

VIRGINIA



MISSING CHILD WITH AUTISM ALERT PLAN

APPROVED BY: _____
Colonel Gary W. Settle

DATE: _____

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SUMMARY

The Virginia "Missing Child with Autism Alert" Plan created by legislation in the 2020 General Assembly provides a valuable tool for Virginia law enforcement agencies to help locate missing "Children with Autism," while allowing the broadcaster of Virginia an opportunity to contribute to the communities they serve. We are hopeful that Virginia's "Missing Child with Autism Alert" Plan will assist in recovering missing Autistic Children who may be in great danger. This plan is available for use by all Virginia law enforcement agencies and can be used as their primary "Missing Child with Autism Alert" Plan or as a supplement to a local plan.

Definitions:

§ [52-34.13](#). *Definitions.*

"Media" means print, radio, television, and Internet-based communication systems or other methods of communicating information to the public.

"Missing child with autism" means a child (i) whose whereabouts are unknown; (ii) who has been diagnosed with autism spectrum disorder as defined in § [38.2-3418.17](#); (iii) who is 17 years of age or younger or is currently enrolled in a secondary school in the Commonwealth, regardless of age; and (iv) whose disappearance poses a credible threat as determined by law enforcement to the safety and health of the child and under such other circumstances as deemed appropriate by the Virginia State Police.

"Missing child with autism alert" means the notice of a missing child with autism provided to the public by the media or other methods under a Missing Child with Autism Alert Agreement.

"Missing Child with Autism Alert Agreement" means a voluntary agreement between law-enforcement officials and members of the media whereby a child with autism 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.

"Virginia Missing Child with Autism Program" or "Program" means the procedures and Missing Child with Autism Alert Agreements to aid in the identification and location of a missing child with autism.

Statutory Authority:

§ 52-34.14. *Establishment of the Virginia Missing Child with Autism Alert Program.*

The Virginia State Police shall develop policies for the establishment of uniform standards for the creation of Virginia Missing Child with Autism Alert Programs throughout the Commonwealth. The Virginia State Police shall (i) inform local law-enforcement officials of the policies and procedures to be used for the Missing Child with Autism Alert Programs; (ii) assist in determining the geographic scope of a particular Missing Child with Autism Alert; and (iii) establish procedures and standards by which a local law-enforcement agency shall verify that a child with autism is missing and shall report such information to the Virginia State Police.

The establishment of a Missing Child with Autism Alert Program by a local law-enforcement agency and the media is voluntary, and nothing in this chapter shall be construed to be a mandate that local officials or the media establish or participate in a Missing Child with Autism Alert Program.

§ 52-34.15. *Activation of Virginia Missing Child with Autism Alert Program upon incident of a missing child with autism.*

A. Upon receipt of a notice of a missing child with autism from a law-enforcement agency, the Virginia State Police shall confirm the accuracy of the information and provide assistance in the activation of the Missing Child with Autism Alert Program as the investigation dictates.

B. Missing Child with Autism Alerts may be local, regional, or statewide. The initial decision to make a local Missing Child with Autism Alert shall be at the discretion of the local law-enforcement official. Prior to making a local Missing Child with Autism Alert, the local law-enforcement official shall confer with the Virginia State Police and provide information regarding the missing child with autism to the Virginia State Police. The decision to make a regional or statewide Missing Child with Autism Alert shall be at the discretion of the Virginia State Police.

C. The Missing Child with Autism Alert shall include such information as the law-enforcement agency deems appropriate that will assist in the safe recovery of the missing child with autism.

D. The Missing Child with Autism Alert shall be canceled under the terms of the Missing Child with Autism Alert Agreement. Any local law-enforcement agency that locates a missing child with autism who is the subject of an alert shall notify the Virginia State Police immediately that the missing child with autism has been located.

Criteria for the Activation of the Plan

1. The missing child's whereabouts are unknown, is 17 years of age or younger, or is currently enrolled in a secondary school in the Commonwealth, regardless of age and;
2. Whose whereabouts are unknown and has been diagnosed with autism spectrum disorder and;
3. Whose disappearance poses a credible threat as determined by law enforcement to the safety and health of the child and under such other circumstances as deemed appropriate by the Virginia State Police.
4. A law enforcement investigation has taken place that verified the child is missing and eliminated alternative explanations by a thorough search of the immediate area if vehicular travel is not involved as a mode of travel.
5. Sufficient information regarding the missing child is available to disseminate to the public that could assist in locating the missing child.
6. The missing child must be entered into the Virginia Criminal Information Network (VCIN), the National Crime Information Center (NCIC) missing children files and information reported to the Virginia Missing Children's Clearinghouse (VMCC) in the prescribe format.

