

# Wandering in People on the Autism Spectrum

A best practice resource  
for those caring for people  
on the autism spectrum

*amaze*

## Acknowledgements

Amaze gratefully acknowledges those who contributed to this resource. Thank you to Brent Hayward, Senior Practice Adviser, Office of Professional Practice, Department of Health & Human Services; Eva Perez & Lucinda Nolan and the Victoria Police; Barbara Minuzzo and The Royal Children's Hospital Safety Centre; Carolyn McDiarmid, Rosemary Malone and Gateways; Andrew Italia & Dr David Sykes and Alzheimer's Australia VIC; Meredith Ward and the Autistic Family Support Association; and Elizabeth Curran.

## Contents

What is wandering?	4
People who wander	4
Wandering in people on the autism spectrum	4
About this resource	5
Why people on the autism spectrum wander	6
How to prevent wandering	6
Positive Behaviour Support approach	6
Determining the function of the behaviour	7
Teaching new (replacement) skills	8
Developing a Behaviour Support Plan	9
Getting help for wandering	9
Restrictive interventions to reduce wandering	10
A note on GPS devices	10
Some practical strategies	11
Engage the community	11
Engage the police	11
Create a Community Information Sheet	11
Create a map	11
Easy identification	11
Locating a missing person	13
References	14
Appendix A1: Guidelines for Seeking Police Assistance	15
Appendix A2: Voluntary Disclosure of Personal Information to Police	17
Appendix B: Example Community Information Sheet	19

## What is wandering?

Wandering happens when a person who generally requires some level of supervision to be safe leaves a supervised, place and/or the care of a responsible person. Wandering is also commonly referred to as 'absconding' or 'eloping' in the literature, and terms like 'bolting', 'fleeing' or 'running off' may be used by caregivers to describe the behaviours seen in many people who wander. There is some debate about the best way to describe wandering behaviour, as no word fully captures the variety of ways people may leave a safe space. While definitions vary slightly across the literature and within the community, for the purpose of this resource, we choose to use the term 'wandering' as it is a word widely understood by the general community.

### People who wander

Wandering is not a problem that is specific to people on the autism spectrum. People with a variety of developmental disabilities can be prone to wandering, as well as those with acute mental illness and people with dementia. While there may be some similarities in wandering behaviour in people with different conditions, and while some common strategies that might be useful for many people who wander, there are also unique differences for people on the autism spectrum. This resource is intended specifically for families and carers of people on the autism spectrum who are at risk of wandering.

### Wandering in people on the autism spectrum

Research suggests that people on the autism spectrum are particularly prone to wandering. A limited US study suggested that almost 50% of children on the autism spectrum aged four years or older had attempted to wander at least once, and of these, 53% of these went missing long enough to cause worry.<sup>2</sup> A more recent, robust study found 26.7% of children with autism and developmental disabilities had wandered in the previous year.<sup>10</sup> In a study looking at behaviours of concern in adults living in group environments, it was found that 34% of adults with ASD had attempted to wander, compared to around 8% for adults who had an intellectual disability and no autism.<sup>3</sup> While there is relatively little research in the area, studies seem to suggest that wandering behaviour is more common in people on the autism spectrum than in the general population or those with other disabilities and that wandering behaviour reduces in frequency as the person matures.<sup>1,2,3,4</sup>

Wandering behaviour can pose obvious direct safety risks to the person on the spectrum, potentially exposing them to dangerous and even life-threatening situations (e.g. open bodies of water, traffic). There is no doubt that the risks associated with wandering are a very serious problem for the autism community. The impact on families and carers is also significant. A 2012 study found that 43% of parents of children who wandered reported sleep difficulties, and 62% indicated that it had prevented their family from attending or enjoying activities outside the home. 56% of caregivers reported that wandering was the most stressful concern they had in caring for their child on the spectrum. Perhaps the most concerning statistic was that 50% of parents facing this problem reported they felt they received no guidance from anyone in preventing or addressing their child's wandering behaviours.<sup>2</sup> Given wandering is such a prevalent issue amongst people on the autism spectrum, information is needed about best practice strategies for those who care for them.

