

**London Borough of Tower Hamlets Health, Adults &
Community Directorate**

Failed Visits Policy and Procedure

Revised March 2023



Table of Contents

Document Control	3
1. Definition of a failed visit.....	5
2. Purpose & principles.....	5
3. Roles and responsibilities.....	6
4. Being prepared.....	6
5. Escalation.....	7
6. Governance.....	8
7. Failed Visits high level process map	9
8. Local Authority Contacts.....	10
9. Initial Response Checklist	11
10. Commissioned Providers procedure	12
11. Adult Social Care Procedure	15
12. Out of Hours procedure	18
Appendix 1 - Failed Visits Record	20
Appendix 2 – Adults out-of-hours team referral form.....	21
Appendix 3 – Risk Assessment Checklist	22
Appendix 4 – Failed Visits Letter	Error! Bookmark not defined.

Document Control

Author	Gillian Beadle-Phelps: Service Manager for Initial Assessment, Safeguarding & DoLS and Telecare (Adult Social Care)
Department	Health, Adults, and Community Directorate
Date	September 2018

Development /Review Date	Reviewers
Reviewed September 2018	Gillian Beadle-Phelps
Reviewed September 2022	Gillian Beadle-Phelps
Reviewed March 2023	Gillian Beadle-Phelps

Version	Date	Summary of changes	Author
0.1	04/09/2018		Gillian Beadle-Phelps
1.0	08/11/2018		Gillian Beadle-Phelps
1.1	19/11/2018	<ul style="list-style-type: none"> • Amendments to Commissioned Providers procedure (section 8) • Minor grammatical changes • Team name changed from 'Community & Hospital Integrated Services' to 'Initial Assessment & Hospitals' 	Gillian Beadle-Phelps
2.0	08/09/2021	<ul style="list-style-type: none"> • Changes to reflect the new IAA contract with TH Connect 	Gillian Beadle-Phelps
2.1	11/11/2021	<ul style="list-style-type: none"> • Changes to incorporate feedback from stakeholders 	Gillian Beadle-Phelps
3.0	11/09/2022	<ul style="list-style-type: none"> • Changes to incorporate feedback from audit 	Gillian Beadle-Phelps
3.1	27/03/23	<ul style="list-style-type: none"> • Changes to incorporate feedback from stakeholders 	Gillian Beadle-Phelps
3.2	02/05/23	<ul style="list-style-type: none"> • Update Failed Visits letter to corporate letterhead 	Gillian Beadle-Phelps

Authorisation			
Name / Group	Date	Version	
PSMT	07/10/18	0.1	

SLT	25/11/21	0.3	
SMT	29/03/23	3.1	

Security classification: Unrestricted

POLICY STATEMENT

1. Definition of a failed visit

- 1.1** The Failed Visits Procedure is intended to cover only the most concerning of incidents where a commissioned provider or employee of an Adult Social Care (ASC) team has visited a service user's residence, the service user did not open the door, and the service user cannot be located and confirmed as safe and well within around 30 minutes, through a series of initial checks.
- 1.2** It is recognised that there are often simple explanations for failed visits such as service users forgetting appointments and going out. However, a failed visit can also be indicative of a serious incident or issue.
- 1.3** This procedure does not apply to where the person has declined a scheduled service or visit and is able to communicate this to the care worker/visiting officer prior to, or at the time of the visit. In these cases the provider should send a Communication Form only to the Local Authority, detailing whether it is a cancellation or refusal of service etc. These instances are not to be called failed visits.
- 1.4** It also does not apply to missed visits where a carer or other employee fails to attend a planned visit to that individual, although providers must also have robust procedures in place for ensuring that individuals are notified, and where necessary their wellbeing is safeguarded, in these circumstances.

2. Purpose & principles

- 2.1.** This document sets out the failed visits procedure and is for council staff as well as commissioned providers delivering a service to vulnerable adults across the London Borough of Tower Hamlets (LBTH).
- 2.2** Failed visits are one of the highest priority situations we deal with in Adult Social Care.
- 2.3** All staff must work quickly to locate the person and ensure they are safe and well.
- 2.4** The time taken to resolve a failed visit could have an adverse or even fatal consequence for a service user.
- 2.5** All staff members have a responsibility to take action if a service user does not answer their door. All staff members must confirm and be satisfied that the situation has been seen through to resolution before ceasing to act.
- 2.6** It is recommended that services read this policy and procedure regularly so that all staff members are familiar with their roles and responsibilities and are prepared for when a failed visit occurs.

