COCHRANE AND AREA

Resource Guide

for Older Adults at Risk of Going Missing

Age Friendly Cochrane



connecting DOTS
Dementia & Other Therapies / Services

fcss
Family and Community Support Services

FRN
FAMILY RESOURCE NETWORK
COCHRANE & AREA

cochrane
HOW THE WEST IS NOW

Disclaimer

The Dementia and Other Therapies and Services Committee (DOTS) have developed this guide as a resource to Cochrane and Area older adults and those that support them. We hope that you find this resource guide valuable. As programs and services are ever changing, we understand that some services may have inadvertently been missed. At the time of printing, the information contained within this guide was accurate.

The content in this guide is provided for informational purposes only. While efforts are made to ensure it is accurate, no guarantee of the accuracy of the information in this guide is given. The information about services and service providers does not constitute an endorsement or recommendation by the Town of Cochrane or DOTS Committee. The Town of Cochrane or DOTS Committee assumes no liability of any kind for the information contained in this guide.



A missing person is an emergency



Stay at home



Call 9-1-1

Table of Contents

3 **Overview**

4 **Understand the Risk**

- Why people go missing
- Risk assessment tool

6 **Reduce the Risk**

7 **Get Prepared**

- Technology considerations
- Cue cards
- Emergency cards
- Herbert protocol
- Cochrane Search & Rescue questions

25 **What Happens When You Call 9-1-1**

26 **Resources**

28 **If you see someone who has been reported missing or looks lost**

29 **Community Partners**

30 **Notes**

Overview

This resource guide is a tool to support caregivers and older adults who may be at risk of going missing. The guide incorporates prevention tips, preparedness in the event someone goes missing, available resources and tips for community members if they find someone that has gone missing.

The guide is designed for caregivers of older adults who have a cognitive impairment, dementia, mental illness, brain injury or any other reason that makes them vulnerable to going missing.

Users are encouraged to refer to the sections that are relevant to their specific situation. Someone going missing is a very stressful situation and being prepared for potential missing incidents may help relieve that stress and give a better sense of control for individuals and caregivers. In addition, having information about the missing person readily available can better support responders in starting a search.

This guide has been adapted by the Dementia and Other Therapies and Services (DOTS) Committee from the work of the Calgary Missing Older Adult Resource Network (CMOARN). It incorporates work from other jurisdictions and research by Dr. Noelannah Neubauer. Additions were made in partnership with RCMP, Cochrane Search and Rescue and Southern Alberta Regional Victim Serving Society.

Cochrane was part of a pilot project for the "Disaster and Emergency Preparedness for Older Adults Project". Cochrane adapted this manual to be relevant for rural areas and was the first community to run "Emergency Preparedness for Seniors" training before it was launched across the province.

GOALS OF THE DOTS COMMITTEE

- Support for caregivers and those with dementia
- Programming
- Support caregivers in the prevention of wandering
- Education and increased awareness of resources in the community

Understand the Risk

Finding a balance between independence and the risk of going missing can increase quality of life for the person at risk while reducing anxiety or stress for everyone involved. People who have gone missing before are at greater risk of going missing again.

People go missing because they are:

- ☐ Searching for something (bedroom, bathroom, personal items, food, etc.)
- ☐ Wishing to go home or to find friends or family
- ☐ Concerned about past obligations such as going to school or work
- ☐ Upset or anxious events might trigger an impulse to leave
- ☐ Experiencing physical discomfort (too hot, too cold, too noisy, hungry, need to use washroom)
- ☐ Experiencing medical issues (hallucinations or delusions)
- ☐ Bored, restless or looking for meaningful engagement
- ☐ Fatigued (particularly during late afternoon or early evening)
- ☐ Looking for familiar places (restaurant, supermarket, bank, etc.)

Risk Assessment Tool »

Adapted from work by Noelannah Neubauer, PhD, Faculty of Rehabilitation Medicine, at the University of Alberta.