## About this resource

Despite the strong need for interventions to reduce or eliminate wandering in people on the autism spectrum, there is limited research in this area to guide best practice. As a result, there is little accessible and practical information for families who are supporting a person on the autism spectrum who wanders. This resource is designed to try to fill this gap by providing a first step in giving families and carers information about best practice strategies in reducing and responding to the risk of wandering for people on the autism spectrum.

This resource is intended to provide families and carers with guidance on how to find out why their loved one wanders, and looks at some best practice strategies in how to reduce the risk of wandering. It provides information on how to access professional assistance in putting together a behaviour support plan to prevent people on the autism spectrum from wandering. It explores important considerations if using restrictive interventions to prevent wandering, measures parents and carers can put in place to reduce the risk of harm if their family member does wander off, and finally, provides advice on what to do if someone on the autism spectrum goes missing.

This resource does not provide a one-size-fits-all list of strategies to prevent wandering. It is not designed to replace professional guidance, and a critical component of applying any of the strategies or suggestions contained in this resource is that they are done with the assistance of professionals who can help determine the most appropriate evidence-based strategies for each particular person who wanders.

## Why people on the autism spectrum wander

People on the autism spectrum may wander for a variety of reasons and it is not always easy to pinpoint exactly why someone might leave a supervised space. Some people appear to wander aimlessly or may be more likely to wander if they are in new or unfamiliar environments that cause them to become stressed or disoriented. Often people leave safe spaces because they want to get something or they want to get away from something. Common reasons someone may engage in wandering behaviour include:

- Getting to a favourite place or area or item of interest, like the train station
- Attention from being chased
- Avoiding something in their environment, like large crowds or loud noise
- Trying to escape or avoid a situation, like academic or social demands at school

More recently, two different types of elopement have been identified: bolting (rapid, goal-directed movement from a supervising adult or protective area) and wandering (moving about without a clear course or destination). Bolting is the type which concerns parents and carers the most.<sup>7</sup>

Given the potential safety risks associated with wandering, it is important that carers and parents understand why someone on the autism spectrum might wander, and what they can do to reduce the likelihood of wandering and minimise the risk of harm.

## How to prevent wandering

### Positive Behaviour Support approach

Positive Behaviour Support (PBS) is an evidence-based approach aimed at increasing a person's quality of life and decreasing the frequency and severity of difficult behaviours (or 'behaviours of concern') by teaching them new skills and adjusting their environment to promote positive behaviour changes.<sup>8</sup> One component of PBS is acknowledging that behaviour serves a purpose and difficult behaviour (such as wandering behaviour) can be reduced or eliminated if we know the purpose of the behaviour for that person.

PBS sometimes involves parents and carers working with professionals (like psychologists, behaviour specialists, and educators) to develop an individualised and comprehensive support plan that parents and carers use to teach and encourage appropriate behaviour. Parents and carers are responsible for implementing the PBS plan and play an active role in providing feedback to the professionals about their family member's progress. Practitioners provide parents/carers with training in how to implement the plan, and give parents and carers information and support in responding to difficult circumstances in appropriate ways. Research has shown that behavioural approaches can be applied to successfully reduce wandering behaviour in people on the autism spectrum.<sup>5</sup> This section outlines some of the steps involved in implementing a PBS intervention to try to reduce wandering behaviour. It is recommended that you seek professional support in implementing such a program.

For more information on Positive Behaviour Support, visit [pbsacademy.org.uk](http://pbsacademy.org.uk) or [www.pbis.org](http://www.pbis.org) or call the Amaze Infoline on 1300 308 699.

## Determining the function of the behaviour

The first step in applying a PBS approach to managing wandering behaviour in people on the autism spectrum is to try to work out why they wander. In behavioural terms, this is referred to as determining the "function of the behaviour". This step can be complex because:

- The function of the behaviour may be different for every person; and
- There may be multiple reasons why a person might wander.

A professional, such as a psychologist, occupational therapist, or speech therapist, can help you work out why a person might wander. They should work with you to create a record-keeping process like an ABC (Antecedent/Behaviour/Consequence) or STAR (Setting/Trigger/Action/Response) chart, to help identify triggers and patterns that lead to a person wanting to leave an area. (An example of a simple ABC chart is below.)