- 2.7 If a staff member suspects the person is at risk of serious harm, is critically unwell or that a crime has been committed, they should call 999 immediately**

3. Roles and responsibilities

- 3.1** This procedure applies to all staff who may encounter a failed visit, including:
- All adult social care teams and services
 - External providers commissioned under contract by The London Borough of Tower Hamlets Integrated Commissioning service, that visit people who have care and support needs, or are otherwise vulnerable, in their homes on a planned basis.
- 3.2** This procedure must be incorporated into all externally commissioned providers' policies and procedures.
- 3.3** Managers must ensure this procedure is made available to all staff who may encounter a failed visit, that they are familiar with it and understand their role in taking responsibility for:
- Reporting;
 - Resolving;
 - Recording;
 - Communicating; and
 - Any follow-up required
- 3.4** All members of staff have responsibility to take action if a service user cannot be located. The actions required depend on the role of the worker and employing agency. No member of staff should be left in the position where they are expected to deal with a failed visit without getting support and advice from a more senior staff member.
- 3.5** If any staff member considers the person is at risk of serious harm they should not delay calling the police. Alerting their management can be done after they have telephoned the police.
- 3.6** Specific responsibilities of members of staff are set out in the procedures later in this document.

4. Being prepared

- 4.1** Being well prepared and having the right information available will better enable us to act quickly in failed visit situations. It is essential that we have adequate and up-to-date records on service users and that there are systems in place to enable full access to this information at any time, day or night. Essential

information should be readily accessible on a service user's file where possible. This should include:

- Comprehensive assessment or review;
- The service user's up-to-date telephone number(s);
- Information about their daily routine e.g.:
 - whether they prefer not to leave the house or are housebound;
 - if they do go out, when and where;
 - which hospitals or day services they attend;
- Information indicating any vulnerabilities e.g.:
 - do they have mobility difficulties;
 - do they have a learning disability;
 - are they socially isolated;
 - are they likely to get lost;
 - do they get confused or forgetful?
- Names, addresses and telephone numbers of the next of kin, family and friends;
- The contact details of the nearest keyholder
- Their GP contact details
- Details of any of their other care providers

4.2 People with dementia sometimes get lost and go missing. In these cases the Herbert Protocol can be useful preparation. Social care staff or a loved one can fill in [The Herbert Protocol](#) form which contains information to give to the police if the person goes missing. It saves time, so police can start the search sooner. Use the hyperlink or search <https://www.met.police.uk/herbertprotocol>

4.3 Deciding what action to take can be difficult. Sometimes service users go out or go on holiday without informing you, or are admitted to hospital without your knowledge. It is therefore extremely important that we explain to service users that they should let us know if they are not going to be at home and of the possible consequences if they do not let us know.

5. Escalation

5.1 Should any staff member have cause for concern that actions are not being taken to locate or safeguard the vulnerable adult then they must escalate this up to their manager, who in turn will escalate to their Service Manager/Responsible Person if required.

5.2 For LBTH staff, the Director for Adult Social Care must be informed if there are concerns of a nature that could bring about the serious harm of a service user.

