

## Timothy Montoya Task Force

### Meeting Six Pre-Meeting Survey Responses

#### Overview

The Timothy Montoya Task Force is currently focusing its attention on the following directives:

*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))*

*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))*

*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))*

During the next three meetings, the Task Force will work to develop prevention and intervention strategies for youth who run from out of home placements. These strategies will form the basis of our forthcoming task force recommendations.

Below are the submitted responses to the pre-meeting survey distributed to members.

**What behaviors or circumstances are distinct to a youth or child running away from out-of-home care -- including RCCFs and foster homes -- as compared to “age appropriate” behaviors that might be considered common among all youth?**

- “They may be more independent or street savvy. They don't have emotional bonds to the home. They are likely at the placement against their own wishes or their view of what is needed.”
- “Behaviors related more to trauma than impulsiveness or teenage social constructs and limit testing. Patterns of putting themselves at higher risk than typical behavior. Being suicidal or homicidal. Significant substance abuse/addiction behaviors. Deviant sexual

behavior or high risk sexual behavior (e.g. with much older partners, domestically violent relationships, being trafficked).”

- “extensive trauma history, substance abuse, vulnerable to victimization”
- “Custody issues, trauma issues, foster parents can not go after them, may not return to same foster home if gone too long (disruption of care)”
- “Youth suffering from trauma or mental health disorders often develop elopement behaviors as a coping tool for stress. It removes them from the immediate stressor, provides the rush or excitement received from knowingly breaking the rules, and becomes their go-to coping skill over time.”
- “Running away has been shown to be a poor problem-solving method in my reading. I suspect it might be an indication of a substance issue, an attachment issue, or other issues better enumerated by clinicians.”

### **How would you define "age appropriate behaviors" for young people who run from care?**

- “This response is truly anecdotal from experience: For older kids it would be to return to family or friends homes; For younger kids it would be to go to public places where they could be safe. I.E large stores, malls, strip malls or public transportation; For younger kids it would be to depart in numbers as a group.”
- “running to spend time with friends”
- “Behaviors related to typical teenage impulsiveness, minor rule breaking, going to see friends or attend events that are typical of a teenager, staying out all night, testing limits, getting angry and needing a break/running for short periods to cool off. Light experimental use of substances, age appropriate consensual sexual exploration.”
- “Leaving as a coping mechanism from stressful situations. Leaving to be with family or friends (supportive/known environment).”
- “I call it "inappropriately appropriate" behaviors (meaning it's inappropriate but not uncommon for that age). Not returning home for a non-foster care youth maybe that they are mad at parents or want to do things restricted and stay at a friends house without permission. Most non-foster care kids do not run away to "live on the streets." Many foster care kids do not care about the foster family because they are not attached to them or are used to being shuttled from one living situation to another. It becomes routine.”
- “Occasional elopement resulting from a major incident with primary caregivers, often with a specific destination in mind. ie :directly to friend or relative where they would be safe.”
- “There is no age in which running away from care is acceptable except in the case of a dire emergency.”

**What youth behaviors should lead to a person or facility to file a missing person's report after a child or youth runs away from care?**

- “The fact the child departs the facility should cause a report. Connecting the child to the circumstance is important and only a report can help that happen.”
- “Anytime a youth leaves a facility without permission and does not return within a couple of hours.”
- “There is a reason to suspect the youth is in certain danger, youth is suicidal or homicidal, or the youth's whereabouts are truly unknown after doing some diligent checking with the professional team, family, etc., for more than 48 hours.”
- “Youth has made statements of hurting themselves or others. In need of immediate medication, reasonable to believe youth is under the influence of serious drugs (i.e: fentanyl, meth). Youth failed to return home (foster home), negative contact. Youth has a history of regularly running away from facilities and not returning, should be reported immediately.”
- “If they are not where they are supposed to be and all attempts at locating them in a rational, appropriate, timely manner have failed.”
- “The minute the child leaves the grounds or the caregiver loses sight of the child, a report should be filed.”
- “Running away when there is reason to believe the youth might or intends to stay away for a more than a short time period.”

