

Residential Care: Missing or absent from placement Procedure

1. Purpose

This procedure details the process to be followed when a child or young person is missing or absent from Department for Child Protection (DCP) residential care.

2. Scope

This procedure applies to all DCP residential care staff and agency staff working in DCP residential care sites who care for children and young people who are missing or absent from their care placement (referred to as DCP residential care staff herein).

This procedure applies to all situations when a child or young person is missing or absent from placement. If a child or young person is not where they are expected or required to be and there are concerns for their safety or wellbeing:

- they are **missing** if their location is not known
- they are **absent** if their location is known.

Situations where children or young people are late returning to their placement or absent for short periods and there are no concerns for their safety and wellbeing are not in scope for this procedure.

When deciding whether a child or young person is absent, DCP residential care staff should consider the reliability of the source of the information and whether this is a confirmed location or a suspicion. A reliable source may include:

- DCP staff
- SAPOL
- another professional (such as the child or young person's teacher)
- any other person that DCP residential care staff consider a reliable source.

If the information is not reliable and cannot be confirmed by a reliable source, or the location is only suspected then the child or young person should be considered missing.

If the child or young person is sighted briefly at a location but they do not remain there, they should also be considered as missing.

It is noted that South Australia Police (SAPOL) use the terms 'missing' and 'absent' differently from DCP. SAPOL use the term absent to refer to reports raised by them, which do not receive an active response and missing to refer to reports that do receive an active response. The SAPOL use of these terms does not relate to whether the location of the child or young person is known.

3. Authority

3.1 Legislative context

This procedure is underpinned by the priority of the *Children and Young People (Safety) Act 2017* (CYPS Act) that the safety of the child or young person is paramount (Section 7).

For public releases of information in relation to a missing child or young person, the following people have delegated authorisation to disclose information under regulation 42(1) of the CYPS Act:

- Deputy Chief Executive, DCP
- Executive Director, Service Delivery and Practice
- DCP regional directors.

Only the Deputy Chief Executive, DCP and the Chief Executive, DCP may authorise media publications or broadcasts that identify the child or young person as being under guardianship.

Criminal Law Consolidation Act 1935

Section 64A and 65 of the *Criminal Law Consolidation Act 1935* outline additional responsibilities for DCP employees (including students, volunteers and agency carers) in responding to allegations of sexual harm perpetrated by another DCP employee.

3.2 Whole of Government requirements

The following interagency documents outline DCP responsibilities in responding to children and young people who are missing or absent from placement and a coordinated response with SAPOL:

- [Memorandum of Administrative Arrangement between South Australia Police and Department for Child Protection for a coordinated and collaborative response to guardianship children and young people who are missing from care](#)
- [Protocol between DCP and SAPOL for the safe retrieval of children and young people in care who are absent or missing from their placement without authorisation and are being harboured or concealed.](#)

3.3 DCP requirements

This procedure relates to the following [DCP Strategic Plan 2022-2026](#) priorities:

- Active and collaborative partnerships.
- A child protection system that meets the needs of children and young people.

4. Procedure requirements

The process outlined below should be followed every time a child or young person is missing or absent from placement.

If it is an emergency situation (for example, the child or young person has been abducted, is suicidal or is in immediate or life threatening danger), call SAPOL immediately on 000. The process outlined below should be followed once the call has been made to SAPOL. It is important to record the report number provided by SAPOL so that this can be used in future communication. In the event of an emergency, the below process should be followed after the call has occurred. When DCP residential care staff become aware

that the situation is an emergency they should manage the situation in accordance with the [Significant incident reporting Procedure](#).

4.1 Maintaining records

DCP residential care staff should maintain a record of actions taken from when they become aware of the child or young person going missing or becoming absent until they are returned to placement in the E-log and in C3MS. This includes keeping records of any assessments completed, contacts with SAPOL and attempts to contact or locate the child or young person. Agency carers working in DCP residential care facilities should record this information in the E-log where this is available - otherwise this should be recorded in the Observation Logbook.

A C3MS Missing/Absent Person Report (C3MS MAPR) must be used to record all information when the child or young person is missing or absent even if there are only minimal concerns for the safety or wellbeing of the child or young person. A new C3MS MAPR must be created when the child or young person initially goes missing or becomes absent and must stay open until they return to placement (this can include returning to placement briefly for a meal or to collect belongings). The child or young person may spend periods of time as both missing or absent whilst they are away from placement. **Only one C3MS MAPR report should be used to cover the whole period that they are away from placement.** Refer to the [C3MS Guide: Missing/Absent Person Report \(MAPR\) – Recording in C3MS](#) when completing the report.