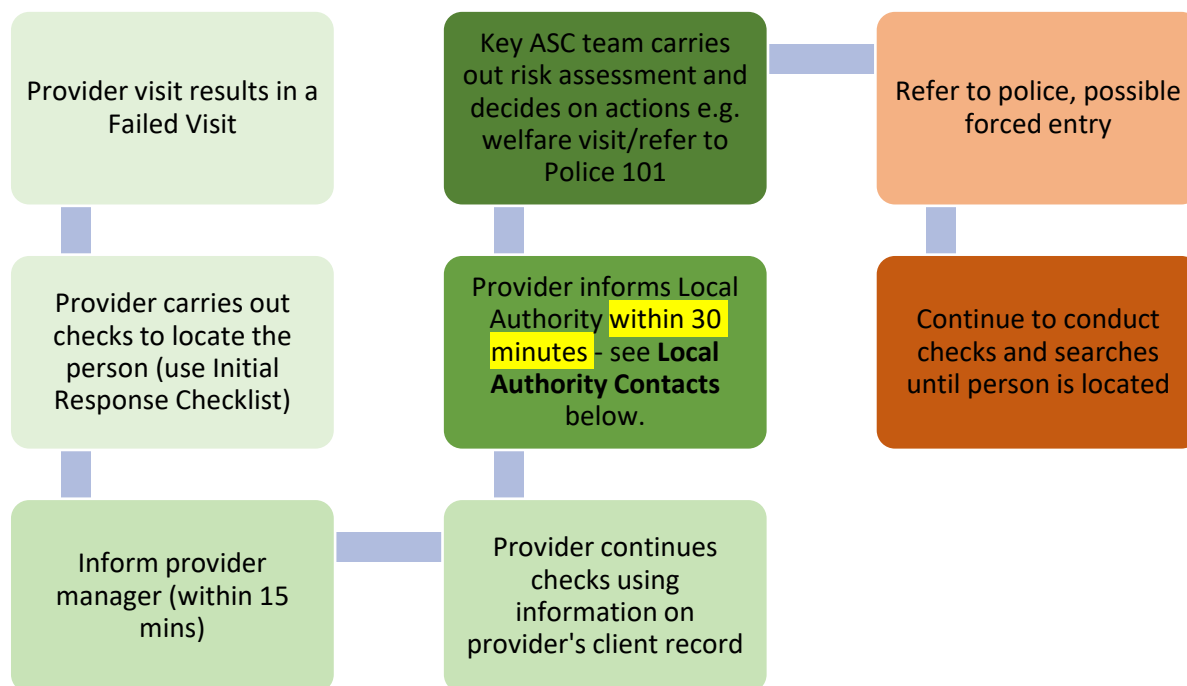
- 5.3** Provider services may escalate their concerns directly to senior management in the local authority if they have concerns that appropriate actions are not being taken by their organisation.

6. Governance

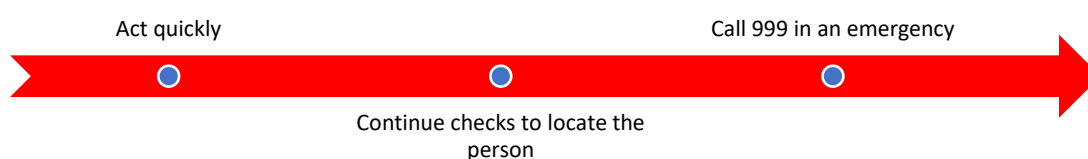
- 6.1** The local authority's compliance with the Failed Visits procedure will be monitored through auditing activity. The Adult Services Quality Assurance Framework sets out how practice audits are carried out and these will include the application of the Failed Visits Policy and Procedure. Audit outcomes are shared at the ASC Quality Assurance Board.
- 6.2** The monthly Safeguarding Practice, Policy and Quality Review (SPPQR) meeting will be used as a sounding board for application of the Policy every 6 months, and when the Policy requires review.
- 6.2** External, commissioned providers' compliance with the Failed Visits procedure will be carried out by Integrated Commissioning. Failed visits are recorded in quarterly monitoring returns submitted by our contracted homecare agencies.
- 6.3** Any complaints or serious incidents that occur in relation to Failed Visits will trigger a review of this procedure.
- 6.4** As per best practice, this procedure will be reviewed from time to time. Providers may contribute to this review through provider forums or through the Integrated Commissioning officer responsible for their service

PROCEDURES

7. Failed Visits high level process map



Remember



8. Local Authority Contacts

When informing the Local Authority, the provider should call the relevant Locality Team's duty number, if the service user is known to them.

Alternatively they should use the relevant Locality's duty email, clearly heading their email "**Failed Visit**"

- NW Locality 020 7364 4914 NorthWestLocality.ASC@towerhamlets.gov.uk
- SW Locality 020 7364 6653 SouthWestLocality.ASC@towerhamlets.gov.uk
- SE Locality 020 7364 5802 SouthEastLocality.ASC@towerhamlets.gov.uk
- NE Locality 020 7364 6756 NorthEastLocality.ASC@towerhamlets.gov.uk
- For all other service users/service users not known to a Locality Team
TH Connect - 0300 303 6070 enquiry@towerhamletsconnect.org
- Community Learning Disabilities 0707 771 5500 ldduty@towerhamlets.gov.uk
- Bow and Poplar CMHT 0203 487 1354 elft.TH-Bow-Poplar-CMHT-dl@nhs.net
- Isle of Dogs CMHT 0207 791 8299 elft.CMHT-Isle-of-Dogs@nhs.net
- Stepney & Wapping CMHT 0207 791 5200 elft.Stepney-and-Wapping@nhs.net
- Bethnal Green CMHT 0203 487 1400 elft.BethnalGreenCmht@nhs.net
- TH Crisis Response Team 020 771 5811 elft.TH-CrisisResponse@nhs.net
- Tower Hamlets Early Intervention Service (THEIS) 0203 487 1310
elft.THEIS@nhs.net
- Tower Hamlets Early Detection Service (THEDS) 0203 487 1320
elft.THED@nhs.net
- Tower Hamlets Autism Service (THAS) 0203 487 1312
elft.thas@nhs.net
- Community Mental Health for Older People (TH MHCOP) 0203 738 7000
elft.TH-CMHTOlderPeopleTeam@nhs.net
Referral Email: Elft.TH-MHCOP-SPE@nhs.net
- Out of Hours - 0207 364 4079