**Question Four: What criteria should be used to determine the response to a child or youth who runs away from care?**

- “Age; Physical medical needs (insulin dependent etc); Weather appropriate clothing; Mental health and disabilities (ability to keep self safe in world); Sexual abuse history, propensity for trafficking; Cause for departure; Historical run patterns. (Do they find their way to family/friends...or remain on streets?); Historical experiences after running. (Did they suffer negative incidents/abuse while gone?); If DHS involved, what is the risk if they return to parents?”
- “Any known factors as to why the youth chose to run and if they present an immediate danger to themselves.”
- “Safety assessment, if whereabouts are known, if reasonable belief that trafficking is occurring. Known trauma triggers (e.g. police/lights/sirens or being touched when upset, etc.). Supportive adults or peers as part of the response.”
- “Emergency situations require law enforcement response (under 12, danger to self or others, immediate medication required). Suicidal ideations-mental health clinician.”
- “Age, circumstances prior to leaving, length of time with a facility or foster home, background, mental health/emotional response, living options, intent.”
- “The response should be the same no matter what. Running away should be classified as a behavior that presents a severe threat to the safety of the child, and should bring an

appropriate response. There should never be a time when one elopement is treated less seriously than another.”

- “I have no answer.”

**Question Five: What criteria are less important when determining the response to a child or youth who runs away from care?**

- “Familiarity with city / area”
- “black and white rules like if a run happens for more than 2 hours then X punishment. Better to be individualized for the youth and situation.”
- “Foster family/facility’s inconvenience, time taken to locate, amount of time taken to find them.”
- “Considering 'why' a child runs is less important than the fact that they have gone. All running behavior is high risk, no matter the cause.”
- “I have no answer.”

**Urgent/Emergency Response**

**What are the biggest barriers or frustrations for medical/mental health professionals in making mandatory reports?**

- “Young Age (under 12 years old); Physical medical conditions that could cause death (i.e. insulin dependent); Immediate Mental health concerns such as recent Suicidal ideations; Mental disabilities making it difficult for the child to assess their safety.; Not dressed for dangerous weather”
- “If the youth has been diagnosed with severe depression, schizophrenia, psychosis , under the age of 12yrs.”
- “Suicidal or homicidal ideation, known trafficking, high likelihood of overdose, serious risk of bodily injury (running in subfreezing temperatures with out clothing for example). Regardless of the emergency response, communicating to professionals and family is important.”
- “Under 12, IDD, suicidal with a plan vs just ideations.”
- “Dangerous past behavior, past problems, medical or mental health concerns, legal issues, gang involvement.”
- “All running should elicit an urgent response, but especially youth that have previously expressed suicidal ideation, mood disorders, history of trauma, and under the age of 18”
- “Running away is always an emergency.”

**How would you define an urgent/emergency response?**

- “Immediate and significant efforts to locate the child. RCCF Staff makes efforts to follow or keep track of child until recovery”

- “If the youth has previous history of self harm or has made recent threats of self harm or suicidal thoughts.”
- “Actions necessary to prevent serious harm.”
- “An immediate report and response by law enforcement/mental health coordinated team with law enforcement to ensure the safety of the youth.”
- “Something that will likely lead to serious problems and or consequences.”
- “Physical Intervention, immediate reporting shared with social media and surrounding first response districts.”
- “For our purposes, it boils down to danger, either to the youth or the community.”

**What are appropriate actions to take in circumstances that require an urgent/emergency response?**

- “Law Enforcement Notification; Parent/guardian Notification; In Person searches of areas the child may go or travel through; Public notifications”
- “Notification to law enforcement.”
- “Following a youth and reporting whereabouts to a combined mental health/law enforcement team. Immediate notification of a supportive adult who can help search for the youth. Law enforcement contact with a mental health professional supporting.”
- “Immediate report to law enforcement and DCW. Law enforcement responding immediately, with hopefully the assistance of a mental health clinician support team.”
- “Notification of appropriate parties, active search, communication between parties,”
- “Physical Intervention by those staff trained in TPM holds, locked door quiet rooms if necessary, and immediate access to crisis therapy services.”
- “Reasonable efforts to resolve the situation.”

