

# Commonwealth of Virginia Department of State Police



## Virginia Critically Missing Adult Alert Plan

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## **Virginia Critically Missing Adult Alert Plan**

### **1. Purpose**

- a. The Critically Missing Adult Alert Program is an alert system designed to efficiently inform the public of information regarding a missing adult whose disappearance poses a credible threat, as determined by a law enforcement investigation. The threat may be due to disability, mental illness or abduction. The Virginia State Police has established the following standards and procedures by which a local law-enforcement agency shall verify that an adult is a critically missing adult and provide an alert request.

### **2. Definitions**

- a. "Critically missing adult" means an adult (i), including an adult who has a developmental disability, intellectual disability, or mental illness as those terms are defined in § 37.2-100, 18 years of age or older whose whereabouts are unknown, and (ii) whose disappearance (including abduction) poses a credible threat as determined by a law-enforcement agency to the health and safety of the adult and under such other circumstances as deemed appropriate by the Virginia State Police.
- b. "Critically Missing Adult Alert" means the notice of a critically missing adult provided to the public by the media or other methods under a Critically Missing Adult Alert Agreement.
- c. "Critically Missing Adult Alert Agreement" means a voluntary agreement between law enforcement officials and members of the media whereby an adult will be declared missing, and the public will be notified by media outlets, and includes all other incidental conditions of the partnership as found appropriate by the Virginia State Police.
- d. "Critically Missing Adult Alert Program" means the procedures and Critically Missing Adult Alert Agreements to aid in the identification and location of a critically missing adult.
- e. "Media" means print, radio, television, and Internet-based communication systems or other methods of communicating information to the public.

### **3. Criteria for Activation of the Alert**

Each law enforcement agency shall investigate the matter to verify the disappearance or abduction, and eliminate alternative explanations where evidence is lacking. Information must be established to meet the definition of Critically Missing Adult. Also, sufficient information must be available to disseminate to the public to assist in locating the missing adult, suspect, and/or the suspect's vehicle in order to activate the alert.

- a. Elements for Critically Missing Adult
  - i. Any person 18 years of age or older, including persons with a developmental disability, intellectual disability, or mental illness, and;
  - ii. Whose whereabouts are unknown (disappearance or abduction) and;
  - iii. Whose disappearance or abduction poses a credible threat, as determined by law enforcement, to the safety and health of the missing person, or;
  - iv. Based on any other circumstances as deemed appropriate by the Virginia State Police.
- 4. Alert Components
  - a. Virginia Criminal Information Network (VCIN)
    - i. VCIN is a telecommunication system which provides 24-hour access to Virginia law enforcement agencies to enter and query criminal justice information, including information concerning missing persons.
  - b. Virginia Missing Persons Clearinghouse (VMPC)
    - i. The Clearinghouse is operated by the Virginia State Police and provides the public with information regarding missing persons, including critically missing adults, through the Virginia State Police Active Alerts webpage (<https://vsp.virginia.gov/active-alerts/>). Additionally, the VMPC utilizes Everbridge software, a public warning platform, to inform the media and other stakeholders.
- 5. Activation Procedure
  - a. Enter the missing adult into the Virginia Criminal Information Network (VCIN) and the National Crime Information Center (NCIC) missing person files.
  - b. Complete the SP-67 (Virginia Missing Persons Information Clearinghouse Report) and email it to the Virginia Missing Persons Clearinghouse at [vamissing@vsp.virginia.gov](mailto:vamissing@vsp.virginia.gov).
  - c. Complete the Virginia Critically Missing Adult Agency Activation Request Form.
    - i. Should you have any questions or concerns about whether your situation is appropriate for a Critically Missing Adult Alert, you may contact the duty sergeant at 804-674-2026.

- ii. Attach a current photograph of the missing adult and/or suspect.
  - iii. Attach the completed SP-67.
  - iv. Designate a department contact with information who is available to discuss the alert request (include a name and telephone number).
- d. Email the Virginia Critically Missing Adult Agency Activation Request Form, the SP-67 and any photographs to the duty sergeant at [dutysgthq@vsp.virginia.gov](mailto:dutysgthq@vsp.virginia.gov)
  - i. Contact the duty sergeant at 804-674-2026 to confirm receipt of the packet information, or if you have any difficulties transmitting information.
- e. As additional information becomes available, including photographs, the agency shall contact the duty sergeant immediately with updates so the information can be disseminated appropriately.

