



Tennessee Department of Children's Services Protocol for Reporting AWOLS in DCS Group Homes

Supplemental to: DCS Policy 31.2 Responsibilities Regarding Runaways and Escapees

Reporting AWOLS

1. At first sign or report of an AWOL youth (*i.e., alarm sounding, can't locate, call from work or school reporting them missing, etc.*) search the facility and grounds and account for all youth present. Staff should not leave the property of the group home at this time to insure security of the other youth present and to not alarm the neighbors.
2. Identify any missing youth
3. Call local law enforcement (LE) immediately and report the youth(s) missing. Request that LE enter the youth(s) as "*Wanted Persons*" into the **National Crime Information Center (NCIC)** and the **Missing Children of Tennessee (MCOT)** data bases. LE must enter youth into NCIC and MCOT within 2 hours of **taking a missing youth report**. Obtain Wanted/Missing Person Report (W/MPR) and/or NCIC number from LE. Current, clear photographs of the youth should be provided to LE.
4. Local LE may refuse to accept an M/WPR. When unable to resolve the problem with the local LE, report the refusal to the TBI Missing Children Clearing House at **1-800-TBI-FIND (800-824-3463) Statewide**.
5. Notify the Director of the Group Home/Designee who will notify the Central Office Director of Group Homes/Designee.
6. At the earliest moment possible, efforts to contact the parent/guardian will commence via telephone. Every effort shall be made to speak with a parent/guardian as soon as possible but definitely within 24 hours after the incident occurs. Documentation of the effort and contact will be made in the Daily Log and Critical Incident Report. If no contact is made or the parent/guardian cannot be reached within 24 hours, the Group Home Director will be notified in writing as to what attempts were made.
7. Notify the Regional Absconder Recovery **Program** Representative.
8. Notify the FSW by telephone and email.
9. Secure the youth(s) belongings.
10. Complete Part A of form **CS-0705, Absconder-Runaway-Escapee-Recovery Checklist** on the day of the runaway episode and email it to recipients designated on the form.
11. File runaway petition with local court in the county of placement within one (1) workday. If youth is over 18 years of age, an adult Escape warrant must be obtained in the county of placement.
12. If the court refuses to issue a petition or warrant, contact local Regional Legal Counsel for assistance.
13. Take statements from other youth and staff having knowledge of the AWOL.
14. Complete a **Critical Incident Report** in compliance with the guidelines in the **Incident Reporting Manual for YDC's and DCS Group Homes**. CIR must be reviewed by Central Office Director/Designee.

Effective Date: 09/10

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Apprehension or Return of Youth

1. Search the youth and their belongings.
2. Notify the parents.
3. Notify local LE to remove the youth from NCIC/ MCOT and allow for service of the petition/warrant.
4. Notify the Group Home Director/Designee who will notify the Central Office Director of Group Homes/Designee.
5. Notify the FSW by telephone and email.
6. Notify RARPR (Absconder Unit).
7. Immediately implement supervision/treatment protocol.
8. Within 1 (one) business day of notification of apprehension of the youth complete Part B of [CS-0705, Absconder-Runaway-Escapee-Recovery Checklist](#) and email it to recipients designated on the form.
9. Complete form [CS-0296, Notice of Apprehension](#), and submit to Group Home Director for signature and then send to Central Office for review.
10. Update CIR to indicate apprehension.
11. Complete form [CS-0890, Incident Debriefing](#) with youth, parents and significant others involved in the event within twenty four (24) hours of the youth's return to identify why the youth ran away and what can be done to prevent future episodes. Convene placement stability CFTM as soon as possible if needed.
12. A completed *Incident Debriefing* form is faxed to the Director of Treatment within one (1) working day of completion for review.
13. Implement any treatment changes identified in debriefing meeting and/or CFTM.