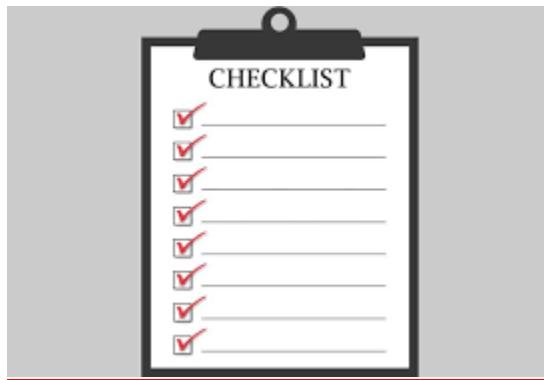


Runaway Missing Protocol



Missing youth are defined as youth missing from home, missing from out-of-home care, or whom are considered to be of a **critical missing** status. Youth are considered to be missing when they are unaccounted for 8 hours or more and their absence cannot be reasonably justified by the youth's age, maturity or emotional capacity and when efforts to locate the youth have been unsuccessful.

Critically Missing Youth are defined as all children ages 11 and under, any youth with significant cognitive, psychological, emotional or physical or medical needs or any youth who is suspected to be involved in high risk situations such as (inappropriate sexual behaviors, victimization, abuse , weapons, etc.), or any youth under the age of 18 and has their own minor child in their custody who is missing from home or out of home care.

This protocol will walk you through what to do:

- **When the Child and Family team becomes aware of runaway behaviors**
 - **When the youth goes missing**
 - **When the youth returns home**

Please utilize the following checklists and ensure progress/provider notes are updated to document your efforts. **All runaway missing protocol tools can be found at:**
<http://wraparoundmke.com/care-coordination/forms>

If you have any questions regarding the protocol, please reach out to your supervisor or Wraparound Consultant, Rhoda Jordan, at 414-810-7767.

At enrollment, or when the Child and Family team becomes aware of runaway behaviors:

_____ Care Coordinator should provide youth and family with **Runaway Missing Toolkit for Youth and Families** and explain what will occur when a youth is missing using the toolkit.

_____ Care Coordinator initiates the ***Information for Youth with a Runaway History*** with the child and family prior to the first Plan of Care Meeting. (Some of this worksheet will need to be completed at the time of the youth's absence). Appropriate team members should receive a copy of this form.

_____ Care Coordinator discusses ***Things to ask myself before I run away*** and brings information to the initial Plan of Care meeting so that it can be incorporated into action steps in the Crisis Plan and Plan of Care. A crisis plan must be developed within the first week of meeting the youth and family to provide support and offer tools to help plan for the youth's safe return. Please use the 'Essential Components of Crisis Planning - Youth Missing from Care' as a reference.

_____ During the development of the crisis plan, Care Coordinator facilitates a discussion about when and who should be notified if youth is missing. This plan must be reviewed at the first and all Child and Family Team Meetings to add additional supports and action steps to plan for a safe return to care.

When the youth is missing:

_____ If youth is missing from home, the parent should file a missing person's report and notify the Care Coordinator. If support is needed the Care Coordinator or designated team member should assist the parent in filing the Missing Person's Report with the local Police Department the same day the child is missing. Resources provided by the care coordinator can provide information to aid in this report and the parent can also contact the National Runaway Missing Safeline at 1-800- RUNAWAY for additional assistance.

_____ If the youth is missing but keeping phone communication via text, phone, social media, etc. - ***maintain judgment free communication, ask if they are safe, if their basic needs being met and what they need from the team to return to care safely.***

_____ Care Coordinator then notifies their supervisor and all other team members to make them aware. If on a court order, Care Coordinator then notifies DMCPS worker and or Human Service Worker. They work together to determine when and what notice they will give to law enforcement and the court. If the designated worker cannot be reached, Care Coordinator should reach out to assigned coverage worker or supervisor as needed.

_____ If the youth is believed to be **Critically Missing**, Care Coordinator notifies Sensitive Crimes at 414-935-7405.

_____ Care Coordinator assists parent if needed in contacting the National Center for Missing and Exploited Children at 1-800-THELOST (843-5678). Review **Case Worker Quick Reference Guide – Missing Child reports to NCMEC**. If the parent does not have custody (legal placement of the child) the designated system partner (DMCPS worker and/or Human Service Worker) or local law enforcement must report the youth missing to the National Center for Missing and Exploited Children at 1-800-THELOST (843-5678)

_____ Care Coordinator should work to document all contacts and follow up within Progress/Provider Notes as soon as possible and completes a Temporary COP according to policy.

_____ Care Coordinator connects with Rhoda Jordan via email at Rhoda.jordan@milwaukeecountywi.gov or phone at 414. 810. 7767 within 24 hours for further problem solving, after consulting with the agency supervisor. If High Risk events are involved, Care Coordinator may also need to speak with Clinical Program Manager Steve Gilbertson or Dr. Steve Dykstra (if youth is High Risk for suicidal behaviors).

