



Dublin International Study Centre

Learner's Whereabouts Policy

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Learner's Whereabouts Policy

Section One: Purpose

1. The purpose of this policy is to establish a robust and transparent framework for monitoring, responding to, and recording learner absences, campus departures, and general whereabouts, particularly for learners under the age of 18, enrolled in the International Foundation Year (IFY) programme at DISC.
2. This policy underpins DISC's legal, educational, and ethical responsibility to:
 - Ensure the health, safety, and welfare of all learners.
 - Meet safeguarding duties for minors under the Children First Act 2015 and relevant Tusla guidance.
 - Comply with the QQI Core Statutory Quality Assurance Guidelines (2016) and the ELE Code of Practice (2022), with specific focus on learner welfare, safeguarding, and attendance monitoring.
 - Support immigration and visa compliance, including timely response to prolonged or unexplained absences.
 - Promote a culture of trust, accountability, and shared responsibility among learners and staff in maintaining a safe learning environment.

Section Two:

3. This policy outlines procedures to be enacted when a learner's whereabouts is unknown, and they are not contactable through standard communication channels.
4. Such procedures are triggered under the following conditions:
 - Any learner (regardless of age) who is believed to be at increased risk of significant harm, including learners:
 - With disclosed mental health concerns or known vulnerabilities;
 - Who are less able to protect themselves due to age, disability, learning needs or a known safeguarding history.
 - Any learner under the age of 18 who has missed two consecutive contact points (e.g. classes, tutorials, or scheduled check-ins), where the absence is identified on the morning of the third day, or on the first working day following a weekend.

Section Three:

5. Certain learners may be more vulnerable to harm or less able to protect themselves and therefore require enhanced monitoring and safeguarding measures under this policy.

Where such learners have unexplained absences or their whereabouts are unknown, this may trigger early intervention or prompt escalation in line with safeguarding procedures.

Indicators of Increased Risk

6. The following characteristics or circumstances may indicate that a learner is at increased risk of harm:

- The learner is under 18 years of age.
- The learner has a diagnosed disability, learning difficulty, or physical or mental health condition.
- The learner exhibits signs of disordered thinking, including delusional beliefs or auditory/visual hallucinations.
- The learner has a known history of self-harm, suicidal ideation, or suicide attempts.
- The learner is experiencing housing instability or homelessness.
- The learner is a potential risk to the learner's wellbeing associated with substance abuse.
- The learner has a documented pattern of repeatedly going missing or absconding from care/supervision.
- The learner is receiving welfare support for domestic abuse, exploitation, or other safeguarding-related risks.
- The learner is suspended or under investigation for gross misconduct or serious behavioural concerns.
- The learner is known to associate with individuals or peer groups involved in high-risk or exploitative behaviours, including:
 - Grooming,
 - Child Sexual Exploitation (CSE),
 - Child Criminal Exploitation (CCE),
 - Human trafficking,
 - Forced marriage,
 - Female Genital Mutilation (FGM),
 - Modern slavery.

Section Four: Professional Judgement and Risk Assessment

7. The indicators outlined in this policy are not exhaustive. Staff are required to exercise professional judgement and apply a safeguarding-first approach when assessing whether a learner may be at increased risk of harm. Risk should be understood as dynamic and may change over time depending on the learner's circumstances,

behaviour, or external factors.

8. In forming a risk assessment, staff should consider the overall context of the learner and take account of any combination of factors, including but not limited to the following:
 - Recent or unexplained changes in behaviour, emotional wellbeing, engagement, attendance, or appearance, including withdrawal, distress, agitation, or sudden disengagement from usual activities;
 - Background or contextual risk factors, including those associated with the learner's home country, cultural background, migration or asylum status, recent relocation, separation from family, or limited local support networks;
 - Disclosures or emerging information relating to personal, family, financial, housing, or relationship circumstances that may increase vulnerability or reduce the learner's ability to protect themselves;
 - Known engagement with external agencies or statutory services, such as Tusla, the HSE, An Garda Síochána, social services, or voluntary support organisations, where this indicates existing or previous safeguarding, welfare, or protection concerns.
9. Where concerns arise, staff should not seek to investigate independently but should record relevant observations and escalate concerns promptly in accordance with DISC's safeguarding procedures and through the Designated Safeguarding Lead (DSL).