**Who are the most appropriate entities or agencies to respond to circumstances that require an urgent/emergency response?**

- “RCCF Staff; Local Law Enforcement; CBI for public alerts; Media organizations”
- “Law Enforcement and Human Services”
- “Law enforcement and mental health partnerships, supportive adults that the youth knows”
- “In a perfect scenario, it would be a dedicated trained team engaging with high-risk youth, removing law enforcement from having to respond.”
- “police, social workers, facility/foster families”
- “Facility Staff, on-site Resource Officers, Police”
- “The facility, law enforcement, parents. An all hands on deck response within reason.”

## Moderate Response

**When a youth or child runs away from care, what behaviors, diagnosis or circumstances might prompt a moderate response by professionals?**

- “12 or older in age; No imminent danger due to physical or mental conditions. Left of own free-will but may not be able to provide long term care for self. Is able to seek assistance if needed.”
- “Depression, impulsivity.”
- “Run lasting longer than 24-36 hours, moderate substance use.”
- “Known substance abuse issues.”
- “There is substance abuse issues.”
- “There is evidence that the child is in a safe place or circumstances.”
- “I cannot, based on lived experience, say that any elopement situation should be treated "Moderately"
- “I don’t have an answer.”

**How would you define a moderate response?**

- “Non-exigent in-person search for child utilizing RCCF and law enforcement personnel.”
- “No immediate danger, has left and returned in the past.”
- “High risk behaviors that require intervention to avoid urgent safety situations.”
- “Immediate notification to service providers, to attempt to contact youth who has previously implemented a run safety plan with the youth.”
- “All children should be treated with being located with urgency.”
- “I don’t have an answer.”

**What are appropriate actions to take in circumstances that require a moderate response?**

- “RCCF follows child. Notification and reporting by Law Enforcement.”
- “Notification to Human Services and Parents/Guardian.”
- “Notification of team/family, trying to identify whereabouts, notification to law enforcement in case they come into contact with youth.”
- “Immediate report to Law Enforcement but would not require a law enforcement response. Immediate notification to DCW/service providers to attempt to contact youth and activate safety plan. Immediate notification to family.”
- “I don’t have an answer”

**Who are the appropriate entities or agencies to respond to circumstances that require a moderate response?**

- “RCCF Staff; Parents/Guardians; Local Law Enforcement”
- “Human services and facility staff.”

- “Ideally this is done by a trained team to respond to high-risk youth that partners with DCW.”

### Non-Urgent Response

#### When a youth or child runs away from care, what behaviors, diagnosis or circumstances might prompt a non-urgent response by professionals?

- “Older teen child (15+); No mental or physical impairments; Child who is able to assess their own safety left of own free will in defiance of treatment / plans.”
- “Repeat behavior but returns within the day.”
- “Runs to family or friends whereabouts are known, running to attend an event or participate in a social activity, runs lasting less 36 hours, some light substance use of tobacco, marijuana or alcohol”
- “Previously runs but returns within the day or 24-hours.”
- “All should be taken seriously and search for.”
- “All Elopement Behaviors should be treated with the most urgent response possible.”

#### How would you define a non-urgent response?

- “Documenting event and making notifications to involved adults to help reconnect child to support and services.”
- “No reason for concern or possible danger.”
- “Impulsive driven choices that are more typical for this age group or have less risk (though not 0 risk) than other behaviors.”
- “This requires the youth to be entered into NCIC/CCIC as missing, but there are not any safety concerns that would require an immediate response from service providers or law enforcement.”
- “Unless it is confirmed they are in a safe place and it's just a matter of time to reach them, I think it should always be urgent.”

#### What are appropriate actions to take in circumstances that require a non-urgent response?

- “Law enforcement report. Notifications to parents/guardians.”
- “Notify Human Services and Parents/Guardians with details of the event.”
- “Notification of professional team and family, identify whereabouts, get youth back in placement.”
- “I think reporting and immediate notification to family/service providers should be done in all circumstances.”

#### Who are the appropriate entities or agencies to respond to circumstances that require a non-urgent response?

- “RCCF Staff; Local Law Enforcement; Parent/Guardian.”

- “DHS and parent/guardian”
- “Facility, DHS, family”
- “DCW”