9. Initial Response Checklist

(For use by all services who may encounter a failed visit situation)

If you cannot contact the service user at a planned visit you should immediately carry out the following checks as a minimum. Each visiting staff member should carry a copy of this checklist

INITIAL RESPONSE CHECKLIST	✓
Give the person time to come to the door	
Ensure you have the correct address for the person	
Knock on the persons door and (if possible) windows	
Check doors and windows for signs of occupancy or distress	
Call and look through the letter box, checking for unnatural internal signs or smells, post, milk or paper deliveries, drawn curtains	
Listen for sounds such as TV, radio running water	
Attempt to contact the person by phone	
Check with neighbours/on-site staff whether they have seen the person or have any information on the person's whereabouts	
If undertaking all of the above does not resolve the issue, within fifteen minutes, contact your office to report the failed visit. Confirm you have gone through the checklist and ask them to review the case record for any relevant information e.g. service user never goes out; is on holiday; reported feeling unwell during the last visit	
<p>The visiting staff member and/or office staff to use the information in the case record to contact any other relevant people or services such as:</p> <ul style="list-style-type: none"> ✓ Next of kin and other family or friends ✓ Warden ✓ Neighbour or other <u>local</u> key holder ✓ Allocated adults social care worker ✓ Hospital admissions <ul style="list-style-type: none"> • RLH 0207 377 7136/7 • Homerton 0208 510 7072 / 0208 510 7121 (huh-tr@aequeries.nhs.net) • Mile End 0208 121 5001 ✓ Day Centre ✓ G.P ✓ Telecare 0207 364 4827 ✓ Any other person or agency who may know the whereabouts of service user 	
✓ If you suspect the person is at risk of serious harm or is critically unwell you should call 999 immediately. Do not delay.	

10. Commissioned Providers procedure

- 10.1** For use by any services commissioned by the Local Authority that visit individuals who have care and support needs, or are otherwise vulnerable, in their homes on a planned basis.

10.2 Managers

- Managers of all services must ensure all staff who may encounter a failed visit situation have access to this procedure, are familiar with it and understand their role and responsibilities.

10.3 Visiting staff

- A copy of the Initial Response Checklist should be provided to every staff member and carried with them on visits as an aide memoir.
- Carry out the checks on the checklist
- If the checks do not result in locating the vulnerable person, the visiting staff member must report to their supervisor as soon as possible and no later than within 15 minutes of being unable to locate the person.
- If any staff member considers the person is at risk of serious harm they should not delay calling the police. Alerting their supervisor can be done after they have telephoned the police.**
- The visiting staff member must report the outcome of all the checks made and gain advice from their supervisor as to the next steps, including whether to call the police.
- If the vulnerable person lives in supported accommodation, the visiting staff member should locate and work with the on-site staff.
- The visiting staff member should wait at the property and continue attempting to locate the vulnerable person until advised by their supervisor to leave.
- Scheduled visits to the service user should continue as planned unless or until their supervisor/manager advises otherwise.
- If a supervisor is not available, based on their own risk assessment, the visiting staff member may need to decide whether to call the police.

10.4 Supervisors/managers

- A supervisor receiving a call about a failed visit is responsible for providing support and advice to the visiting staff member.