Section Five: Institutional Responsibility

10. DISC has a responsibility to identify, assess, and monitor learners who are deemed to be at increased risk of harm, in line with its safeguarding obligations. This responsibility is ongoing and requires coordinated action across relevant academic and support functions.
11. This includes, but is not limited to:
 - Ensuring that relevant staff are appropriately informed on a need-to-know basis, including Academic Management, Welfare Officers, Student Support staff, and other designated personnel, while maintaining confidentiality and data protection requirements.
 - Recording and maintaining accurate documentation of identified risk indicators, concerns, actions taken, and outcomes as part of the learner's welfare and safeguarding records, in accordance with institutional record-keeping and data protection policies.
 - Adopting a precautionary and risk-averse approach, whereby staff err on the side of caution in situations of uncertainty and prioritise learner safety over procedural delay or evidential thresholds.
12. Where a learner is identified as being at increased risk, enhanced safeguarding and monitoring measures may be implemented proportionately and reviewed regularly. These may include:

- Closer monitoring of attendance and engagement, including early identification of missed contact points or patterns of disengagement.
 - More frequent welfare check-ins or reviews, conducted by appropriate staff to assess wellbeing, provide support, and identify emerging concerns.
 - Lower thresholds for triggering the Missing Student Protocol, ensuring that unexplained absences or loss of contact are escalated promptly.
 - Referral to internal or external support services, including statutory safeguarding agencies or specialist support organisations, where this is considered necessary to protect the learner's welfare.
13. All actions taken under this section should be proportionate, documented, and subject to regular review, with oversight from the Designated Safeguarding Lead (DSL).

Section Six: When Is a Learner Deemed to Be Missing?

14. A learner is deemed to be missing when their whereabouts are unknown, they are unreachable, and their absence is unexplained. The threshold for deeming a learner missing depends on their risk profile and age.

Learners at Increased Risk of Harm (Any Age)

15. Learners at Increased Risk of Harm (Any Age).
16. A learner of any age who has been identified as being at increased risk of harm (as defined in the preceding section of this policy) will be deemed missing if any one of the following applies:
- They fail to attend a scheduled or agreed appointment (e.g. welfare check-in, tutorial, or meeting with a support or safeguarding officer) without prior notice on the same day; and/ or
 - They are recorded on the Missed Contact Report as having:
 - Not attended any scheduled classes.
 - Not been granted an authorised absence; and
 - Not had any other recorded contact or interaction with staff on the previous working day.
17. Due to their identified risk profile, these learners warrant immediate concern and prompt escalation, and action may be required after a single missed contact point.

Other Learners Under 18 Years of Age

18. Any learner under the age of 18 who is not classified as being at increased risk of harm will be deemed missing where:
- They appear on the Missed Contact Report as having unexplained absences for

two consecutive working days; or

- The absence is identified on a Thursday or Friday, in which case the threshold is reduced to one working day, to avoid delays in welfare checks over the weekend.

19. This reflects DISC's heightened duty of care toward minors and ensures a proactive response where patterns of unexplained absence emerge.

Adult Learners (18+) and Confidentiality

20. Learners aged 18 or over are legally adults and, under normal circumstances, have the right to decide who is informed about their whereabouts or personal matters.

21. There is no automatic requirement to notify parents, guardians, or third parties when an adult learner is missing unless:

- The learner has explicitly provided prior consent for such disclosure; or
- There is a credible safeguarding concern where sharing information may help prevent significant harm.