If all of the aforementioned criteria are not met, the Virginia "Missing Child with Autism Alert" Plan will not be activated however information can still be provided to the media.

“Missing Child with Autism Alert” Requirements for All Law Enforcement Agencies

1. **CONFORMATION.** Law enforcement agencies are required to confer with the VMCC/State Police prior to activation of a local “Missing Child with Autism Alert”. Once the investigating agency has contacted and provided the Virginia Missing Children Information Clearinghouse (VMCC) with the required information, the requesting agency will only be required to submit updated information and notify the VMCC of the recovery of the missing child or cancellation of the alert.
2. **INVESTIGATION POLICY.**
 - a. **AGENCY POLICY.** Agencies must follow their intra-departmental policy regarding the actual investigation process involving missing children incidents within their jurisdiction.
 - b. **ACTIVE.** An investigation must be ongoing and active prior to requesting the Missing Child with Autism Alert activation.
 - c. **VCIN/NCIC.** The agency must have entered the missing child into the VCIN/NCIC systems.
3. **POINT OF CONTACT.** The agency must designate at least one officer as a point of contact for the VMCC to communicate with during the incident.
4. **PHONE CAPABILITY**
 - a. The agency must have an assigned telephone number capable of rolling over to at least two separate lines to take telephone calls if the “Missing Child with Autism Alert” Plan is activated, or have made arrangements with the Virginia Missing Children Information Clearinghouse to take the telephone calls and forward the information to the law enforcement agency.
5. **NECESSARY INFORMATION.** Upon activation of the agency’s or Virginia’s “Missing Child with Autism Alert” Plan, the following information must be immediately submitted to the Virginia Missing Children Information Clearinghouse:
 - a. A photograph of the missing child.
 - b. Required information listed in the Virginia “Missing Child with Autism Alert” Activation forms or Agency form and as set forth in the Virginia “Missing Child with Autism Alert” Plan.
 - c. Updated information regarding the case. The VMCC will disseminate the pertinent information to participating television and radio stations.
 - d. Immediate notification that the missing child has been located, or upon closure of the case. The VMCC will notify all components of the Virginia “Missing Child with Autism Alert” Plan regarding the termination of the alert.
6. **TERMINATION.** Agencies must notify VMCC using the appropriate form if the investigation is terminated within 12 hours.
7. **SP-183 FORM.** The agency must submit the completed SP-183 or equivalent agency form.

VMCC “MISSING CHILD WITH AUTISM ALERT” ACTIVATION PROCESS

Activation of the Virginia “Missing Child with Autism Alert” Plan must be initiated through the Virginia State Police VMCC. Once the agency receives a report that meets the established age criteria,

