring interests or places

USEFUL INFORMATION

If they have gone missing previously, where were they found?
Do they have any access to money (cash, debit/credit cards, cheque book)?
Name of Bank, Sort-Code, A/C Number and who can provide password
Where do they usually travel from and to?
Do they have access to a car? What's the type of car and registration number?
Does anyone else provide transport for them, such as friends, neighbours, taxi company?
Do they have access to Social Media? Eg: facebook, Twitter, Instagram, Snapchat?
Social Media site Username
Social Media site Password

MEDICAL INFORMATION - Please include where Deprivation of Liberty, guardianship or Section 117 of the Mental Health Act, discharge are applicable.

Current diagnosis / details of vulnerability
GP details
Medical conditions
Current medication taken
If they don't have their medicine are there any short term risks?
What are the consequences of not taking their prescribed medication over time?

What calms the individual if distressed?
What is the best way to approach them?

OTHER PROFESSIONALS INVOLVED

Name	Position	Role	Contact details

PERSON COMPLETING THIS FORM

Name	
Position (carer / relative etc)	
Contact number(s)	
Address	
Postcode	
Date	

Thank you for filling out this form

Please keep it safe where it can be found quickly if the person concerned goes missing.

This could be a printed version or an electronic version held on a computer. Please keep a recent photograph of the person with the form – this can be an electronic version or a print. It would be helpful if you make several copies, which can be kept safe in your home address or by care workers.

The police will only ask for the information in the unfortunate event of the person concerned being reported missing

If a vulnerable person goes missing contact the police by ringing 999 to avoid delay in reporting the incident

In addition to the information you have recorded on this form, the call handler will require the following information so be prepared for these questions:

- When and where were they last seen?
- A description of the clothing they were wearing?
- What was their mood or demeanour prior to going missing?