## 6. Internal Approval and Process

- a. Upon receiving a request from a law enforcement agency to activate a Critically Missing Adult Alert, the duty sergeant will review the information to ensure the criteria is met.
- b. The duty sergeant will notify the VCIN First Sergeant, VCIN Administrative Sergeant, or VCIN Lieutenant; who will evaluate the request and determine if a Critically Missing Adult Alert should be activated. The VCIN First Sergeant, VCIN Administrative Sergeant, or VCIN Lieutenant will notify the Duty Sergeant of the decision.
- c. The duty sergeant will notify the public relations manager or their designee of the alert.
- d. The duty sergeant will create an Alert Slide flyer and upload to departments' website (<https://vsp.virginia.gov/active-alerts/>) indicating the active alert, and then send the corresponding Everbridge Alert Broadcast.
- e. Once the Critically Missing Adult Alert has been cancelled, forward the following paperwork to the Virginia Missing Persons Clearinghouse for record keeping through appropriate channels:
  - i. Activation Form
  - ii. SP-67
  - iii. After Action Report
  - iv. Any other notes/documentation pertaining to the alert

7. Cancellation Procedure

- a. Upon any resolution of the critically missing adult case, immediately notify the duty sergeant at [dutysgthq@vsp.virginia.gov](mailto:dutysgthq@vsp.virginia.gov) to cancel the request.
- b. Contact the duty sergeant by phone to confirm the receipt of the cancellation request at 804-674-2026.

8. Contact Information (Fax, Email)

a. Virginia Missing Persons Clearinghouse Coordinator

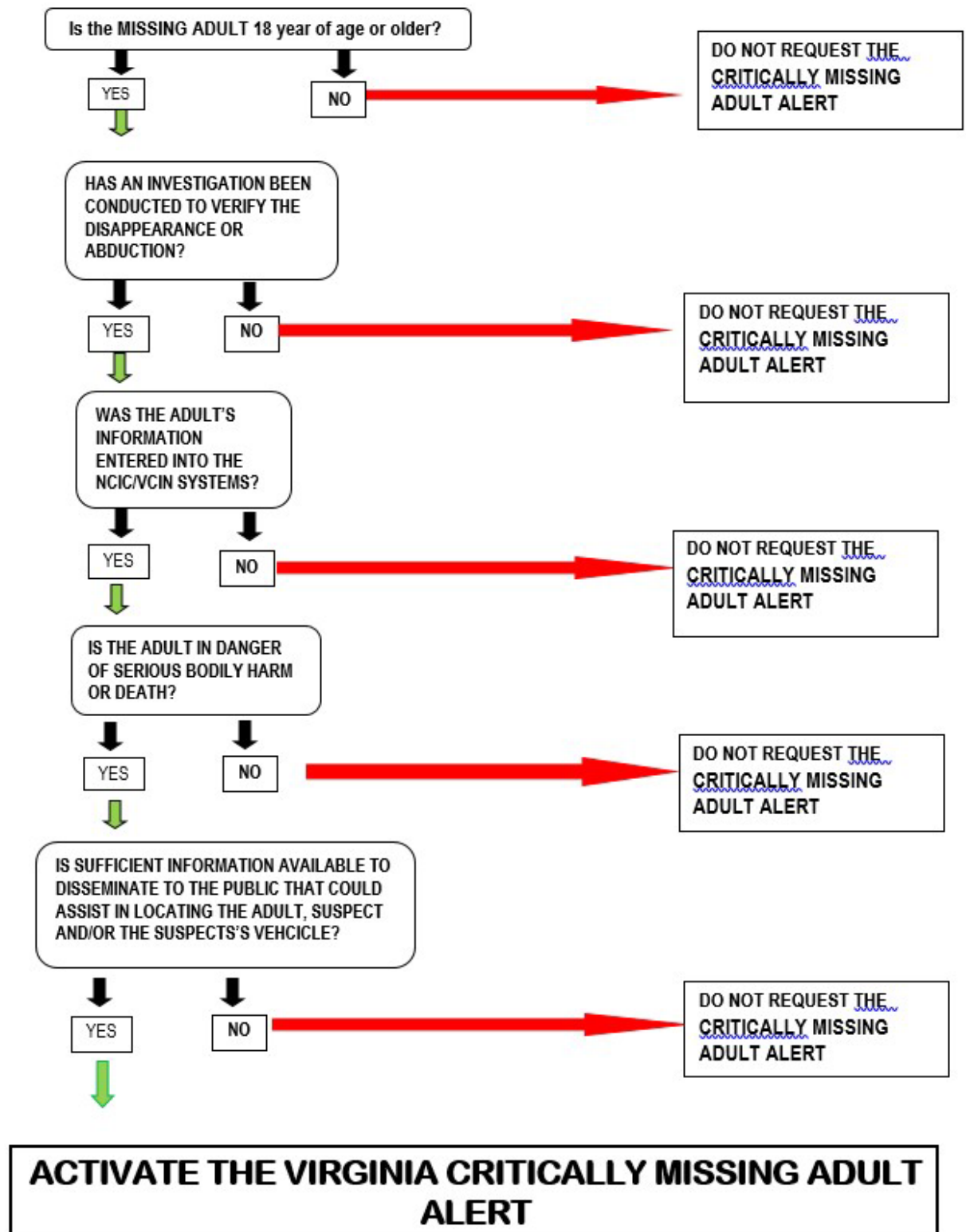
- i. Telephone: 804-674-2026
- ii. Email: [vamissing@vsp.virginia.gov](mailto:vamissing@vsp.virginia.gov)

b. Duty Sergeant

- i. Telephone: 804-674-2026
- ii. Email: [dutysgthq@vsp.virginia.gov](mailto:dutysgthq@vsp.virginia.gov)