DCP residential care staff that do not have access to C3MS must use the [Missing/Absent Person Report](#) form. Contact should then be made to the senior child and youth worker, supervisor or on call support to ensure this information is appropriately recorded. The senior child and youth worker, supervisor or on call support is then responsible for recording this information in the C3MS MAPR.

4.2 When a child or young person is missing

The below initial response should be provided even if the child or young person was absent prior to going missing.

If the child or young person goes missing whilst in the care of DCP non-residential care staff or volunteers (for example, during contact or transport), DCP non-residential care staff are responsible for providing the initial response as outlined below. In all other circumstances, it is the responsibility of DCP residential care staff to provide this initial response.

4.2.1 Attempt to locate the child or young person

As soon as it is known that the child or young person is missing, DCP residential care staff must undertake immediate reasonable efforts to locate and return them to placement. Immediate action may include:

- searching the immediate area where the child or young person was last seen and nearby locations where the child or young person regularly goes (if safe to do so)
- calling and/or messaging the child or young person if they have a mobile telephone
- calling and/or messaging their friends or known associates (where appropriate)
- calling and/or messaging their family (if approved by the DCP case worker).

These efforts should be a quick initial search for the child or young person and further search activity can be undertaken once urgency has been assessed and SAPOL have been contacted, if appropriate.

If DCP residential care staff are unable to leave the house (for example, on a night shift or where there are other children and young people that require care) they should ask for assistance from other DCP residential care staff, the senior child and youth worker or the residential care mobile night team.

If appropriate, DCP residential care staff should ask other people that the child or young person might be in contact with or visit whilst missing or absent to let the child or young person know that staff want them to be safe and want them to come home.

4.2.2 Assess urgency

If efforts to locate and return the child or young person are not successful, DCP residential care staff must create or update the C3MS MAPR. Refer to the [C3MS Guide: Missing/Absent Person Report \(MAPR\) – Recording in C3MS](#) when completing this report. A new urgency assessment must be recorded within the C3MS MAPR to determine the response required. DCP residential care staff that do not have access to C3MS can use the [Urgency Assessment form](#) if this is not the first urgency assessment since the child or young person initially became missing or absent. The following additional considerations should be incorporated into the urgency assessment where relevant:

- Aboriginal child or young person (see section 4.7.1)
- child or young person from a culturally or linguistically diverse background (see section 4.7.2)
- child or young person with a disability and/or developmental delay (see section 4.7.3).

If the person providing the initial response is away from their usual place of work and cannot easily access C3MS or the required documents, they should contact another member of staff for assistance and not delay this process. In the event that there is no assistance available (for example, after hours) the person providing the initial response should contact SAPOL on 131 444 and report the child or young person as missing and then complete the C3MS report or forms as soon as possible afterwards.

If the urgency assessment rating is extreme or high, consideration should be given to consulting with the relevant senior child and youth worker/senior mobile night officer or Principal Aboriginal Consultant (PAC).

4.2.3 Contact SAPOL to report the child or young person missing (if required)

If the urgency assessment indicates that contact needs to be made with SAPOL (for example, if the urgency assessment rating is medium, high or extreme), contact should be made to SAPOL on 131 444. DCP residential care staff will need to provide information contained in the C3MS MAPR. Unless the urgency assessment has indicated an extreme response, as much information as possible should be gathered prior to contacting SAPOL. The urgency assessment responses should be used to explain the rationale for why the current level of concern for the child or young person's safety or wellbeing has been assessed. A PDF version of this information can be generated in C3MS which can be shared with SAPOL via email. If the information is being emailed to SAPOL, follow up telephone contact should also be made to confirm that it has been received. DCP residential care staff who do not have access to C3MS and have completed a word document version of the urgency assessment and/or Missing/Absent Person Report can share this with SAPOL via email.

It is important that if it is suspected that the child or young person may be planning to leave or has left South Australia, DCP residential care staff must report this to SAPOL.

If SAPOL have already been contacted due to an emergency, there is no need to re-contact them unless there is new information to add to the initial report.