Once data has been gathered on the occurrence of wandering, it can be considered together to identify functions. Once you know why someone is wandering (i.e. the function of the behaviour) you can then work on ways to prevent the behaviour. It may be that the setting needs to be adapted (e.g. noise reduced), or a new skill needs to be taught to replace the behaviour (e.g. teach them to notify their carer when they want to leave a situation).

It is also worth thinking about the antecedent to the wandering. Antecedents are things that were happening before the behaviour (the wandering) takes place. It might be something in the environment or happening to the person. If we identify an antecedent factor in the wandering behaviour, it gives us the opportunity to teach new skills that can meet their needs without them wandering. It may also give you the opportunity to change the environment (e.g. reduce excess noise), introduce sensory supports (e.g. wear earmuffs or headphones), or offer a communication strategy (e.g. teach a sign that means "too loud").

DATE	TIME	ANTECEDENT	BEHAVIOUR	CONSEQUENCE
		What happened immediately before the behaviour?	What did the person do?	What happened then? What did you do?
1 Jan	10am	A marching band paraded through the park where John was having lunch	John covered his ears and attempted to run away	Took John's hand and gave him his headphones to help him calm down
3 Feb	11am	A group of children were laughing and squealing in a game at the indoor swimming pool where John was about to swim	John covered his ears and tried to leave out the side door that led onto the road	Ran in front of John and put hand on his shoulder. Helped him count to ten to help him calm down

## Teaching new (replacement) skills

Teaching the person new skills to reduce or replace their desire to wander is the next step in this approach. Examples of skills that you might choose to work on could be:

- Looking at a book about trains instead of leaving the house to look at the train station
- Providing praise for not wandering and access to preferred items
- Providing regularly scheduled visits to preferred location
- Teaching them to ask/signal for a break when they feel overwhelmed

When teaching new skills, there are a few things to consider:

- A replacement behaviour must allow the person to gain access to the same reinforcer which they receive through wandering. For example, if a child wanders in order to gain access to a preferred item, for example a train station, the replacement behaviour must allow them access to trains.
- The replacement behaviour must require less effort than the original behaviour, i.e. the person is not going to use a new skill if it takes more effort than wandering. Therefore, the replacement behaviour must be easier for the person to engage in than wandering.
- Sufficient reinforcement must also be available for the replacement behaviour. The replacement behaviour should be more rewarding than wandering and be provided in the natural environment. The person needs to be encouraged to use the replacement behaviour rather than wandering. The reinforcement needs to be given as soon as possible.
- Functional communication training is the most common replacement behaviour intervention and involves teaching someone how to communicate what they want instead of wandering.
- When teaching a new skill, break the task into a series of small achievable steps. Once the person has mastered a step, you can move onto the next step. Set aside blocks of time to practice the skill when the person is calm - not just in situations when they are likely to try to wander.
- Make sure that the skill is practiced in different settings and can be applied with different people. As teaching progresses, incorporate the new skill into outings and daily activities to get lots of practice.

It is particularly important to teach safety skills to people with a tendency to wander. Teaching these skills can be prioritised according to the types of risky situations the person is most likely to come across if they wander. Safety skills to teach might include:

- Road safety
- Car safety
- Stranger danger as well as who to approach when in need of help
- Water safety and water survival techniques
- What to do if they get lost

The use of Social Stories™ might be a helpful tool in teaching some people on the spectrum new skills, particularly if you have used these successfully before. A Social Story™ has a prescribed format and describes a situation, skill, or concept that is meaningful for the person for whom the story is developed. Social Stories™ are not specifically about changing a person's behaviour so much as improving their understanding of events and expectations, but this may lead to more appropriate responses.

## Developing a Behaviour Support Plan

An important part of a Positive Behaviour Support approach to wandering is the development of a Behaviour Support Plan, which ties all the above elements together. If you are working with a practitioner or team, they will help you develop a Behaviour Support Plan that meets the specific needs of the individual. For a support plan to be successful, it should:

- Define the behaviour of concern and what it looks like (i.e. wandering);
- Identify the function/s of the behaviour;
- Define how to implement antecedent interventions;
- Teach and reinforce positive replacement skills for the behaviour;
- Grow and change with the person as skills are mastered and new challenges come up.