9. Activation Process Flowchart:



## 10. Forms

### a. SP-67

## VIRGINIA MISSING PERSON INFORMATION CLEARINGHOUSE REPORT

INVESTIGATING OFFICER _____ _____		DATE REPORTED: _____ DATE ENTERED VCIN/NCIC: _____ VIC NO: _____	
PART I			
*Agency Submitting Report: _____		*ORI No: _____	
*Last Name _____	*First Name _____	Middle Name _____	Suffix _____ *Sex _____ *Race _____
Place of Birth: _____		*Date of Birth: _____	
*Height: _____ Ft. _____ In.	*Weight: _____ Lbs.	*Eye Color <input type="checkbox"/> Maroon <input type="checkbox"/> Black <input type="checkbox"/> Blue <input type="checkbox"/> Gray <input type="checkbox"/> Hazel <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Multicolor <input type="checkbox"/> Pink <input type="checkbox"/> Unknown	*Hair Color <input type="checkbox"/> Black <input type="checkbox"/> Blond <input type="checkbox"/> White <input type="checkbox"/> Sandy <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Red
Complexion <input type="checkbox"/> Albino <input type="checkbox"/> Dark <input type="checkbox"/> Olive <input type="checkbox"/> Ruddy <input type="checkbox"/> Sallow <input type="checkbox"/> Yellow <input type="checkbox"/> Lt. Brown <input type="checkbox"/> Med. Brown <input type="checkbox"/> Dark Brown		Scars, Marks, Tattoos and Other Characteristics _____	
Fingerprint Classification: _____		Social Security Number: _____	
Operator's License Number _____	O.L. State _____	Date of Expiration _____	DNA <input type="checkbox"/> Yes <input type="checkbox"/> No Location of DNA: _____
*Date of Last Contact _____		*Originating Agency Case Number _____	
Fingerprints Available <input type="checkbox"/> Yes <input type="checkbox"/> No Location of the Fingerprints: _____	Photo Available <input type="checkbox"/> Yes <input type="checkbox"/> No Photo Received <input type="checkbox"/> Yes <input type="checkbox"/> No Photo sent to the State Police <input type="checkbox"/> Yes <input type="checkbox"/> No	Dental Records <input type="checkbox"/> Yes <input type="checkbox"/> No Location of the Dental Records: _____	
Blood Type _____	Body X-Rays Available <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> No	Location of the X-Rays: _____	
Medication Required <input type="checkbox"/> Yes <input type="checkbox"/> No _____	Medication Type _____	Medical Condition <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what type: _____	
Last Name _____		First Name _____	
Middle Name _____		Person Who is Reporting Subject Missing: Address: _____	
Telephone # of investigating agency (accessible 24 hours) Area Code (_____) _____ - _____		Contact Telephone: _____ Authority for Release <input type="checkbox"/> Yes <input type="checkbox"/> No (Part IV) _____	
Last Seen in Company of: NAME(S) (1) _____ (2) _____		Sex _____	Race _____
MISCELLANEOUS DATA (Information which may assist in identification: nickname, associates, direction of travel, hairstyle, clothing, etc.) _____ _____ _____ _____			
VEHICLE INFORMATION			
License Plate Number _____	State _____	Year of Exp. _____	Lic. Type _____ VIN _____
Vehicle Year _____	Make _____	Model _____	Style _____ Color _____
Corrective Vision Prescription: _____			
Jewelry Type and Description: _____			

## \* MANDATORY DATA ELEMENTS

PART II

CHECK APPLICABLE CONDITION:

1. ☐ DISABILITY:

Person missing is under proven physical/mental disability or is senile thereby subjecting herself/himself or others to personal or immediate danger.

2. ☐ ENDANGERED:

Person missing under circumstances indicating his/her physical safety is in danger.

3. ☐ INVOLUNTARY:

Person missing under circumstances indicating the disappearance was not voluntary.

4. ☐ CATASTROPHE VICTIM

Person who missing after a catastrophe.

5. ☐ OTHER

A person 21 or older, not meeting the criteria for entry in any other category, who is missing and for whom there is a reasonable concern for his/her safety.