_____ Care Coordinator schedules an emergency team meeting within 24 hours. The team explores reasons why the youth might have left, as well as contact information for those people the youth may seek out when missing, or places in the community youth tends to go if this is a pattern. Those contacts could be team members, friends, boyfriends/girlfriends, relatives, former caregivers, biological family members, teachers, community contacts, etc. The team discusses social media the youth may use such as Facebook, Twitter, Instagram, TikTok etc. The parent/guardian or person designated by the parent/guardian can be encouraged to monitor these activities through the youth's friends as well as try to connect with the young person.

_____ Care Coordinator contacts the parent/guardian twice weekly in person and by phone regarding the whereabouts of the youth and to be sure the parent/caregiver has the support they need. More contact should be provided if the situation is critical. Care Coordinator requests that Supervisor become involved if parent/guardian is not communicating with the team members. Supervisor then attempts phone contacts and home visits with the parent/guardian. Team members should also be keeping open lines of communication with the family so they feel supported throughout the process and see meaning in staying connected with the team until the youth returns to care.

_____ Care Coordinator continues to contact all team members once weekly in an attempt to locate the youth. During contacts, Care Coordinator encourages team members to reach out

to youth when possible to encourage their return and discuss options. Supervisors assist with this process as needed.

For Providers: All Providers are a part of the team and are needed to help plan and assist throughout this process until the youth is returned safely. If a Provider is aware of a youth's whereabouts being unknown, they need to connect with the Care Coordinator to ensure notification is made. If child is residing in out of home placement, the placement providers must immediately notify the parent/guardian and Care Coordinator. The placement provider must also file a missing person's report in the county the placement resides.

When the youth returns home:

_____ Child and Family Team members remind one another of the need to be welcoming, as well as actively show concern for the young person's well-being, let them know they were missed.

_____ Youth is provided with food, and an opportunity to rest.

_____ Team member (who has been previously designated during the planning process) ensures that the youth has an immediate medical exam to address any medical, or other high risk issues, that may have occurred while the child was missing. (This should be coordinated with the DMCPS worker if the youth is on a CHIPS order.)

_____ Care Coordinator notifies supervisor and all team members, including systems partners and law enforcement, as well as documents all contacts within progress notes immediately.

_____ Care Coordinator then contacts Clinical Program Manager Steve Gilbertson if youth is suspected to have been victimized, involved in high-risk sexual activities, or exploited while missing. Care Coordinator may also need to contact 220-SAFE and Sensitive Crimes based on discussion with Mr. Gilbertson. Please refer to the Critical Incident Policy, and complete documentation as necessary should this be the case.

_____ Care Coordinator enters a return Temporary Change of Placement per policy.

_____ Care Coordinator informs Program Manager who will withdraw the disenrollment if youth has been disenrolled or placed on the disenrollment list due to the length of time their whereabouts were unknown.

_____ If needed, the Child and Family Team designates someone (DMCPS worker or Human Services Worker if on a court order) to contact the legal parties and request that the CAPIAS be withdrawn if the youth returns without the involvement of law enforcement. If CAPIAS cannot be cancelled, then Care Coordinator assists the youth in connecting with their Public Defender to complete a walk-in, so that it can be cleared.

_____ The Child and Family Team meets within 24 hours to discuss what caused the youth to leave and identify needs, action steps and options for the young person. The Crisis Plan, and Plan of Care if necessary, are updated to clearly identify what team members are doing to ensure the youth's safety and/or prevent this from happening again in the future. The Child and Family Team will revisit this safety issue at each future team meeting and make changes to the plan as needed.

When youth is picked up, and placed in Detention/Shelter/Respite:

_____ Child and Family Team members remind one another of the need to be supportive, as well as actively show concern for the young person's well-being.

_____ Care Coordinator notifies supervisor and all team members, as well as documents all contacts within Progress/Provider Notes immediately. Care Coordinator should share any information about upcoming court hearings generated because of the youth returning.

_____ Team member (who has been previously designated during the planning process) ensures that the youth has an immediate medical exam to address any medical, or other high risk issues, that may have occurred while the child was missing. This may be coordinated with the DMCPS worker if the youth is on a CHIPS order, or with Detention staff if child is placed in Detention.

_____ Care Coordinator then contacts Clinical Program Manager Steve Gilbertson if youth is suspected to have been victimized, involved in high-risk sexual activities, or exploited while missing. Care Coordinator may also need to contact 220-SAFE and Sensitive Crimes based on discussion with Steve Gilbertson. Please refer to the Critical Incident Policy, and complete documentation as necessary should this be the case.

_____ Care Coordinator enters a return Temporary Change of Placement per policy.

_____ The Child and Family Team meets within 24 hours to discuss needs, action steps and options for the youth. The Crisis Plan, and Plan of Care if necessary, are updated to clearly identify what team members are doing to ensure the youth's safety and/or prevent this from happening again in the future. The Child and Family Team will revisit this safety issue at each future team meeting and make changes to the plan as needed. These strategies and responses are presented to the court in future court letters, if required.