



**The Timothy Montoya Task Force: To Prevent Children From Running Away From Out-Of-Home Placement | Meeting 6**

*Meeting Minutes*

June 14th, 2023, 8:00 am-10:00 am Virtual Meeting (Zoom)

Facilitators: Keystone Policy Center (Trace Faust & Doris Tolliver)

Members: See Appendix A

<p>Welcome &amp; Approval of Minutes</p>	<p>After member welcome, Task Force Chair Stephanie Villafuerte approved minutes from the May 3rd, 2023 meeting. The motion for approval was provided by Kevin Lash and was seconded by Vice-Chair Beth McNalley. This motion was supported by 13 present Timothy Montoya Task Force members with 0 abstentions.</p>
<p>Directive Review</p>	<p>Directives for meeting discussion:</p> <ul style="list-style-type: none"> <li>● Identify and analyze behaviors that constitute running away from out-of-home placement, analyze differences between runaway behavior and age-appropriate behaviors outside of the home or out-of-home placement, and identify behaviors that should lead to a person or facility filing a missing person report about a child. (See C.R.S. 19-3.3-11(5)(c))</li> <li>● Analyze best practices statewide and nationally for preventing and addressing runaway behavior, including identifying methods to deter children from running away from out-of-home placement. (See C.R.S. 19-3.3-11(5)(f))</li> <li>● Analyze how entities responsible for the care of children who run away from out-of-home placement can coordinate a thorough and consistent response to runaway behaviors. (See C.R.S. 19-3.3-11(5)(g))</li> </ul> <p>Referencing a previous data presentation, a Task Force member detailed the importance of including peer pressure as an influence for youth who run. Trace Faust and Task Force Chair Stephanie Villafuerte share their gratitude for the comment and will ensure this point will be reflected in the minutes. Villafuerte also highlights Task Force members Dr. Renee Marquardt, Kevin Lash, and Elizabeth Montoya for their consistent sharing of their nuanced expertise for the benefit of the Task Force.</p>
<p>National Research</p>	<p>Task Force Chair Stephanie Villafuerte presented informal research regarding criteria used by additional states when developing response protocols for children and youth who run away from care. This information can be found <a href="#">HERE</a>. Trace Faust invites Task Force members to share their input on the data presented by Villafuerte. All comments are individual and not attributed to the Task Force.</p> <ul style="list-style-type: none"> <li>● Absconder Units are overseen and paid by whom?             <ul style="list-style-type: none"> <li>○ Task Force Chair Stephanie Villafuerte shares it is under the Department of Human Services</li> </ul> </li> <li>● Could absconder units be implemented regionally to help the smaller counties?</li> <li>● Absconder Unit research was mentioned by multiple members</li> <li>● Prevention is intervention</li> <li>● Some members share difficulty in “ranking” youth who run with risk levels as they are all at high risk for harm</li> <li>● Children should be treated equitably to ensure consistent and long-lasting change. A member shares their personal experience and highlights how youth can develop habits of running in which parents can determine if the current run is a break to cool off or a true run. This should not be a methodology used by service providers.</li> </ul> <p>Villafuerte invited Vice Chair Beth McNalley to discuss the High-Risk Victim Youth Identification Tool that is currently utilized (also available <a href="#">HERE</a>) All comments are individual and not attributed to the Task Force.</p>



	<ul style="list-style-type: none"> <li>• The theme of training as a barrier keeps coming up. This is an important theme for the Task Force to note.</li> </ul>
Survey Responses	Trace Faust outlines and reviews the pre-meeting survey summary ( <a href="#">HERE</a> ). No objections to meeting summary.
Large Group Debrief	<p>Task Force members participated in large group breakout discussions to review and disseminate information heard today. Doris Tolliver invites the two breakout groups to share their findings: Task Force members entered their thoughts into a <a href="#">Note Catcher</a> and verbally shared them back to the larger group. Highlights shared from the breakout groups are as follows:</p> <p>Group 1, represented by Task Force member Lynette Overmeyer, shared:</p> <ul style="list-style-type: none"> <li>• For Immediate Response <ul style="list-style-type: none"> <li>○ Three or more officers were looking.</li> <li>○ Age 10-11</li> <li>○ 11 years and younger should be a priority</li> <li>○ Life-saving medications (diabetes, seizure, heart medication)</li> <li>○ Medical treatments (dialysis)</li> <li>○ Psychotropic medications</li> <li>○ Recent or current traumas (example: recently bullied/victimized )</li> <li>○ Suicidal ideation</li> <li>○ Historical victimization (HT; drug courier)</li> <li>○ IDD</li> <li>○ Social Media Responsiveness</li> <li>○ Who is on the youth's "team?"</li> </ul> </li> <li>• Moderate Response (define: At least one agency looking for a child. ) <ul style="list-style-type: none"> <li>○ As a parent, this criteria doesn't apply. Cannot see a "moderate circumstance."</li> <li>○ Struggle with age categorization. If I have to choose; teen years. Other factors could change the response type.</li> <li>○ -Other medications (non-lifesaving)</li> <li>○ -Peer Pressure; copycat behaviors.</li> </ul> </li> <li>• Non-Emergent Response <ul style="list-style-type: none"> <li>○ Group was not fond of this category</li> <li>○ Age 18 to 21</li> </ul> </li> </ul> <p>Group 2, represented by Task Force member Beth McNalley shared:</p> <ul style="list-style-type: none"> <li>• For Immediate Response <ul style="list-style-type: none"> <li>○ Under 12</li> <li>○ Immediate medication/life-threatening w/out treatment, IDD-child incapable of self-protection</li> <li>○ Addiction drug use (fentanyl/meth)</li> <li>○ Suicidal homicidal ideation</li> <li>○ Identified high-risk for exploitation/HT (MDT)</li> <li>○ Trauma response</li> </ul> </li> <li>• Moderate Response <ul style="list-style-type: none"> <li>○ 12-15</li> <li>○ Food allergy</li> <li>○ IDD capable of self-protection</li> <li>○ Self-harm</li> </ul> </li> <li>• Non-Emergent Response <ul style="list-style-type: none"> <li>○ 15-17</li> <li>○ ADHD</li> </ul> </li> </ul>



	<ul style="list-style-type: none"><li>○ Experimental drug use</li></ul>
Public Comment	<p><i>Pam Treloar-</i> <i>"From a provider experience, we have had law enforcement tell us that if the teen client has run several times and comes back on their own, the police may not see it as "immediate" and tells us to call back 2 hours later. As a provider, we disagree. By the time the youth is in residential care, they have high-level needs and even if a "typical, short" run occurs, there is still a risk. Chronological age is so different than developmental age too though. Updated clinical assessments/information is available to name the level of risk. Thank you"</i></p>
Next Steps and Adjourn	<p>Task Force Chair Stephanie Villafuerte shared her appreciation for the continued dedication of the Task Force and adjourned the meeting at 10:00 am</p>

**Appendix A:**

Kelly Abbott (Departed 9:30)  
Ashley Chase  
Jenna Coleman  
Brian Cotter  
Jenelle Goodrich (Departed 8:30)  
Kevin Lash  
David E. Lee  
Beth McNalley  
Brandon Miller  
Becky Miller Updike  
Elizabeth Montoya  
Lynette Overmeyer  
Stephanie Villafuerte

**Appendix B:**

Adrienne Palazzo  
Laurie Burney  
Lauren Showers  
Micheal W. Teague  
Pam Treloar