SAPOL will then make their own assessment and determine whether to record either a Missing Person Report (MPR) (Missing) or MPR (Absent). SAPOL determine which of these reports to raise based on the level of concern and not on whether the location of the child or young person is known. A MPR (Missing) will result in an active SAPOL response, which involves resources being deployed by SAPOL to attempt to locate the child or young person. In the case of a MPR (Absent), SAPOL patrol supervisors will be notified but resources may not be deployed to locate the child or young person. SAPOL will keep a MPR (Absent) under review and escalate to provide an active response after 48 hours if the child or young person has not been located. A MPR (Absent) can also be reassessed to a MPR (Missing) earlier if SAPOL receive information that changes the level of concern.

DCP residential care staff should confirm with SAPOL whether a MPR (Missing) or MPR (Absent) has been raised. If SAPOL record either report for the child or young person, they will provide a MPR report number which begins with the letters 'SAP'. When contact is initially made with SAPOL they may also provide a job number. It is essential to record the SAPOL MPR report number in the C3MS MAPR as this will be needed for all future communication with SAPOL.

4.2.4 Contact the DCP case worker

If the DCP case worker has not been part of the above response, they will be notified via the C3MS worklist when the C3MS MAPR is created. However, consideration must also be given to whether direct contact with the DCP case worker (and/or care team) is required if the situation is of particular concern.

If it is suspected that the child or young person has left South Australia, DCP residential care staff must advise the DCP case worker during work hours and the DCP After Hours Call Centre and the DCP residential care supervisor or the on call manager if this occurs after hours.

The DCP case worker or DCP After Hours Call Centre are responsible for deciding whether the child or young person's birth family should be advised that the child or young person is missing.

4.3 While the child or young person remains missing

While the child or young person remains missing, DCP residential care staff must:

- continue to actively follow up the child or young person's whereabouts by regularly checking locations the child or young person is known to frequent (for example, shopping centres, parks or skate parks) if safe to do so. Consideration should be given to attending with SAPOL if required
- attempt to contact the child or young person and encourage them to return to their placement
- continue to monitor the situation and re-assess the response required using the urgency assessment in the C3MS MAPR when the situation changes
- update SAPOL (131 444) (where appropriate) and the DCP case worker/DCP After Hours Call Centre to update them with any further information received
- notify relevant people (where appropriate) such as the school or therapist
- ensure information is recorded accurately in line with the recording requirements outlined in section 4.1 and communicated to other staff at handover so they can continue with enquiries and efforts to locate the child or young person.

Refer to the [Significant incident reporting Procedure](#) for further actions required if the urgency assessment is extreme or high. Consideration should also be given to whether the situation needs to be managed in accordance with the [Residential Care: Incident management Procedure](#).

4.3.1 Media campaigns

SAPOL may recommend a media campaign to help locate the child or young person. DCP can also request that SAPOL arrange a media campaign. Authorisation requests from SAPOL must be coordinated by DCP office staff/After Hours Call Centre. Any public release of information about the child or young person must be cleared by the delegated DCP authority (see section 3.1).

4.3.2 When the child or young person is located

SAPOL must be advised that the child or young person has been located if a MPR has been raised. They will then close the report and no further assistance will be provided unless this is requested by DCP.

If the child or young person does not return to placement the guidance in section 4.4 should be followed.

The C3MS MAPR should be updated with this information but should not be closed unless the child or young person returns to placement. DCP residential care staff should also consider making direct contact with the DCP case worker to inform them.

4.4 When a child or young person is absent

The below initial response should be provided even if the child or young person was missing prior to being located.

If the child or young person becomes absent whilst in the care of DCP non-residential care staff or volunteers (for example, during contact or transport), DCP non-residential care staff are responsible for providing the initial response as outlined below. In all other circumstances, it is the responsibility of DCP residential care staff to provide this initial response.

4.4.1 Attempt to return the child or young person to placement

As soon as it is known that the child or young person is absent, immediate reasonable efforts must be undertaken to contact them and return them to placement, if it is safe to do so.

4.4.2 Assess urgency

If efforts to return the child or young person are not successful, the C3MS MAPR must be created or updated. Refer to the [C3MS Guide: Missing/Absent Person Report \(MAPR\) – Recording in C3MS](#) when completing the report. A new urgency assessment must be recorded within the C3MS report to determine the response required. The urgency assessment determines the response required. The following additional considerations should be incorporated into the urgency assessment where relevant:

- Aboriginal child or young person (see section 4.7.1)
- child or young person from a culturally or linguistically diverse background (see section 4.7.2)
- child or young person with a disability and/or developmental delay (see section 4.7.3).