The Risk Assessment Tool is a practical way of evaluating the risk of someone going missing. The tool cannot guarantee that someone will never go missing.

An interactive tool for assessing risk is available at: ***canadiansafewandering.ca***

RISK OF GETTING LOST



- ☐ No history of being lost
- ☐ Lives with family
- ☐ No interest in going out without having someone accompany them



- ☐ Limited supervision
- ☐ History of exercising as a means of alleviating stress
- ☐ Regularly engaged in outdoor/community activities
- ☐ Becomes overwhelmed or anxious
- ☐ Identifies with earlier life experiences (i.e. going to work)
- ☐ Talks about leaving home



- ☐ Walks alone
- ☐ Lives alone
- ☐ Prepares to go outside (puts on coat and shoes, etc)

STRATEGIES

- ☐ Develop a prevention plan
- ☐ Prepare Herbert Protocol
- ☐ Talk to physician
- ☐ Technology and ID strategies
- ☐ Exercise with a partner / use a buddy system
- ☐ Increased supervision
- ☐ Alarms/surveillance
- ☐ Barriers and locks

Can transition to lesser or greater levels of risks at any moment. Need to apply education and proactive strategies as soon as possible to encourage safe wandering.

Reduce the Risk

- ☐ Connect with your doctor, health care provider and other resources for support (see page 26)
- ☐ Implement daily structure to create routine habits that are more likely to be followed
- ☐ Include exercise to help limit feelings of agitation or restlessness
- ☐ Ensure needs are being met (hunger, thirst, comfort, etc)
- ☐ Avoid areas that are busy and disorienting (go shopping at less busy times)
- ☐ If you notice increased restlessness at certain times of the day, plan for extra support and activities during that time (chores: setting table, folding laundry; or activities: music, puzzles, exercise; or social: phone call, grocery shopping, other outings)
- ☐ Move items such as keys, purse, wallet and jacket away from the door
- ☐ If appropriate, make neighbours aware of your concerns and share your contact information with them
- ☐ Use devices that make sound when exterior doors or windows are opened (electronic door chimes)
- ☐ Consider ID bracelets, GPS technology or medic alert systems
- ☐ Consider painting the exterior door the colour of the walls (although this may cause agitation for some)
- ☐ Mark interior doors with visual cues (picture of toilet, bed)

Get Prepared

Home adaptations, technology and wearables:

- ☐ Sew a piece of fabric with the name, address and contact phone number in a favourite article of clothing
- ☐ Consider the most appropriate technology such as ID bracelets, GPS technology or a medic alert system (see page 8)
- ☐ Update emergency contact information on cell phones
- ☐ Complete the Herbert Protocol (see page 15) and put it on top of your fridge
- ☐ Complete the Carer Emergency Card for your wallet
- ☐ Complete the In Case of Emergency (ICE) card for their wallet
- ☐ Keep a current photo of the person at risk of going missing on your phone or in your wallet
- ☐ Keep a copy of the Herbert Protocol on your phone

Technology Questions to Consider

It is natural to look to technology to see how it might provide assistance. The wide variety of possible technological solutions that are available can make it difficult to find one that fits the best.

IS TECHNOLOGY RIGHT FOR YOU?

Technology can help maintain and support independence, choice and self-determination. Technology can assist with everything from safety, to helping you stay active with things like hobbies and recreation. But technology is not always the solution. It's not a substitute for care being provided by another person.

Technology does not replace existing connections and services, it's meant to enhance and support what is already in place.

WHAT CLASSIFIES AS TECHNOLOGY?

Getting the most out of any technology requires considering the unique needs and situation of each person, no one size fits all. Here are some things to consider when making decisions around technology.

"Technology" we are defining as something that helps. It doesn't always mean new devices or gadgets, as sometimes technology is as simple as a reminder note or phones with larger buttons. Simple solutions are often the best option.

Taking the time to consider how, where and when to use technology is an important part of finding solutions that will work for you.

