THE HERBERT PROTOCOL





Safe & Found

Adult at risk profile

The purpose of this questionnaire is to record pertinent information about the person you care for – this will be used by the police and search teams in the event that the person goes missing. Once completed please keep this questionnaire in a safe place and produce to the police in the event of an emergency. This vital information will help the search teams to gather all the relevant information and begin searching. Recording this information ahead of time will greatly reduce stress associated with trying to recall detailed information in an emergency. If possible, please also attach a clear and recent head and shoulders photograph to this form. If the person you care for goes missing, please complete the 'Missing Now' section before contacting the police.

Backround First Name Last Name / Family Name Nown as / Nickname

Mobile phone number

Current address

Living here since

the person.



Date of Birth / Age	Gender	Build		
Race / Ethnicity / Complexion	Height	Weight		
Marks / Scars / Tattoos	Hair colour / cut	Eye colour / glasses		
Other distinctive features (e.g. facial hair)				

CD Medical History				
Medical conditions				
Communication difficulties		Physical im	pairments	
Vital medication	Dose		Symptoms if dose missed	
GP's name, address and telephone number				
Information for searchers (e.g. scared of being touched, argumentative, combative, scared of dogs, etc.)				



Occupation/Hobbies/Interests/Volunteer work

Favourite place(s) to spend time

Typical modes of travel (Bus pass etc.)

Favourite / likely destination(s)

Favourite footpath / track

Family or friends living nearby

Question	Answer
How easily can the person walk?	
If walking, how far can they get before becoming tired?	
Do they use a stick or other walking aid?	
How might they react to being upset or scared?	
Are they able to drive?	
Do they have a car?	
Church/mosque/synagogue/ temple?	
Houses/friends who they visit?	

Additional information

Carer/Family information	ו			
Your Name	Relationship to person named above			
Address				
Home phone number	Mobile phone number			
Alternative contacts (guardian/social worker)				

. Missing now	1	
Time last seen	Place last seen	Medication last taken
Clothing		
Car details/carrying	anything/have cash or bank cards	
Situation/recent disc	ussions/recent notable date/conta	ct with friends or family
Any other informatic	on	