## Getting help for wandering

Managing the risk of wandering behaviour is a very complex task, so don't go it alone. The type of professionals most likely to be skilled in Positive Behaviour Support strategies are psychologists, occupational therapists, speech pathologists, and mental health nurses. You may be able to access a Medicare rebate for sessions with these professionals if you are referred through your GP. Ask your doctor about your options.

If you decide to get help from:

- A psychologist, The Australian Psychological Society website has a Find a Psychologist search tool that can help you find a psychologist with experience working with people on the autism spectrum with behavioural issues [www.psychology.org.au/findapsychologist](http://www.psychology.org.au/findapsychologist).
- An occupational therapist, the Occupational Therapy Australia website has a Find a private practice OT search tool that can help you find an occupational therapist with experience working with people on the autism spectrum [www.otaus.com.au/find-an-occupational-therapist](http://www.otaus.com.au/find-an-occupational-therapist).
- A speech pathologist, the Speech Pathology Australia website has a Find a Speech Pathologist search tool that can help you find a speech pathologist with experience working with people on the autism spectrum [www.speechpathologyaustralia.org.au/information-for-the-community/find-a-speech-pathologist](http://www.speechpathologyaustralia.org.au/information-for-the-community/find-a-speech-pathologist).

Some useful questions to ask when choosing a professional to work with can include:

- Have you worked with people on the autism spectrum (and their family and carers) before?
- Have you helped people who wander and their families and carers in the past?
- What kind of evidence-based intervention do you provide?
- What will you expect of me if we work together?
- How have the strategies you recommend helped to reduce or eliminate wandering?
- What do you need at the first appointment?
- Will you conduct the functional behaviour assessment yourself?
- What data will you need me to collect?
- Will you do home visits?
- Will you assist in writing the behaviour support plan?

If the cost of working with a professional is not an option for you and you live in Victoria,

Aspect Victoria run free Positive Behaviour Support workshops for parents of people on the autism spectrum between the ages of 6 and 25. The workshops help parents identify why certain behaviours occur, and provide strategies to reduce or eliminate them. They also have capacity to offer short-term additional assistance for families needing support with their individual positive behaviour support plan. To find out more about what they offer, visit their website [www.autismspectrum.org.au/content/aspect-victoria-0](http://www.autismspectrum.org.au/content/aspect-victoria-0).

The Victorian Department of Health and Human Services (DHHS) offers Behaviour Support Services for children, adolescents and adults with a disability. Contact the Disability Intake and Response Service for information on eligibility criteria and referral pathways on 1800 783 783. (With the National Disability Insurance Scheme rolling out across Victoria, this information may change. Amaze will update this resource if there are changes.)

### Restrictive interventions to reduce wandering

Another approach in response to wandering is the use of 'restrictive interventions' (interventions that restrict the rights or freedom of movement of a person with a disability). Many families ask about these types of interventions and their effectiveness in reducing wandering behaviour in people on the autism spectrum.

There is no evidence to support the effectiveness of restrictive interventions in reducing wandering behaviour for people with developmental or cognitive disabilities, and such practices may infringe upon a person's fundamental human rights.

The Victorian Disability Act 2006 outlines four main kinds of restrictive interventions for disability service providers:

- Mechanical restraint – when a device is used to prevent, restrict or subdue a person's movements (GPS and similar devices are considered mechanical restraints in the Disability Act 2006);
- Chemical restraint – any medication that is used to control behaviour or subdue a person (e.g. a sedative);
- Seclusion - the sole confinement of a person at any hour of the day or night in any room or area of any place; and
- Physical restraint – the use of physical force to prevent, restrict or subdue a person's movement (physical restraint is identified in a direction under section 150 of the Act).
- Another common restrictive intervention is known as environmental restraint, which prevents free access to parts of a person's environment (such as locking or placing alarms on doors).

Unlike Positive Behaviour Support strategies, restrictive interventions do not support the individual to develop skills that may help to prevent wandering, such as learning to request to go somewhere or regulating their own emotions to reduce the likelihood they want to flee a situation. Restrictive interventions may assist with immediate safety concerns, but used alone they are not effective in reducing wandering behaviour.