Steps to Help You Find the Appropriate Solution

IDENTIFY THE CONCERN

To find the right solution, you need to clearly identify and understand the issue or problem. It may be that the best solution is not technology but adjusting a schedule, a routine or making use of services such as counseling or occupational therapy. Since every person's situation is unique, decisions on what might be the most useful will need to be made based on what works for you and your support team.

DEFINE THE CONCERN

- ☐ What is the need or issue you want to address?
- ☐ What solutions have already been tried and what were the results?
- ☐ How urgently do you need to find a solution?
- ☐ What are the consequences of leaving the issue unaddressed?
- ☐ How will the technology impact or change care?
- ☐ Who could/or needs to be part of assessing the situation and finding solutions (such as your physician, an occupational therapist or others)?

CONSIDER THE FULL SITUATION

Finding the appropriate technology/tool means taking into consideration your current living situation and context, including the needs of the caregivers. Technology won't be helpful if you aren't comfortable using it and don't know where to turn for help to learn how to use it.

THINGS TO CONSIDER

Expense: are you purchasing or renting equipment? If renting, what are the contract terms?

Installation: what's required and how easy is it to install?

Adaptability: modifying devices or technology to changing needs.

Maintenance: ongoing and updating.

Ease of use: how, when and where will you use it?

Training and **support.**

If you are living independently with dementia: what steps can be taken to help you remember to use the technology?

Consider These Issues When Making Your Decision

EVALUATE THE RISKS

While it is impossible to know all the risks or possible outcomes, there are pros and cons to every technology solution. Here are a few things to consider:

- ☐ Under what conditions will it not work?
- ☐ What happens when it doesn't work? What are the possible consequences if it is not working?
- ☐ How easy is it to disable or interrupt?
- ☐ How does the technology solution address and manage privacy issues?
- ☐ Are there new problems or issues that the technology could introduce?
- ☐ Are there questions around privacy, data collection and similar issues you should consider? Who will have access to any data that the technology gathers and for what purpose?

AIM FOR EARLY INTRODUCTION

Introducing technology early, before the situation has become a crisis, can make it easier to adopt the technology. Adopting technology can be a challenge for some but having someone show you how it can be used to access or support your interests (such as music) can help with your comfort level in using it.

NEEDS CHANGE OVER TIME

Expect solutions to change over time as technology solutions that work now may no longer be appropriate or useful as dementia progresses.

NOTES:

Include The Person in Solution Discussions

If you are a caregiver, remember to include the person with the condition in this conversation to understand their thoughts about possible technology solutions. Including the person can help find solutions the individual is comfortable with and that are appropriate for their needs. Making sure everyone is comfortable is an ongoing process. It is also important to explore when the person feels that technology should not be used.

Consider including information about your conversations with the person and their thoughts and decisions around technology in their personal directive. This can help to ensure that those decisions are respected in the future.

Concluding Thoughts

The use of technology offers many possible benefits, but getting the most out of any technology requires considering your unique needs and situation, no one size fits all. Most importantly, the technology solution needs to work for you. It will likely need to be modified over time to work for your specific situation.

Resources to find information on specific technology solutions:

- ☐ Alzheimer store Canada: ***alzstore.ca***
- ☐ Locating devices: ***alzheimer.ca***
- ☐ The Canadian Mortgage & Housing Corporation website has guides on home modification for people living with dementia: ***cmhc-schl.gc.ca***
- ☐ Some search terms that might be helpful:
  - Assistive technology
  - Daily living aids
  - Locating devices

Consider exploring reviews of various technology options, remember though, what worked for one person may not work for you.

Cue Card Examples

These are examples of icons that can be attached to doors. They assist with wayfinding and may prevent someone from exiting a home if they are looking for one of these locations.









Emergency Cards

The Emergency Carer card is designed to be kept in the wallet of the caregiver.

If you require another carer card, please reach out to:

- Dementia Network Calgary: 403-290-0110
- Cochrane FCSS: 403-851-2250

Carer Card: ATTENTION!

If I am sick or in an accident, the person I care for needs immediate attention.