PART III

I certify the person described in Part I is missing and that the information I have furnished is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Relationship

PART IV

I authorize any law-enforcement official to use photographs and/or any other identifying information I have provided in any manner they deem necessary in attempting to locate the person I am reporting missing.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



\_\_\_\_\_  
Relationship

Virginia Missing Person Information Clearinghouse  
Virginia State Police  
Criminal Justice Information Services Division  
P. O. Box 27472  
Richmond, Virginia 23261-7472

**\*\*\* IMPORTANT \*\*\***

**PLEASE ATTACH A CURRENT PHOTOGRAPH OF THE MISSING PERSON TO THIS FORM**

b. Activation Form and Checklist

	<b>Virginia State Police</b> <b>Critically Missing Adult Alert Activation Form</b>	
<b style="color: red;">IMPORTANT</b> Do NOT request the Alert Activation if the answer is NO to ANY of the following questions. Contact VSP Duty Sergeant before sending this form or if you need assistance call 804.674.2026		
<b>ALERT CRITERIA:</b> (Please mark the box if the answer is yes)		
<div style="border: 1px solid black; padding: 10px;"> <input type="checkbox"/> Is the person 18 years of age or older?  <input type="checkbox"/> Are the person's whereabouts unknown due to a disappearance or an abduction that has been verified by an investigation?  <input type="checkbox"/> Does the disappearance or abduction pose a credible threat, as determined by law enforcement, to the safety and health of the missing person?  <div style="text-align: right; margin-top: 10px;">NCIC #: _____</div> </div>		
<b>DISAPPEARANCE/ABDUCTION INFORMATION</b> Date/Time: _____ Last seen at (address): _____ Brief Summary: <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>		
<b>VICTIM INFORMATION</b> Name: _____ Age: _____ Hair: _____ Eyes: _____ Glasses?: _____ Race: _____ Sex: _____ Height: _____ Weight: _____ Last seen wearing: _____ Scars/Birthmarks, etc.: _____ Indicate any developmental disability, intellectual disability, mental illness and/or medical conditions: <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div>		
<b>SUSPECT INFORMATION</b> Name: _____ Age: _____ Hair: _____ Eyes: _____ Glasses?: _____ Race: _____ Sex: _____ Height: _____ Weight: _____ Scars/Tattoos: _____ Last seen wearing: _____		
<b>VEHICLE INFORMATION</b> Make: _____ Model: _____ Year: _____ Color: _____ License Plate #: _____ State: _____ Unique Markings: _____ Direction of Travel: _____ <small>NOTE: Use additional sheets if more than one suspect or victim</small>		
<b>REPORTING AGENCY INFORMATION</b> Reporting Agency: _____ Agency Contact Number: _____ Department Contact: _____ Cell phone number: _____ Phone number for media inquiries: _____ Date of request: _____		
<b style="color: red;">Email this form to the VSP Duty Sergeant at <a href="mailto:dutysgthq@vsp.virginia.gov">dutysgthq@vsp.virginia.gov</a></b>		

**IMMEDIATELY NOTIFY VSP (804) 674-2026 WITH UPDATES OR WHEN AN ALERT CAN BE CANCELLED**



## Virginia State Police

### Investigating Agency Alert Activation Checklist

### Critically Missing Adult Alert



#### Activation

- ☐ Investigate the matter to verify the disappearance or abduction and eliminate alternative explanations.
- ☐ Enter the missing adult into the Virginia Criminal Information Network (VCIN) and the National Crime Information Center (NCIC) missing person files.
- ☐ Complete the SP-67 (Virginia Missing Persons Information Clearinghouse Report) and email it to the Virginia Missing Persons Clearinghouse at [vamissing@vsp.virginia.gov](mailto:vamissing@vsp.virginia.gov).
- ☐ Complete the Virginia Critically Missing Adult Agency Activation Request Form.
  - Attach a current photograph of the missing adult and/or suspect.
  - Attach the completed SP-67.
  - Designate a department contact with information who is available to discuss the alert request (include a name and telephone number).
  - Provide sufficient information to disseminate to the public to assist in locating the missing adult.
- ☐ Email the Virginia Critically Missing Adult Agency Activation Request Form, the SP-67 and any photographs to the duty sergeant at [dutysgthq@vsp.virginia.gov](mailto:dutysgthq@vsp.virginia.gov).
- ☐ Contact the duty sergeant at 804-674-2026 to confirm receipt of the packet information or if you should have any difficulties transmitting information.

#### Update/Cancel Alert

- ☐ Updated alert information needs to be sent to [dutysgthq@vsp.virginia.gov](mailto:dutysgthq@vsp.virginia.gov).
- ☐ Immediately notify the duty sergeant at [dutysgthq@vsp.virginia.gov](mailto:dutysgthq@vsp.virginia.gov) with the cancellation request.
- ☐ Contact the duty sergeant by phone to confirm the receipt of the cancellation request.

Contact the Duty Sergeant by phone if you have questions Call 804-674-2026.