- They should check their records for any other information that may help to locate the service user and ensure the relevant checks in the Initial Response Checklist have been completed.
- They should contact the local authority to report the failed visit as soon as possible and no later than within 30 minutes of the time of the failed visit. Providers should continue to make their checks after reporting to the local authority, keeping in close contact with them, and find out whether there is any other information on the local authority records that may help to locate the service user.
- Based on their risk assessment, they may need to decide whether to call the police.
- Supervisors should ensure that scheduled visits to the service user continue until it is agreed with the local authority that they should be suspended.
- A record of the failed visit should be recorded by the visiting staff member or their supervisor on the provider's client database, and should include the following information as a minimum:
 - Scheduled time of the visit
 - Time of arrival
 - Name, position and contact details of the visiting staff member and supervisor
 - Details of the checks carried out at the property
 - Other checks carried out (refer to the Initial Response Checklist)
 - Details of the discussion with supervisor
 - Decisions made, with reasoning
 - Time and details of notifying the local authority
 - Arrival time/contact details and police intervention carried out (if applicable).
 - Next steps

10.5 Notifying the Local Authority

- The provider must notify the local authority immediately if the person cannot be located, by calling the appropriate team (see Local Authority Contact, Section 8). This must be reported no later than within 30 minutes of the time of the failed visit. They should not rely solely on email as this can cause a delay in the vulnerable person being located.
- If a failed visit occurs but the person is located immediately (for example through a phone call to the person, confirming they have gone out to the café), this does not need to be recorded as failed visit.
- Tower Hamlets Connect and the Locality Duty Teams operate 9am-5pm Monday-Friday. If the failed visit occurs out of hours then the provider must call the adults out-of-hours team on 0207 364 4079

- The Failed Visit Record (Appendix 1) must be completed by the provider and emailed to the appropriate team (see Local Authority Contact, Section 8).
- It is of vital importance that the provider accurately reports the outcome of all the checks made. This will prevent unnecessary delay and will help to inform decision-making over the next steps.
- The provider must work with the local authority and other agencies to help locate the vulnerable adult as quickly as possible.

10.6 All staff members have a responsibility to take action if a service user does not answer their door. All staff members must confirm and be satisfied that the situation has been seen through to resolution before ceasing to act.

If, following all the checks, the person has not been located; the provider should consider calling the police on 101.

If you suspect the vulnerable person to be at serious risk or seriously unwell, call 999 immediately.

10.7 Calling the police

- If, after completing all relevant checks and risk assessments, the vulnerable person cannot be located, the police should be contacted on 101.
- **However, if you suspect the vulnerable person to be at serious risk or seriously unwell, call 999 immediately and report the situation.**
- The staff member calling should explain the situation and request that the police carry out an immediate welfare check to the property.
- An indication of the response time should be provided by the police.
- There should be someone at the property to meet the police. This may be the visiting staff member, supervisor or social care staff member. Ideally there should be someone present who knows the service user, the layout and access to property and what checks have been carried out so far, as this will be useful to the police.
- The police will decide whether a forced entry is required.
- If the person is found, the provider should work with the local authority and other agencies to carry out follow-up actions that might be required such as calling an ambulance, contacting the next of kin or family, organising an urgent care package, sharing the appropriate reports and records and securing the property.

- If the police decide not to force entry this will be based on their risk assessment. If the whereabouts of the person remain unknown then it is the responsibility of those staff members already involved, across organisations, to continue with investigations as appropriate. This may include going through the Checklist again. Consideration should be given to calling the police back if there is a change in circumstance that has increased the risk to the person or that everything else has been tried and a further period of non contact has elapsed.

11. Adult Social Care Procedure

For use by Tower Hamlets Connect and any Adult Social Care team receiving notification of a failed visit

- 11.1** Upon notification of a failed visit the receiving staff member in ASC will start a Failed Visit work step on Mosaic. This will be updated as the case progresses, with the information provided by the visiting staff member and any further information gathered by ASC.
- 11.2** They will ensure the Failed Visits Record (Appendix 1) has been received from the visiting service/staff member and will undertake their own checks against the information held on Mosaic. They will consider the circumstances and whether the checks on the Initial Response Checklist (see Section 9) have been completed. This should be done in collaboration with the visiting staff member or their manager.
- 11.3** The receiving staff member will complete a risk assessment (see Appendix 3) based on all the information collected during this process, the person's case history (disability and vulnerability) and information gathered from the file, in order to decide the next steps. The risk assessment is recorded within the Failed Visit work step on Mosaic.
- 11.4** If the checks have not resulted in establishing the whereabouts of the vulnerable person they should consult with their supervisor and a decision will be made as to the next steps. This may be:
- Undertake a home visit
 - Continue with the checks
 - Call the police

If, following all the checks, the person has not been located, the local authority should consider calling the police on 101

If you suspect the vulnerable person to be at serious risk or seriously unwell, call 999 immediately.