My name is: _____

I care for: _____

Relationship: _____

These contacts will know what to do:

Name: _____

Cell: _____

Relationship: _____

Name: _____

Cell: _____

Relationship: _____

In Case of Emergency (ICE) Card

The ICE card is designed to be kept in the wallet of the person at risk.

If you require another ICE card, please reach out to:

- Dementia Network Calgary: 403-290-0110
- Cochrane FCSS: 403-851-2250

IN CASE OF EMERGENCY

Full Name: _____

Date of birth: _____ Blood type: _____

Address: _____

Cell: _____ Work: _____

Conditions: _____

Physician: _____ Phone: _____

Allergies/additional info: _____

IN CASE OF EMERGENCY

Emergency Contact #1: _____

Relationship: _____

Cell: _____ Work: _____

Emergency Contact #2: _____

Relationship: _____

Cell: _____ Work: _____

Herbert Protocol Form and Instructions

This form is designed to provide current information to first responders when someone is missing. Keep a copy of this completed form on top of your fridge with your ***Alberta Health Services Green Sleeve.***

For more information on the Green Sleeve, talk to your family doctor or health care provider or visit: *albertahealthservices.ca/info/page12585.aspx*

PHOTOGRAPHS

Ideally provide a facial close-up and a full length picture.

☐ Please check this box if you consent to having photo(s) shared on social media in the event that this person is missing.

PERSONAL DETAILS

Full name _____

Preferred name/nicknames _____

Other names _____

Current address _____

Home phone _____ **Cell phone** _____

Gender ☐ Male ☐ Female ☐ Other

Date of birth _____ **Age** _____

First language _____ **Other languages spoken** _____

Social media accounts _____

Emergency Contact _____

Home phone _____ **Cell phone** _____

Email _____

GENERAL DESCRIPTION

Hair colour, length and style _____

Wig/hair piece ☐ yes ☐ no **Glasses** ☐ yes ☐ no

Facial hair _____ **Complexion/skin colour** _____

Other identifying features (e.g. tattoos, scars, etc.) _____

_____

GENERAL INFORMATION

Has a dementia diagnosis or has memory problems ☐ yes ☐ no

If yes, please describe: _____

_____

_____

Any known risks? (i.e. aggression, suicidal thoughts, depression, substance abuse)

Describe: _____

_____

Any mental health issues? (i.e. anxiety, depression, bipolar) ☐ yes ☐ no

If yes, please describe: _____

_____

Medication? ☐ yes ☐ no (What kind? How often? What happens in the short term and long term without the medication): _____

_____

Is there visual, hearing, communication/speech impairment? ☐ yes ☐ no

If yes, please describe: _____

_____

GENERAL INFORMATION

Any mobility issues? (i.e. cane, walker, falls) ☐ yes ☐ no

If yes, please describe: _____

_____

Doctor/Specialist contact information: Phone Number _____

Name _____

Is there a Power of Attorney? ☐ yes ☐ no

Agent(s) _____

Is there a legal guardian? ☐ yes ☐ no

Name _____

Is there a personal directive? ☐ yes ☐ no

Agent(s) _____

PERSONAL CIRCUMSTANCES

Lives alone or with others? Describe: _____

_____

Previous addresses (indicate if childhood address): _____

1. _____

2. _____

3. _____

Current school, work or volunteer organization name & address: _____

_____

Most significant job: _____

LOCATION SERVICE

Location service GPS/medical alert: ☐ yes ☐ no

If yes, please describe: _____

_____

PERSONAL CIRCUMSTANCES

What situations might cause anxiety? (i.e. fears, phobias) _____

_____

How might they react if worried/frightened/anxious? _____

_____

Anything that would cause them to behave in a way that would put themselves or others at risk? _____

_____

Anything that might relax/calm them down if they are distressed? _____

_____

Access to money? ☐ yes ☐ no **Carrying cash?** ☐ yes ☐ no **Bank card?** ☐ yes ☐ no