If the person providing the initial response is away from their usual place of work and cannot easily access C3MS or the required documents, they should contact another member of staff for assistance and not delay this process.

4.4.3 Contact the DCP case worker/DCP After Hours Call Centre

If the DCP case worker has not been part of the above response, they will be notified via the C3MS worklist when the C3MS MAPR is created. However, consideration must also be given to whether direct contact with the DCP case worker (and/or care team) or DCP After Hours Call Centre is required if the situation is of particular concern.

If the urgency assessment rating is extreme or high, the DCP case worker should consider consulting with the relevant practice leader or PAC.

The DCP case worker or DCP After Hours Call Centre are responsible for deciding whether the child or young person's birth family should be advised that the child or young person is absent.

4.5 While the child or young person remains absent

The DCP case worker or DCP After Hours Call Centre will consult with their supervisor to determine an approach for trying to return the child or young person to placement or establish their safety where they are. Any relevant information will be communicated to the DCP residential care staff. Unless otherwise stated by the DCP case worker or DCP After Hours Call Centre, the DCP residential care staff must:

- encourage the child or young person to return to placement
- attempt to remain in contact with the child or young person and monitor their wellbeing and safety, if it is safe to do so. Consideration should be given to attending with SAPOL if this is appropriate as outlined in section 4.6. DCP residential care staff should encourage the child or young person to return to placement briefly (for example, for a shower or a meal) and ensure they understand that their safety is important
- update the C3MS MAPR with any new information
- notify relevant people (where appropriate) such as the child or young person's school or therapist
- complete an updated urgency assessment whenever there is any new information relating to the child or young person's safety or wellbeing that could change the level of response
- consideration should be given to requesting SAPOL assistance as outlined in section 4.6.

The DCP case worker or DCP After Hours Call Centre will consider carrying out relevant checks on people that the child or young person is known to be with if that individual is not known to DCP. If the checks raise any concerns regarding the child or young person's safety or wellbeing in their current location, the DCP case worker/DCP After Hours Call Centre should complete an updated urgency assessment in collaboration with DCP residential care staff.

Consideration should also be given to whether the situation needs to be managed in accordance with the [Significant incident reporting Procedure](#) and/or the [Residential Care: Incident management Procedure](#).

DCP residential care staff must update the C3MS MAPR for children and young people with any new information.

If the child or young person leaves this location and becomes missing the guidance in section 4.2 should be followed.

4.6 SAPOL assistance when the child or young person is absent

Contact should be made with SAPOL on 131 444 to request assistance in the following circumstances:

- if there are safety concerns for the child or young person or DCP residential care staff in attending the location
- if the child or young person is at a location where there is suspected criminal activity
- if there are delays in being able to collect the child or young person from their location and there are safety concerns for the child or young person; in these circumstances DCP residential care staff should request that SAPOL undertake a welfare check in the interim.

Aboriginal children and young people may require additional support when interacting with SAPOL (for example, if they are to be transported by SAPOL or held at a SAPOL office) due to potential fear or previous trauma and the use of a support person should be strongly considered, whenever possible.

4.7 Additional considerations

4.7.1 Aboriginal children and young people

Aboriginal people are likely to encounter significant episodes of culture shock when experiencing values, beliefs, customs and behaviours that are different from their own. These differences can make an Aboriginal child or young person feel like they do not belong and create cultural stress as they no longer know how to act or where they fit in. This can manifest in an Aboriginal child or young person becoming detached, depressed, having negative behaviours, extreme emotional outbursts and in some cases suicidal ideation and self-harm. It is important to understand that culture shock can suppress the desire for positive action and engagement with the new culture/family and can lead to a powerful desire to leave. This may account for why Aboriginal children and young people go missing or are absent when they are placed in an unfamiliar environment or with an unfamiliar carer.

For children and young people from remote Aboriginal communities, the additional safety concern associated with their potentially limited social understanding in an unfamiliar environment should be considered if they are missing or absent in a metropolitan environment. Consideration should also be given to the additional safety concern associated if the child or young person does not have English as a first language.