- 11.5** All actions and decisions must be recorded on the Mosaic Failed Visits work step and any case notes must be recorded using the case note type "Failed Visit". Records should include the reasoning for decisions made. It is important

to use this work step and case note type every time, as it enables a quick search for the history of failed visits in an emergency situation.

- 11.6** If the failed visit notification is received by Tower Hamlets Connect, they should check whether the vulnerable adult has a key team. The key worker, or the key team's duty officer should then take responsibility for resolving the failed visit. If there is no key team, after carrying out the above checks and actions, Tower Hamlets Connect must send notification of the failed visit to the Initial Assessment Team's duty email IA.Duty@towerhamlets.gov.uk as well as sending the Failed Visits work step to the "IA Incoming Referrals" folder on Mosaic. Tower Hamlets Connect should not hand-off the case until they have had confirmation it has been picked up by the key team and immediately actioned. A follow-up phone call to confirm action is being taken is advised.
- 11.7** All staff members have a responsibility to take action if a service user does not answer their door. All staff members must confirm and be satisfied that the situation has been seen through to resolution before ceasing to act.
- 11.8** A home visit may be carried out by the key worker or duty worker in the relevant team. Communication must be maintained between all staff members involved, across organisations. Unnecessary hand-offs build in delays and increase the risk of gaps in information.
- 11.9** If the person is not yet located when the staff member leaves the property, they should fill out a copy of the Failed Visit Letter (Appendix 4) and post it through the person's letterbox.

11.10 Calling the police

- 11.11** If, after completing all relevant checks and risk assessments, the vulnerable person cannot be located, the police should be contacted on 101. See section 10.7.
- 11.12** **However, if you suspect the vulnerable person to be at serious risk or seriously unwell, call 999 immediately and report the situation.**

11.13 Record keeping

- 11.14** The receiving staff member must record the details of the failed visit on Mosaic using the Failed Visit work step, and keep this updated until conclusion. Any related case notes must use the "Failed Visit" drop-down option. Recording should be proportionate. If a failed visit occurs but the person is located immediately (for example through a phone call to the person, confirming they have gone out to the café), then the Failed Visit work step should detail this proportionately and does not need to be completed in full. If a Failed Visit work step has not yet been started, then a Failed Visit case note can be used instead to detail a situation where the person was located immediately.

11.15 The Failed Visits work steps allows the key worker to record the following:

- Scheduled time of the visit
- Time of arrival
- Date and time they were notified of the Failed Visit
- Date and time the Failed Visit Report was received (if different from above)
- Name and contact details of the person making the report
- Details of the checks carried out at the property
- Other checks carried out (refer to the Initial Response Checklist)
- Current services the person receives
- A risk assessment using the gathered information
- Details of the discussion with supervisor
- Decisions made, with reasoning
- Arrival time/contact details and police intervention carried out (if applicable).
- Next steps

11.16 If they have not already been informed by the provider, Brokerage should be notified of the failed visit using a “Brokerage Alert” case note alert on Mosaic

11.17 Any records of the failed visit received, including the Failed Visit record or the adult out-of-hours team report, must be saved to Mosaic document using the following recording conventions:

- Title of document (incl. date) – e.g Failed Visit 28/09/2018
- Sender and addressee name e.g. From AAA Care to Adult Social Care

11.18 Suspending services

11.19 A decision should be made as to whether to suspend services whilst trying to locate the person. It may be that continuing to carry out the scheduled home visits is part of the strategy for locating the person. Consideration needs to be given to suspending services if there is no likelihood of the person answering the door.

11.20 If the services continue, the provider should continue to report any failed visits to the local authority. They should liaise with the key worker in the local authority for an agreement on whether further checks to locate the person are required each time, and who will be responsible for carrying them out.

11.21 If services are suspended, the key worker in the local authority should inform Brokerage directly and will be responsible for informing Brokerage immediately of the need to restart the service if and when required.

11.22 Checking the need for reassessment

11.23 As part of the risk assessment, the key worker should check the history of failed visits on the service user’s Mosaic record. This can be done by using a case

note search for the “Failed Visit” case note type and a work step search for the “Failed Visit” work step type.