Which bank/branch is typically visited? _____

Favourite places/routines (i.e. church, synagogue, mosque, cafe, grocery store, club):

Name _____ Address _____

Name _____ Address _____

Name _____ Address _____

Hobbies: _____

_____

PERSONAL CIRCUMSTANCES

Favourite vacation spots: _____

_____

Name and contact information of friends or family members that they might visit:

Name _____ Phone _____ Address _____

Name _____ Phone _____ Address _____

Name _____ Phone _____ Address _____

TRAVEL PATTERNS, PAST AND PRESENT

Public transit: ☐ yes ☐ no **Usual route:** _____

Bus pass? ☐ yes ☐ no **Number:** _____

Motor vehicle? ☐ yes ☐ no **Vehicle access?** (i.e. keys) ☐ yes ☐ no

If yes, model, make, year, colour, license plate: _____

Other vehicle? (i.e. scooter, motorized wheelchair, bicycle) _____

Previous times missing: What happened? Where were they found? Why were they there?

_____

_____

_____

_____

_____

Building manager: _____

Emergency number: _____

CONTACT DETAILS (family, friend, caregiver, support worker)

Name	Relationship	Phone	Notes

ADDITIONAL DETAILS THAT MAY BE USEFUL

Include when and where last seen, a description of clothing or any other information you feel may be relevant to assist police.

Date of completion: _____ **By whom:** _____

Relationship: _____ **Phone:** _____

Email: _____

Cochrane Search and Rescue Form and Questions

In addition to the Herbert Protocol, Cochrane Search and Rescue has identified a variety of other questions that are used across Alberta and may assist a search. These questions may be beneficial to fill out in advance, when you have time.

1. Previous wandering: ☐ yes ☐ no

2. Potential destinations: _____

_____

3. What is the exact diagnosis of the type of dementia? _____

4. Describe subject as mild, moderate or severe dementia: _____

5. Determine which description is most appropriate:

☐ mild confusion/forgetfulness ☐ short-term memory affected

6. Difficulty distinguishing time, place and person: ☐ yes ☐ no

Some language difficulties: ☐ yes ☐ no

7. Nearly complete loss of judgment, reasoning and loss of some physical control:

☐ yes ☐ no

8. Does the subject know their own name? ☐ yes ☐ no

9. Does the subject know where he is when at home? ☐ yes ☐ no

10. Does the subject recognize the local neighbourhood? ☐ yes ☐ no

11. Does the subject recognize familiar faces? ☐ yes ☐ no

12. Will the subject answer to their name being called? ☐ yes ☐ no

13. Does the subject have delusions? ☐ yes ☐ no

Describe: _____

_____

14. Does the subject have paranoia? ☐ yes ☐ no

Describe: _____

_____

15. Does the subject have hallucinations? ☐ yes ☐ no

Describe: _____

_____

16. Has the subject shown violence towards others? ☐ yes ☐ no

Describe: _____

_____

17. Is the subject registered in the *Alzheimer's Association's MedicAlert® + Safe Return®* program or any other similar registry? ☐ yes ☐ no _____

Describe any identification, marking jewelry or labels the subject might be wearing:

_____

18. Did the subject recently move or change locations? ☐ yes ☐ no

If so, when? What was the previous location? _____

How have they adjusted to being in a nursing home/new location? _____

_____

19. What is the subject's favorite place? _____

20. Has the subject been involved with outdoor classes, scouting, military, overnight experiences or outdoor recreation? ☐ yes ☐ no