It is recommended that DCP residential care staff consult with a PAC when there are relevant cultural concerns for an Aboriginal child or young person who is missing or absent from placement. Consultation should be coordinated through the senior child and youth worker/supervisor. If the urgency assessment rating is extreme high or medium, contact with SAPOL should not be delayed by the consultation process. In this case, consultation should take place as soon as possible after contacting SAPOL and a revised urgency assessment completed if additional factors have been identified. If cultural consultation is not possible (for example, when responding to a child or young person outside of working hours), DCP residential care staff should still attempt to consider any impacts of cultural safety for the child or young person and consultation should be carried out on the next business day.

Consideration should be given to whether the reason for going missing or becoming absent is culturally related such as wanting to see people who are culturally important to them, feeling a lack of cultural

connection, concerns regarding cultural safety in the placement or related to a cultural obligation (such as attending Sorry Business).

The [Aboriginal and Torres Strait Islander Child Placement Principle Practice Paper](#) should be used to guide DCP residential care staff when considering cultural safety of children and young people who are missing or absent.

4.7.2 Children and young people from culturally and linguistically diverse backgrounds

Children and young people from culturally and linguistically diverse (CALD) backgrounds may be more vulnerable when missing or absent from placement. They may be subject to additional safety concerns due to having limited English language and/or a limited capacity to navigate systems and differing help seeking behaviours.

Consideration should be given to whether the child or young person has left the placement due to a lack of cultural safety or a desire for cultural connection. If the child or young person has recently arrived in Australia, consideration should be given to potential trauma experienced in travelling to Australia and their perception of safety in their current arrangements and whether this has contributed to them going missing or becoming absent. The [Working with cultural diversity Practice Paper](#) should be used as guidance when considering the needs of children and young people from culturally and linguistically diverse backgrounds who are missing or absent. [DCP Multicultural Services](#) should be consulted whenever there are relevant concerns.

4.7.3 Children and young people with a disability and/or developmental delay

Children and young people with a disability and/or developmental delay may be more vulnerable when missing or absent from placement. They may be subject to additional safety concerns due to:

- cognitive and communication difficulties
- a lack of understanding regarding appropriate boundaries and safety
- potential for physical injury or illness if they do not receive appropriate physical or medical support.

Refer to the [Working with children and young people with disability Practice Paper](#) for guidance on considering the needs of children and young people who are missing or absent with a disability and/or developmental delay (or their carers).

4.7.4 Transport

If SAPOL locate the child or young person, they will make contact with the DCP case worker or DCP residential care staff to advise that they have been located and require transport.

DCP residential care staff have primary responsibility for transporting the child or young person back to placement and this must be considered a high priority. When there is a delay in transporting the child or young person, SAPOL should be informed of this as soon as possible. Transport should take place in accordance with [Create a safe and nurturing home in residential care](#) in the DCP Residential Care chapter of the Manual of Practice. Further information in relation to the role of SAPOL in supporting transport of children and young people can be found in the [Memorandum of Administrative Arrangement between SAPOL and DCP](#).

If DCP residential care staff are unable to provide transport, the DCP residential care senior child and youth worker, supervisor or residential care mobile night team should be contacted to assist. Assistance should be organised from the closest available residential care house if practicable or mobile night team. If transport arrangements cannot be confirmed between SAPOL and DCP residential care staff, DCP residential care management or mobile night team should contact the SAPOL shift manager to seek assistance.

Aboriginal children and young people may require additional support when interacting with SAPOL (for example, if they are to be transported by SAPOL or held at a SAPOL office) due to potential fear or previous trauma and the use of a support person should be strongly considered, whenever possible.

4.7.5 Local Liaison Groups

Local Liaison Groups (LLGs) are a forum where SAPOL and DCP are able to resolve issues regarding children and young people in care who are missing or absent. For children and young people placed in residential care who have significant ongoing concerns (for example, missing or absent for an extended period, frequently going missing or becoming absent), consideration should be given to referring their case to a LLG for discussion and planning. DCP residential care staff should discuss the referral with their supervisor. Further information can be found on the [Missing or absent children or young people](#) intranet page.

4.7.6 Resolution process for disputes with SAPOL

SAPOL and DCP may disagree on the required level of response. This can include the following situations:

- SAPOL decline to raise a MPR despite this being requested
- SAPOL raise a MPR (Absent) when the urgency assessment rating indicates that an active response is required
- SAPOL close a MPR when the urgency assessment rating indicates that it should remain open.