### GPS devices

Global Positioning Systems (GPS) are sometimes used to identify the geographical position of a person (not just those on the autism spectrum) who has wandered in an effort to help locate them.

Despite their intuitive appeal, it should be noted that there is currently no evidence to suggest that GPS devices are an effective intervention to prevent the risk of harm associated with wandering for people on the autism spectrum.<sup>9</sup>

Some of the considerations with using on GPS tracking devices include:

- Locating technology may infringe on a person's right to privacy, dignity and freedom;
- Use of locating technology may lead to stigma and social isolation;
- Devices can be unreliable (poor signal, battery issues, some aren't waterproof/water resistant);
- Devices can be removed, damaged or otherwise interfered with by the wearer;
- Devices can be uncomfortable or impractical for the wearer;
- Devices can be forgotten/misplaced by the wearer or carer, particularly if they are not secured to the person;
- Devices may require remote monitoring by third parties and
- Having a tracker fitted can lead to complacency of carers, giving them a false sense of security.

If you choose to use a GPS tracking device, it should be used in conjunction with a Positive Behaviour Support approach and be thought of as one tool in helping wandering. We strongly recommend that you take into consideration the limitations identified above, and do not consider the GPS a replacement for supervision, appropriate home security and the implementation of a positive behaviour support plan.

It is important to note that while a GPS device may provide a geographical location, it will not protect the person wearing it from injury or death.

## Some practical strategies

### Engage the community

A good way to increase the chances of keeping a person who wanders safe is to get the wider community's support in reducing the risks associated with wandering. Make contact with people who may be likely to come across the person you care for if they wander and let them know exactly what they should do if they see them alone or showing signs of distress. If possible, bring the person on the autism spectrum along and introduce them to these key people. You may like to inform:

- Local police (more below about the role that police can play in keeping people who wander safe)
- Neighbours
- Local shop keepers
- The school
- Local bus drivers
- Staff in any other favourite places (e.g. train station).
- Remember, the more people who are aware that your loved one is prone to wandering, the more support and help you have in keeping them safe.

## Engage the police

If a person on the autism spectrum goes missing, you may need assistance from the police, so it's important that the individual feels comfortable with them. Making contact with police can be beneficial and there are a number of ways that the police can support and assist you, including:

- Providing general advice, strategies and options (seeking advice in this way does not trigger a formal police report or police action);
- Arranging to introduce the person to local police to help them feel comfortable and confident in approaching police;
- Recording information that you choose to volunteer (such as behaviours and triggers, calming strategies, how to best communicate with your family member) on the police LEAP database to help police in any future contact they may have with the person; and
- Helping locate a missing person.

## Create a Community Information Sheet

It might help to complete a Community Information Sheet for the person who wanders. This sheet could include a recent photograph and physical description, and information about effective ways to approach, communicate and calm them. It should also contain clear instructions about what to do and who to contact if they're seen alone outside your home or property. Keep a note of everyone you give the sheet to, and ensure you have their contact details. If the person wanders, you can alert them to keep an eye out and to notify you immediately if they see them. An example Community Information Sheet is included in Appendix B.

It is worth noting possible privacy issues around composing an Information Sheet like this for an adult who cannot provide informed consent. If the person who wanders is an adult and an appropriate guardianship order is not in place, writing an Information Sheet may not be possible. Contact The Office of the Public Advocate for advice.

## Create a map

Determine where in your neighbourhood they might go first if they leave the premises or safe place. Be guided by what the person is most interested in around your local area. Is it a particular neighbour's yard, a pool, a playground? Do they seem drawn to something when you pass it? Are they likely to try to get to a place they used to know, like a previous home or workplace? Do they like particular food items sold at shops? Plot these points on the map, and keep this updated whenever a new area of interest seems to come up. These landmarks can then form an emergency search map of where to look first in the event the person wanders.

## Easy identification

If you have concerns that the individual may be unable to communicate their name or your phone number if they are found wandering, you may want to consider ways to include this information on an identification tag that would be easily visible to someone who finds them. This could be engraved in an identification bracelet or similar, or could be included in a label on their bag or items of clothing.

## Locating a missing person

If the person you care for goes missing, you will have your emergency search map as a starting point. You may also want to contact people on the community involvement list to see if anyone has seen them, such as neighbours or staff at places of interest.