Describe: _____

21. Is the subject afraid of noises, crowds, dogs, traffic, water, horses, the dark or other items? ☐ yes ☐ no

Describe how they react: _____

_____

22. How does the subject respond to strangers? _____

Do they approach strangers? ☐ yes ☐ no

23. Is the subject dangerous to themselves or dangerous to others? ☐ yes ☐ no

24. Has the subject ever wandered away before and you did not know their location for 5 minutes or more? *If so, for each incident describe the following:*

a) Where was the subject last seen? _____

b) What was the subject doing when last seen? _____

c) Events that might have caused the subject to have wandered? _____

_____

d) What actions were taken? _____

e) Where was the subject found? _____

f) What was the distance from the point the subject was last seen and where found? _____

g) How was the subject found? _____

h) List any medical problems that resulted from being lost: _____

_____

25. What jobs and occupations has the subject held throughout their life?_____

_____

26. Subject's hobbies and interests: _____

_____

Are they able to still engage in the hobby? ☐ yes ☐ no

27. What are subject's daily habits? _____

_____

Did they occur on the day last seen? ☐ yes ☐ no

28. Distance the subject typically walks each day (e.g., during the past week)? _____

29. Greatest distance subject has walked during the past three months?_____

During the past ten years? _____

30. Estimate the greatest distance you believe the subject could walk: _____

31. Describe the subject's ability to walk including any unique gait or shuffle.
List any limitations to walking: _____

_____

32. Does the subject talk about a person or place? ☐ yes ☐ no

Is it out of town? Describe: _____

33. Does the subject talk about visiting a person/place that is out of town? ☐ yes ☐ no

Describe: _____

34. Has the subject attempted to visit a person/place without supervision? ☐ yes ☐ no

Describe: _____

35. Does the subject travel independently using public or private transportation?

36. Does the subject walk or travel a considerable distance from home and return unaided? Describe: _____

_____

37. Does the subject get lost or confused easily in an unfamiliar setting? ☐ yes ☐ no

38. Does the subject wander? ☐ yes ☐ no

Wander at night? Wander during the day? _____

39. Does the wandering appear goal-directed? ☐ yes ☐ no

Describe: _____

40. Does the wandering appear random? ☐ yes ☐ no

41. Does the subject seek out exits or try to escape from present location? ☐ yes ☐ no

What Happens When You Call 9-1-1

WHAT WILL HAPPEN *AFTER* YOU CALL 9-1-1?

- ☐ Provide the officer with the completed Herbert Protocol and a recent photograph
- ☐ Let RCMP know if a recent argument or disagreement has taken place prior to a person going missing. This detail may influence how a search is conducted
- ☐ Emergency Services will assess vulnerability and based on assessment, may begin searching immediately
- ☐ As part of the missing person's assessment, you will be asked a variety of questions. These questions are standard protocol and will include difficult questions. These questions are not intended to be a judgment on you or the person you are caring for, they are asked in all missing person situations
- ☐ RCMP may contact Search and Rescue to support in the search. RCMP or Victim Services will ensure there is a point of contact that may stay with the family or loved ones

WHAT TO DO DURING THE SEARCH

- ☐ Stay at home
- ☐ Check your property every 30 minutes
- ☐ Engage with other supports, such as family and friends to either help with the search or to stay with the person who is waiting
- ☐ Look for missing items such as grocery bags, purse/wallet or transit pass
- ☐ If the missing person returns home, contact the RCMP non-emergency line and let them know by calling 403-932-2211

RESOURCES THAT CAN HELP WHILE WAITING

Waiting for someone to be found can be a stressful experience. The stress will continue for some time, even after the person is found.

- ☐ It is important you take care of yourself. Having the opportunity to talk with someone can be very helpful
- ☐ Talk with a close friend, a counsellor you may know or someone in your faith community
- ☐ Call 2-1-1 to get support available 24 hours a day

REUNITING AND NEXT STEPS

Reuniting with the person who was missing is an important step. The experience has been stressful and everyone is likely to be anxious.