This information must be recorded in the C3MS MAPR and DCP residential care staff should also inform the DCP case worker. DCP residential care staff should discuss this with their supervisor who should advise the relevant LLG coordinator. DCP residential care staff should also inform their supervisor if they believe that the child or young person could be at risk without the required SAPOL intervention.

4.7.7 Children or young people who are suspected of being harboured or concealed

If there are concerns that the child or young person is being harboured and/or concealed, DCP residential care staff should seek assistance from their senior child and youth worker or supervisor. If following consultation with the senior child and youth worker/supervisor there is a reasonable suspicion that the child or young person is being harboured and/or concealed, the senior child and youth worker/supervisor should advise the DCP office staff/After Hours Call Centre.

If it is an emergency situation and the child or young person is in immediate or life threatening danger, DCP residential care staff should call SAPOL immediately on 000.

4.8 Supporting the child or young person when they return to placement

4.8.1 Responding when the child or young person returns

DCP residential care staff must advise the DCP case worker when the child or young person is returned to placement and close the C3MS MAPR as soon as possible.

DCP residential care staff should refer to [Support and respond to children and young people who go missing or are absent](#) in the DCP Residential Care chapter of the Manual of Practice for guidance in relation to supporting children and young people who go missing or become absent and understanding the reasons for this behaviour.

After the child or young person returns to placement, it is critical for DCP residential care staff to show the child or young person that they are happy to have them back and that their safety is the primary priority. DCP residential care staff should show the child or young person that they have come home to a nurturing environment where people genuinely care about them and show sensitivity. A negative experience upon return may cause emotional stress or make them want to leave again, placing the child or young person at risk. This could include spending time with them and waiting until they are calm and settled before trying to talk to them about how they are feeling and what has happened. DCP residential care staff should:

- attend to the child or young person's immediate physical and emotional needs (including positively acknowledging the child or young person for returning to their placement and expressing relief regarding their safety/wellbeing)
- engage the child or young person in a discussion about their experience once they are calm and settled. It is important to not put pressure on the child or young person and ensure they are comfortable with the pace of the conversation. DCP residential care staff should be interested and concerned about the child or young person's story, without assuming knowledge. Gather information about where and with whom the child or young person has been whilst being mindful of the possible reasons why the child or young person left the placement (including cultural considerations, crisis, trauma related behaviours, issues at the placement or behaviours related to disability such as autism) (please note that it is unlikely that a child or young person will successfully engage in this conversation soon after they return to placement)
- attempt to understand why the child or young person went missing or became absent and what had led up to the event
- inform the child or young person that the information they provide will be shared with DCP case worker so that they can help the child or young person to stay safe in the future.

DCP residential care staff should record and report any actions undertaken or information that is important or concerning as soon as possible. A record of all information should be maintained in the E-log and/or Observation log and in a case note attached to the MAPR in C3MS. The DCP case worker should be advised of:

- where the child or young person was found and how they returned
- any information regarding why the child or young person went missing or became absent
- where the child or young person has been, including the names and addresses of people they may have been staying with

- any information that suggests the child or young person has been harboured, concealed or put at risk of harm by another person while missing or absent.

If the child or young person discloses information indicating they were at risk whilst missing or absent, DCP residential care staff should ensure that they meet any requirement for this to be reported in line with the [Reporting a suspicion a child or young person is at risk procedure](#). There are additional requirements for DCP staff if a current or former DCP employee (including students, volunteers or agency carers) is the alleged perpetrator of sexual harm toward a child or young person. In alignment with section 64A of the *Criminal Law Consolidation Act 1935*, it is an offence for a DCP employee not to report to SAPOL if they know, suspect, or should suspect sexual harm of a child or young person under the age of 18 years perpetrated by another DCP employee (maximum penalty imprisonment for three years). In alignment with section 65 of the *Criminal Law Consolidation Act 1935*, it is also an offence for a DCP employee to negligently fail to reduce or remove a substantial risk of sexual harm of the child or young person allegedly perpetrated by a current DCP employee (maximum penalty imprisonment for 15 years).

In the event that the child or young person refuses to speak with DCP residential care staff, the DCP case worker should be advised so that they may attempt to speak with the child or young person as soon as possible to gather the necessary information to ensure their safety and wellbeing.