You should report them as missing to the police as soon as you have concerns for their safety or welfare. You do not have to wait a certain period before reporting. If you have previously disclosed their details to the police, let them know, as these details will be in their database and assist with the reporting process. The police will want to know:

- the person's full name, date of birth and address;
- a description of their physical appearance, the clothes they were wearing and a recent photograph;
- any health considerations (e.g. taking medication) or vulnerability (e.g. non-verbal);
- the circumstances surrounding them going missing (e.g. location where last seen, any significant events leading up to their disappearance);
- features that may influence how police approach the person (e.g. whether they can communicate, know their own address, or will respond to police calling out to them);
- their mobility (e.g. general fitness, distance they could walk, familiarity with public transport, carrying money/myki/identification);
- any steps you have taken to find them (e.g. contacted family and friends, searched likely places);
- their interests (e.g. destinations/places of interest, fixations, previous locations); and
- whether they may exhibit behaviours which pose a risk to themselves or others.

Police will actively search for a missing person until they are found, and will prioritise searches for children and people with a disability. It is therefore important that you notify police if you subsequently have contact with or locate the missing person.

If you are unsure about whether to report an incident to police, contact your local station to discuss your concerns. Police can advise you of the options available, including making a formal report and referral options. Otherwise, report an incident by calling 000. More information about engaging with police can be found in Appendix A.

## References

- [1] National Autism Association. (2012). *Big Red Safety Toolkit*. Retrieved from <http://nationalautismassociation.org/docs/BigRedSafetyToolkit.pdf>.
- [2] Anderson, C., Kiely Law, J., Daniels, A., Rice, C., Mandell, D. Hagopian, L., & Law, P. (2012). Occurrence and family impact of elopement in children with autism spectrum disorders. *Pediatrics*, *130*, 870-877. doi: 10.1542/peds.2012-0762.
- [3] Matson, J.L., & Rivet, T.T. (2008). Characteristics of challenging behaviours in adults with autistic disorder, PDD-NOS, and intellectual disability. *Journal of Intellectual and Developmental Disability*, *33*(4), 323-329.
- [4] Smith, S., Brandord, D., Collacott, R.A., Cooper, S. & McGrother, C. (1996). Prevalence and cluster typology of maladaptive behaviours in a geographically defined population of adults with learning disabilities. *British Journal of Psychiatry*, *169*, 219-227.
- [5] Lang, R., Rispol, M., Machalicek, W., White, P., Kang, S., Pierce, N., Lancioni, G. (2009). Treatment of elopement in individuals with developmental disabilities: A systematic review. *Research in Developmental Disabilities*, *30*, 670-681. doi: 10.1016/j.ridd.2008.11.003.
- [6] Baptiste, S. Steggles, E. Grochowina, N. & LeBeau, M. (2006). *The Locating Technology Project*. Retrieved from [www.srsmcmaster.ca/Portals/20/pdf/LTP\\_Report.pdf](http://www.srsmcmaster.ca/Portals/20/pdf/LTP_Report.pdf).
- [7] Fisher, W.W. & Bowen, M.M. (2014). An Empirical Model for Individualized Assessment and Treatment of Two Types of Elopement: Bolting and Wandering. Paper presented at the Association for Behavior Analysis International Autism Conference, March, Louisville, Kentucky.
- [8] Gore, N., McGill, P., Toogood, S., Allen, D., Hughes, J., & Baker, P. et al. (201). Definition and scope for positive behavioural support. *International Journal Of Positive Behavioural Support*, *3* (2, Aut), 14-23.
- [9] Hayward, Ransley & Memery (in press). GPS devices for elopement of people with autism and other developmental disabilities: a review of the published literature. *Journal of Policy and Practice in Intellectual Disabilities*.
- [10] Kiely, B., Migdal, T.R., Vettam, S. & Adesman, A. (2016). Prevalence and Correlates of Elopement in a Nationally Representative Sample of Children with Developmental Disabilities in the United States, *PLoS ONE*, *11* (2), e0148337

## Appendix A1: Guidelines for Seeking Police Assistance



Police receive training and have procedures for recognising and responding to people of all ages who have a disability, so you should not hesitate to contact police for assistance. There are a number of ways in which police can help you:

- **General advice** – If you have questions (e.g. about police responses) or concerns (e.g. about risks), you can contact your local police station and ask to speak to:
  - the Mental Health and Disability Liaison Officer; or
  - the divisional Youth Resource Officer; or
  - the duty sergeant.