22. In some cases, contacting family members may be inappropriate or unsafe, including where there is known estrangement or a risk of abuse, coercion, or control.

Safeguarding Exceptions to Confidentiality

23. Where a safeguarding concern exists, such as risk of self-harm, exploitation, abuse, neglect, trafficking, or other serious harm, DISC's duty to protect the learner takes precedence over confidentiality.

24. In such cases:

- The Designated Liaison Person (DLP) or Deputy DLP has the authority to share relevant information in line with:
- The Children First Act 2015; and
- Tusla's National Guidance for the Protection and Welfare of Children.
- Information may be shared, where necessary and proportionate, with:
- An Garda Síochána.
- Tusla (Child and Family Agency).
- The HSE.
- Emergency services.
- Named family members or guardians, where appropriate and not contraindicated.

25. Such disclosures must be based on a genuine and reasonable belief that:

- Significant harm has occurred.

- Significant harm is likely to occur; or
 - Sharing information may help prevent that harm.
26. This approach is consistent with Irish GDPR implementation guidance, which confirms that data protection does not override safeguarding obligations.

Documentation and Accountability

27. Any decision to share information or breach confidentiality must:
- Be made by the DLP or Deputy DLP based on all available information.
 - Be necessary, proportionate, and clearly justified on safeguarding grounds; and
 - Be fully documented, including:
 - The rationale for the decision.
 - What information was shared.
 - With whom the information was shared and why.
 - The date, time, and circumstances of disclosure.

Section Seven: Action to Be Taken When a Learner's Whereabouts Are Unknown

28. Any concern regarding a learner whose whereabouts are unknown, particularly learners under 18 or those identified as being at increased risk of harm, must be treated seriously and managed through a structured, staged response. All actions must be consistent with Irish safeguarding and child protection legislation and national guidance.
29. Throughout all stages, staff must:
- Act promptly but proportionately, avoiding unnecessary alarm in the early stages where appropriate.
 - Prioritise the safety, privacy, and dignity of the learner.
 - Comply with relevant national guidance, including Children First and the Garda.
 - Missing Persons Protocol.

Stage One - Immediate Information Gathering

30. The staff member who identifies the concern must act without delay to establish whether there is an explanation for the learner's absence.

1. Check internal systems for recent activity:

- Learner engagement on the VLE or Microsoft Teams.
- Recent email or message responses.
- Attendance records or recent classroom participation.

2. Consult relevant staff:

- Has the learner reported illness, travel, or other planned absence?
- When and where was the learner last seen or contacted (in person or online)?
- Were there any recent concerns about the learner's mental or emotional wellbeing?

3. Review safeguarding and welfare records:

- Check the Welfare Tab or equivalent records for flagged vulnerabilities.
- Identify any known risk indicators (e.g. mental health concerns, housing instability, safeguarding history).

4. Make discreet enquiries where appropriate:

- Check with peers, housemates, or accommodation staff, ensuring confidentiality is maintained.
- Where applicable, discreetly check communal or shared areas within DISC-affiliated accommodation.

5. Attempt direct contact:

- Call, text, and email the learner using all known contact details, including personal email.
 - Leave a voicemail and send a clear message stating that DISC is concerned and outlining next steps.
31. If at any point new safeguarding concerns or increased risks are identified, the matter must be immediately escalated to the Designated Liaison Person (DLP) or Deputy DLP.
 32. If the learner remains uncontactable, or if contact is made but safeguarding concerns persist, proceed to Stage 2 without delay.

Stage Two – Escalation to the Designated Liaison Person (DLP)

33. The staff member must provide the DLP or Deputy DLP with a full briefing of all actions

and findings from Stage 1.

34. The DLP/Deputy will then:

- Conduct a safeguarding risk assessment, taking account of the learner's age, vulnerability, and circumstances.
- Determine whether the threshold has been met for external reporting or intervention.
- Decide on the appropriate escalation pathway, including who may be contacted and in what order.