The DCP case worker/DCP After Hours Call Centre is responsible for ensuring that family members who were advised that the child or young person was missing or absent are notified that they have now returned.

4.8.2 Cultural safety considerations

Support for the child or young person following their return to placement should be mindful of cultural safety. Consideration should be given to the gender and cultural background of the person who talks to the child or young person about their experience. If requested by the child or young person, a support person of their choice should be used to follow up with them after they return to placement rather than their DCP residential carer/DCP case worker. If the child or young person is going missing or is absent frequently, the same person should be responsible for follow up whenever possible to allow the child or young person to build trust and confidence.

If requested by an Aboriginal child/young person or their family, assistance should be sought from an Aboriginal traditional healer (Ngangkari) for cultural and spiritual support. Further information on Aboriginal health services can be found on the [SA Health Aboriginal health services](#) webpage. Consideration should be given to consulting with a PAC for advice on arranging this.

4.9 Children and young people who are frequently missing or absent

Refer to the [Support and respond to children and young people who go missing or are absent](#) in the DCP Residential Care chapter of the Manual of Practice and [Supporting children and young people in care with high risk and complex behaviours Practice Paper](#) for further information regarding working with children and young people who frequently go missing or absent from placement.

If the child or young person is frequently missing or absent, the child or young person's [wellbeing plan](#) should be used to outline ways to keep the child or young person safe while they are missing or absent. This plan should be linked into any Power to Kids safety plans that have been developed for the child or young person.

For Aboriginal children and young people who are frequently missing or absent from placement, the DCP case worker should consider discussing the situation with family/kinship members in addition to the care team and the PAC.

5. Compliance, monitoring and evaluation

This procedure will be reviewed and updated in alignment with the DCP policy review cycle or as required.

6. Related documents

Related documents, forms and templates
Aboriginal and Torres Strait Islander Child Placement Principle Practice Paper
C3MS Guide: Missing/Absent Person Report (MAPR) – Recording in C3MS
Create a safe and nurturing home in residential care in the DCP Residential Care chapter of the Manual of Practice
Memorandum of Administrative Arrangement between SAPOL and DCP
Missing/Absent Person Report
Protocol between DCP and SAPOL for the safe retrieval of children and young people in care who are absent or missing from their placement without authorisation and are being harboured or concealed
Reporting a suspicion a child or young person is at risk procedure
Residential Care: Incident management Procedure
Significant incident reporting Procedure
Support and respond to children and young people who go missing or are absent in the DCP Residential Care chapter of the Manual of Practice
Supporting children and young people in care with high risk and complex behaviours Practice Paper
Urgency Assessment
Wellbeing plan
Working with cultural diversity Practice Paper
Working with children and young people with disability Practice Paper

7. Glossary

Term	Meaning
Missing	A child or young person who is not where they are expected or required to be, concerns may exist for their safety or wellbeing and their location is unknown.
Absent	A child or young person who is not where they are expected or required to be, concerns may exist for their safety or wellbeing and their current location is known.
Missing Person Report (MPR) (Missing)	Report raised by SAPOL indicating that the child or young person is missing. This report will provoke an active response, involving SAPOL resources being deployed to locate the child or young person.
Missing Person Report (MPR) (Absent)	Report raised by SAPOL indicating that the child or young person is missing. SAPOL patrol supervisors will be notified but resources may not be deployed

Term	Meaning
	to locate the child or young person. This report will be upgraded to a MPR (Missing) if the child or young person is not located within 48 hours.
C3MS Missing/Absent Person Report (MAPR)	C3MS report recording details of the child or young person being absent or missing from placement. This does not constitute a report to SAPOL and is an internal DCP method of recording this information.

Document control

Reference No./ File No.	<i>(Please complete all ** fields)</i>		
Document Owner		Lead Writer (name, position)	
Directorate/Unit: Residential Care		Senior Policy Officer, Operational Policy	
Accountable Director: Director Residential Care			
Commencement date	28 May 2023	Review date	28 May 2026
Risk rating	Consequence Rating	Likelihood	Risk Rating
Risk Assessment Matrix	Moderate	Possible	Moderate

REVISION RECORD		
Approval Date	Version	Revision description
14 April 2023	1.0	New document. Replaces the Missing Guardianship Children Procedure content for Residential Care.