These police can discuss strategies and options with you. Seeking advice in this way does not trigger a formal police report or police action.

- **Familiarisation** – You can arrange to introduce your family member to local police so that they feel comfortable and confident in approaching police. Contact your local police station to explain your reason for visiting and to arrange a convenient time.
- **Information sharing** – You can choose to volunteer information to help police in any future contact they have with your family member. The central police database, LEAP, records information about individuals who have had contact with police, whether as a victim, a witness, a person in need of help, or an offender. The sort of information that is relevant is: typical behaviours/triggers, effective communication strategies, any known risks, appropriate contact person and other information sources (e.g. where to find a copy of your handout or map). Police will record this information on their database, where it can be seen by authorised police and 000 call-takers. To discuss this option, contact your local police station as above. The officer will explain how this information will be stored, used and can be removed. For further information about this option, refer to the factsheet attached.
- **Locating a missing person** – You should report your family member as missing as soon as you have concerns for their safety or welfare – you do not have to wait a certain period before reporting. Police will ask you for the following information:
  - your family member's full name, date of birth and address;
  - a description of their physical appearance, the clothes they were wearing and a recent photograph;
  - any health considerations (e.g. taking medication) or vulnerability (e.g. has autism);
  - the circumstances surrounding them going missing (e.g. location where last seen, any significant events leading up to their disappearance);
  - features that may influence how police approach the person (e.g. whether they can communicate, know their own address, or will respond to police calling out to them);
  - their mobility (e.g. general fitness, distance they could walk, familiarity with public transport, carrying money/myki/credit card/identification);
  - any steps you have taken to find them (e.g. contacted family and friends, searched likely places);
  - their interests (e.g. destinations/places of interest, fixations, previous locations); and
  - whether they pose a risk to themselves or others.



# Voluntary Disclosure of Personal Information Regarding a Mental Disorder and/or Disability



VICTORIA POLICE

Police will actively search for a missing person until they are found, and will prioritise searches for children and people with a disability. It is therefore important that you notify police if you subsequently have contact with or locate your family member.

- **Reporting an incident** – Police treat an incident involving a person with a disability – whether as a victim or a suspect – the same as one involving any other member of the community. If you are unsure about whether to report an incident to police, contact your local station as above to discuss your concerns. Police can advise you of the options available, including making a formal report, referral options and civil pathways. Otherwise, report an incident by calling 000.

There are also a number of ways in which you can help your child to stay safe in the community:

- **Reinforce personal safety messages – repeatedly!**
  - Identify their personal vulnerabilities (e.g. crowds, noisy places, eagerness to please);
  - Develop preventative strategies (e.g. identify travel routes that avoid stressful situations, visit places at less busy times, set rules about giving away possessions); and
  - Discuss potentially risky scenarios and good responses with your child (e.g. what they may encounter and what they can do).
- **Explain inappropriate / harmful behaviour**
  - Explain what is appropriate behaviour by them in common situations they are likely to encounter (e.g. on public transport, in public places);
  - Explain what is appropriate behaviour by others (e.g. what constitutes bullying or victimisation, and who your child should tell if they experience it); and
  - Update this information as your child moves through each life stage (e.g. finishing primary school, entering their teens, becoming an adult).
- **Instil positive views of police and other safety guardians**
  - Engage with local police so that your child is confident and comfortable with approaching police;
  - Identify other people that your child can approach (e.g. neighbours, teachers, trusted shop staff, public transport officers).
- **Assist police to provide informed responses**
  - Consider providing information for a Person Warning Flag / response plan; and
  - Develop non-verbal ways to communicate that they have a disability (e.g. a card outlining tips for interactions).

## Who is this Fact Sheet for?

This fact sheet is for people with, and parents and guardians of people with, mental illness, intellectual disability, acquired brain injury, neurological disorder or personality disorder, who believe that providing police with information about their disability or disorder may be beneficial to interactions they may have with police in the future.