- ☐ **Provide warm, dry clothing** – especially in cold, wet weather
- ☐ **Provide reassurance** – let them know you are happy to see them
- ☐ **Address medical issues** – a visit to the doctor may be necessary
- ☐ Use the list of resources on page 26 to find appropriate support for yourself and for the person who was missing

Resources

Essential Numbers for Seniors

2-1-1

For information on community and government agencies/services

A free, confidential, multilingual, 24 hour information and referral system connects Albertans to thousands of community and social services available across the province. It is accessible by:

- Calling 2-1-1
- Texting "INFO" to 2-1-1
- Live chat or search via ab.211.ca

8-1-1

For general health information and nurse advice

Free tele-triage and health advice run by Alberta Health Services. 8-1-1 services include:

- Symptom-based nurse triage and health information
- System navigation
- Dementia advice service
- Central access to specialized services
- Referrals to clinical services including specialized medication advice and dietitian services

Available 24 hours a day, 7 days a week.

9-1-1

For life-threatening emergencies

This phone line is for assistance in medical, fire and police emergencies *only*. The caller gets connected to the dispatch office which can send emergency responders to the caller's location to address the emergency.

9-8-8

Suicide Line

Other Essential Services for Seniors

24-hour Family Violence Information Line

310-1818

Alzheimer Calgary

403-290-0110 | alzheimercalgary.ca

Alzheimer Society of Alberta & Northwest Territories

1-866-950-5465 | alzheimer.ca/ab

Assisted Living Alberta Home Care

403-943-1920

Big Hill Haven

403-796-6564 | bighillhaven.com

Offers support to adults, with or without children, experiencing abuse. They provide safe shelter spaces, outreach support, education, information, referrals, resources, safety planning, risk assessment and advocacy

Caregivers Alberta

1-877-453-5088 | caregiversalberta.ca

Cochrane Family & Community Support Services (FCSS)

403-851-2250

Cochrane Non-emergency Police Number

403-932-2211

Fear is Not Love

403-234-7233 | fearisnotlove.ca

Domestic violence and abuse helpline.

Protections for Persons in Care

1-888-357-9339
alberta.ca/protection-for-persons-in-care

Report and prevent abuse of adults receiving care from service providers identified in the Protection for Persons in Care legislation

Unison 24/7 Elder Abuse Resource Line

403-705-3250

For additional resources and supports see the Cochrane and Area Older Adult Resource Guide:

- ☐ Pick up a guides at FCSS: 209 Second Ave. W
- ☐ Download a digital copy:

If you see someone reported as missing or looks lost

A L E R T

The goal is to safely reunite the vulnerable missing person with their family, while not putting anyone else at risk. If you see a person who has been listed as missing, call 9-1-1 and follow their directions. Getting help is important.

If you see someone who looks lost or confused and you feel comfortable, follow the steps below:

Approach

- Smile, identify yourself and let them know that you would like to help them get to where they need to be
- Ask if they need help
- Speak slowly and calmly; ask simple "Yes" or "No" questions; one question at as time
- Wait 15 – 30 seconds for a response

Listen

- Avoid confrontation or argument
- Listen for key words or phrases that will help
- Be aware of their tone of voice and your tone of voice

Engage

- Use good nonverbal communication—smile
- Make eye contact and approach from the front
- Stay with the person until help arrives

React

- Getting help is important
- "Call 9-1-1" and let them know where the person is
- Stay on the line with the communication officer and follow their directions

Talk

- If your attempt to approach them is unsuccessful, back away and give the person space. If possible stay within eyesight until help arrives
- After the situation is resolved you may feel upset or want to talk with someone. Help is available 24/7 by calling 2-1-1

Community Partners

Alzheimer Calgary

Bethany Cochrane

Calgary Missing Older Adult Resource Network (CMOARN)

Carya

Cochrane & Area RCMP

Cochrane Family & Community Support Services

Cochrane Search & Rescue

Dementia & Other Therapies/ Services Committee

Dementia Network Calgary

Recovery Alberta

Southern Alberta Regional Victim Serving Society

Town of Cochrane

FUNDED BY:

Town of Cochrane

Cochrane Family & Community Support Services

Rocky View County Family & Community Support Services

Notes

Notes

We welcome your feedback on this valuable resource.
To provide comments or for any questions, please visit
cochrane.ca/seniors



For more information please visit
cochrane.ca/seniors