11.24 If there is a recent history of failed visits, the case should be allocated to a key worker in the appropriate team and a review carried out with the service user. Professional judgement should be used to decide when a review is required, but as a guideline, three or more failed visits within the past three months may be considered a trigger.

11.25 Repeated failed visits may indicate that the person’s needs have changed or are not being met. It is therefore important to consider the need for a review after each failed visit incident.

12. Out of Hours procedure

12.1 For use by the Telecare Team, Adults Emergency Duty Team (EDT) and Initial Assessment Team

12.2 Out of hours, provider services should contact the EDT telephone number 0207 364 4079 to report a failed visit. This call will go through to the Telecare 24 hour team who are based at Toby Lane. E1 4DN.

12.3 The Telecare staff member will follow the Adult Social Care procedure to attempt to locate the vulnerable adult and will refer to the Adults EDT team social worker on duty if the person is not located.

12.4 Record keeping

12.5 The Telecare Team will be responsible for starting a Failed Visits workstep on Mosaic and keeping it updated. When referring to the Adults EDT social worker, the Telecare staff member should contact them by phone and follow this up immediately with an Adults out-of-hours referral form (Appendix 2). The referral form should detail what actions and decisions have been taken by the Telecare staff member.

12.6 The Adults EDT social worker will carry out their own checks and risk assessment and decide what actions to take. This may include calling the police.

12.7 The EDT social worker will update the referral form detailing their own actions and decisions before sending this through to Tower Hamlets Connect at enquiry@towerhamletsconnect.gov.uk for their attention or information on the next working day.

12.8 The adults out-of-hours referral form should clearly indicate who took what actions, what decisions were made and the reasoning for these decisions.

12.9 At the beginning of the next working day, Tower Hamlets Connect will prioritise screening any adults out-of-hours team reports received and will start the Failed

Visits work step and send it to IA Incoming Referrals on Mosaic, sending the referral via email to IA.Duty@towerhamlets.gov.uk

12.10 For any unresolved failed visits the information on the Adults out-of-hours team reports should guide their own risk assessment. Actions taken may include repeating all the checks to locate the person, essential information-gathering, a welfare visit from a social care staff member, or calling the police.

12.11 After any actions taken, a risk assessment should be repeated until the person is located.

Appendix 1 - Failed Visits Record

This record should be completed by external commissioned providers and sent to enquiry@towerhamletsconnect.org as a follow-up to notification by phone of a failed visit

Details of person completing form

Work contact details for member of staff carrying out the visit &/or Supervisor

Name:			
Job Title:			
Email:			
Telephone No:	(Landline):	(Mobile):	(Fax):
Address:			
Email:			
Date of failed visit:			Scheduled time of visit:
			Actual time of visit:

Service user details

Name:	Mosaic No:
Address:	

Contact details of allocated worker (if there is one)

Name:			
Address:			
Telephone No:	(Landline):	(Mobile):	(Fax):
Email:			

Is this the first attempt to locate service user regarding this failed visit?

Provide a description of what you have found, what checks you have done and outcomes, any actions taken, and planned steps.

<p>Provide a description of what you have found, what checks you have done and outcomes, any actions taken, and planned steps.</p>	
Signature:	Date:

DATE:		TIME:	
REFERRER:		TELEPHONE:	
TEAM:			
PERSON REFERRED:		Mosaic:	
D.O.B.			
ADDRESS:			
TELEPHONE:			
SOCIAL WORKER: (if applicable)			
ABSCONDEES ONLY: (has the Police been notified)		CAD:	
REASON FOR REFERRAL & ACTIONS TAKEN:			
PASSING INFORMATION ON			
SOCIAL WORKER:			
TELECARE STAFF MEMBER:			
TIME SENT:		ETHNICITY:	
TIME RESPONDED:			

Appendix 3 – Risk Assessment Checklist

1.	What is the person's health condition/diagnosis/vulnerability?		
2.	Is there a history of failed visits and if so what happened?	Y/N	
3.	Have all the individuals known to the person been contacted without result?	Y/N	
4.	How long is it since the person was last seen & under what circumstances?	Y/N	
5.	Is there a history of falls/wandering/self-neglect?	Y/N	
6.	Has there been a recent period of ill health/hospitalisation?	Y/N	
7.	Is the person mobile outside of their home?	Y/N	
8.	Is the person known to never go out?	Y/N	
9.	When is the next scheduled visit?	Y/N	
10.	In your opinion could the person be at risk of immediate harm if not located? Why?	Y/N	