## What is this Fact Sheet about?

This fact sheet outlines the purpose of voluntarily disclosing personal information to police and explains how this can be done.

## Why provide personal information to police?

Volunteering information about a person's disability or disorder will assist police to make timely and considered decisions during any interaction they may have with the person.

## How is volunteering personal information helpful to police?

An understanding of a person's needs will assist police to tailor an appropriate and supportive response in circumstances where the person may be:

- Reported missing;
- In distress;
- Experiencing difficulty in:
  - thinking clearly;
  - dealing with a problem;
  - understanding and/or communicating what is happening to them; or
  - conveying what has upset them.

Volunteered information can include contact details of a support person whom police may notify in such circumstances.

## Who can give personal information to police?

- The person themselves, if they are 18 years and over and can provide informed consent;
- The person's parent, if under 18 or if requested by the person.
- The person's legal guardian, if under 18 or requested by the person.

## What information is relevant?

Police do not need clinical information. Rather, police need information that will help them to understand how best to interact with a person. Information might include:

- Typical behaviours / triggers (e.g. how the person is likely to respond to; police and other emergency services; when distressed; and/or what exacerbates their distress)
- Any known risks (e.g. may use violence when feeling threatened)
- Effective communication techniques (e.g. how best to calm a situation and obtain information)
- Any other mental disorder-related information (e.g. if the person is on a treatment order)
- Contact person (e.g. a person police may contact, if necessary or appropriate)
- Information source (e.g. who has provided the information).

# Voluntary Disclosure of Personal Information Regarding a Mental Disorder and/or Disability



VICTORIA POLICE

## How can I provide this information to police?

Personal information can be provided to police by contacting the officer in charge of any police station, either by telephone or in person, and requesting an appointment with the Mental Health & Disability Liaison Officer. At the appointment the Liaison Officer will explain the process, address any concerns or queries you may have and record your volunteered information on the police database (known as LEAP).

If attending an appointment is difficult, inform the Liaison Officer and alternative arrangements can be made to collect your personal information.

## What to take to the appointment

- Proof of identification.
- A copy of this fact sheet.

If a person is under 18 years of age they must be accompanied by a parent or guardian.

## What will police do with the information?

- When personal information is volunteered to police, an initial form is completed then details are entered into the police database.
- The information will be stored within the database and only utilised in the event of interaction between the person and police.
- When personal information is volunteered, police are obliged to explain to the person, their parent or their guardian, how the information will be stored and used.

## Who has access to volunteered personal information?

Personal information can only be accessed by police and '000' call takers. There is strict policy about who can access this information and the police database records the details of any person who has accessed it.

## Can volunteered information be deleted upon request?

Volunteered personal information can be deleted at any time upon request of the person or their parent or guardian, if there has been no interaction with police.

## Appendix B: Example Community Information Sheet

### Autism Spectrum Disorder: Wandering Alert Form

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_



#### Tick those that apply:

- No sense of danger  
  May become agitated if approached  
  Intellectual disability  
 Cannot communicate verbally  
  Limited independent skills  
  Limited social skills

#### Relevant medical information (including any mental health concerns):

---



---

#### Any relevant sensory issues (hearing, vision, other):

---



---

#### Communication Skills: (e.g. if non-verbal indicate level of comprehension, and communication methods):

---



---

#### Fears or things that cause the person anxiety:

---



---

#### Triggers for harm to self or others (if applicable):

---



---

#### Things that calm the person/best way to approach:

---



---

#### What to do if you find this person:

---



---

#### Interests/favourite places:

---



---

#### Any other important information:

---



---

#### Emergency Contacts:

- |                               |                               |
|-------------------------------|-------------------------------|
| 1. Name: _____                | 2. Name: _____                |
| Address: _____                | Address: _____                |
| Relationship to person: _____ | Relationship to person: _____ |
| Phone: _____ (BH) _____ (AH)  | Phone: _____ (BH) _____ (AH)  |

**Amaze**

24 Drummond Street Carlton 3053  
PO Box 374, Carlton South 3053

Phone: **03 9657 1600**

Fax: **03 9639 4955**

Email: **info@amaze.org.au**

**www.amaze.org.au**