Stage 3 – External Contact and Reporting

35. Under the direction of the DLP/Deputy, and depending on the learner's age and risk profile, the following actions may be taken.

For learners under 18:

- Contact the designated guardian.
 - Notify emergency contacts, trusted contacts, or next of kin.
 - Inform the learner's agent (where applicable) and request assistance.
 - Request support from DISC partner staff or accommodation providers to confirm whether the learner has been seen.
 - Where appropriate and safe, request peers or trusted learners to check social media activity.
36. Where safeguarding barriers exist (e.g. estrangement, risk of forced marriage, coercion, or control), all actions must follow Children First procedures.

Where whereabouts remain unknown or risk is confirmed:

- Report the learner as a missing person to An Garda Síochána.
 - Cooperate fully with Garda procedures and information requests.
 - The DLP must notify the Centre Director immediately.
 - Parents/guardians and relevant agents must be informed that the learner is formally considered missing.
37. Note: Under the Children First Act 2015, failure to report known or suspected risks may result in legal liability. All staff are required to cooperate fully with statutory safeguarding obligations.

Stage 4 – Learner Located or Makes Contact

38. Where the learner is located or re-establishes contact:

1. Ensure immediate welfare:

- Conduct a wellbeing check.
- Arrange medical, mental health, or safeguarding referrals where necessary.

2. Notify relevant parties:

- An Garda Síochána (if involved).
- Any external agencies previously contacted.
- The Centre Director.

3. Conduct a return-to-study or return-from-absence meeting:

- Explore the reasons for the absence.
- Identify any underlying welfare or safeguarding concerns.
- Agree a support and monitoring plan to reduce the risk of recurrence.

39. The DLP/Deputy must complete a confidential incident report documenting actions taken, decisions made, and outcomes.

Stage 5 – Learner Does Not Return or Remains Uncontactable

40. If the learner remains uncontactable following escalation.

- The DLP/Deputy must update the Centre Director, who will activate DISC's Critical Incident Procedure.
- The case will continue to be managed as an active safeguarding matter, with:
- Ongoing engagement with An Garda Síochána.
- Continued involvement of Tusla where the learner is under 18.
- Internal review and oversight by safeguarding and quality assurance teams.

Section Eight: Review and Quality Assurance

41. This policy will be subject to formal review on an annual basis to ensure it remains current, effective, and aligned with DISC's safeguarding obligations, quality assurance framework, and relevant legislative and regulatory requirements.

42. An earlier review may be initiated where necessary, including (but not limited to) the following circumstances:
- Changes to Irish safeguarding, child protection, or education legislation, including amendments to the Children First Act 2015, GDPR implementation guidance, or related statutory frameworks.
 - Updated guidance or requirements issued by regulatory or oversight bodies, including QQI, the ELE Code, or other relevant national or sectoral authorities.
 - Significant safeguarding incidents, near-misses, or patterns of concern that indicate the need for policy clarification, strengthening, or procedural amendment.
 - Findings or recommendations arising from internal audits, safeguarding reviews, external inspections, or quality assurance processes.
 - Operational feedback from staff, learners, or safeguarding roles indicating gaps, ambiguity, or implementation challenges.
43. The review process will include:
- Consideration of incident data, trends, and outcomes relating to missing learners and safeguarding interventions.
 - Consultation with relevant stakeholders, including the Designated Liaison Person (DLP), safeguarding officers, academic and student support staff.
 - Assessment of the policy's effectiveness in practice, including staff understanding, training needs, and compliance with procedures.
44. Any amendments to the policy will be:
- Approved through DISC's governance and quality assurance structures.
 - Communicated clearly to all relevant staff.
 - Supported by updated training or guidance where required.
45. A record of reviews, amendments, and approvals will be maintained in accordance with DISC's document control and quality assurance procedures.

Document Control

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