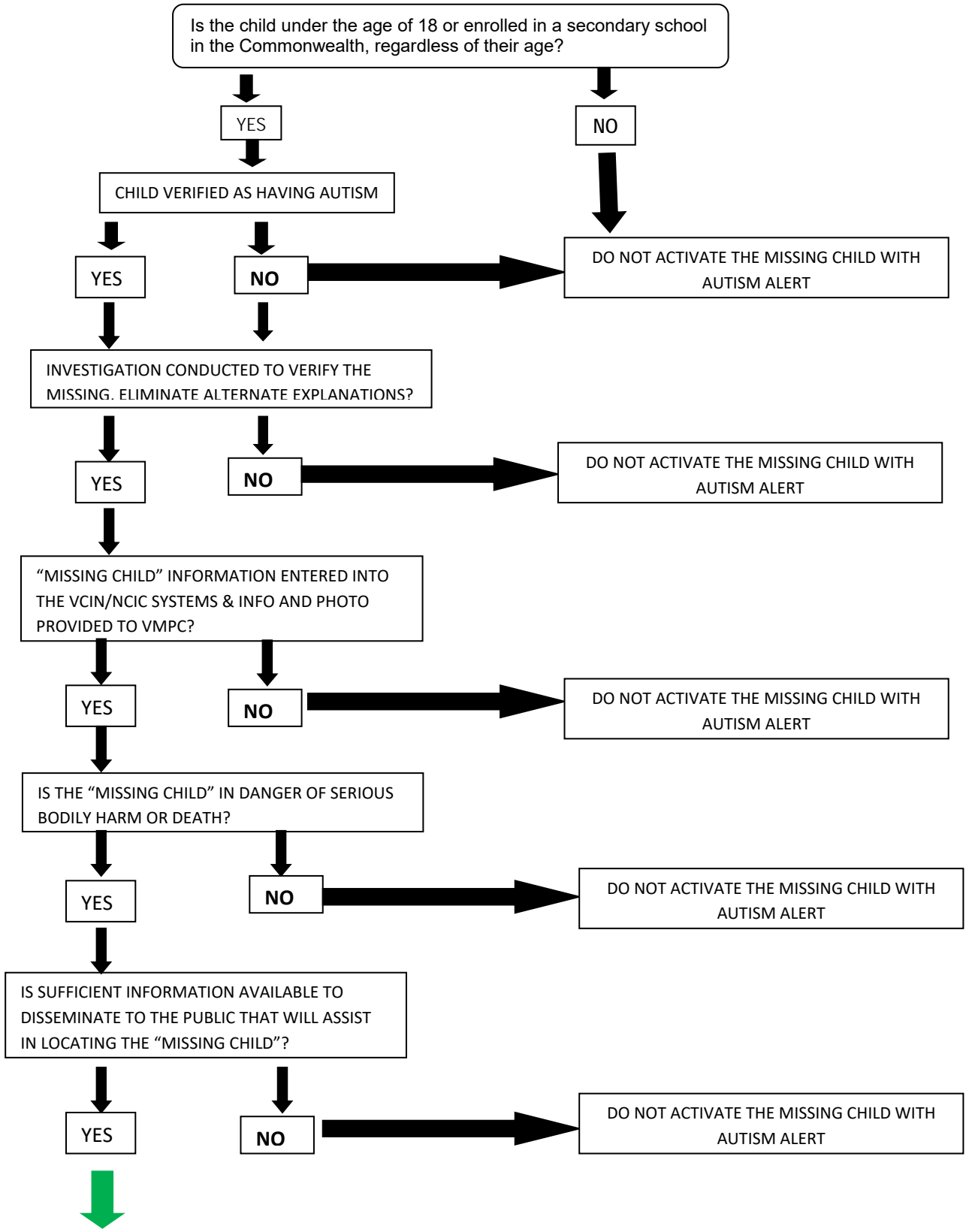
1. Complete the included pre-established Virginia “Missing Child with Autism Alert” form packet and forward to the Virginia Missing Children Information Clearinghouse.
2. Notify VMCC by telephone and immediately confirm our receipt of the packet information. If you should have any difficulties transmitting information, designate a department contact for VMCC (include a name and telephone number on the standardized form).
3. Forward the most current photograph of the missing child immediately and forward all incident details or summaries to the Virginia Missing Children Information Clearinghouse at vamissing@vsp.virginia.gov and dutysgthq@vsp.virginia.gov. The electronic image of the photograph must be in Joint Photograph Experts Group (JPEG) format.

Telephone #: 804-674-2026

Forms only – Facsimile #: 804-674-6704

4. The Virginia State Police will contact any/all broadcasting companies through the Everbridge Alert System upon approval to activate the Virginia “Missing Child with Autism Alert”. The Virginia State Police will provide supplemental information through the Everbridge Alert System with a detailed summary of the missing child, and forward a copy of their photograph to any/all broadcasting companies.

DECISION FLOWCHART FOR VIRGINIA “MISSING CHILD WITH AUTISM ALERT” PLAN ACTIVATION



ACTIVATE THE VIRGINIA “MISSING CHILD WITH AUTISM ALERT”

APPENDIX A

VIRGINIA “MISSING CHILD WITH AUTISM ALERT” FORMS

Virginia “Missing Child with Autism Alert” Request Form

Incident Information

Date Missing: _____ **Time Reported Missing:** _____
(mm/dd/yy) (hh:mm)

Location of Incident - last known location:

(Description)

Direction of Travel/Destination:

(City, State, Subdivision)

Vehicle Description:

(Make, Model, Year, Color, License Plate Number and State of Issue)

Childs Information

Name: _____
(Last, First, MI)

Gender: _____ **DOB:** _____ **Race:** _____
(Male/Female) (mm/dd/yy or Approx. Year) (Include all Types)

Height: _____ **Weight:** _____ **Hair:** _____ **Eyes:** _____
(Feet/Inches) (Lbs.) (Style and Color) (Color)

Clothing:

Shirt: _____
(Type, Long or Short Sleeve, Color)

Pants: _____
(Type and Color)

Shoes: _____
(Type and Color)

Other: _____
(Type and Color)

Outerwear: _____
(Type and Color)

Additional Significant Identifiers: _____

Medical Needs: _____

OBTAIN A PHOTOGRAPH OF THE CHILD, AND E-MAIL TO THE VIRGINIA MISSING CHILDREN INFORMATION CLEARINGHOUSE vamissing@vsp.virginia.gov and dutysqthq@vsp.virginia.gov.

Virginia “Missing Child with Autism Alert” Request Form

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CONTACT ORGANIZATION:

Sheriff’s Office or Police Department: _____

Contact Person: _____

Telephone Number: _____ **Facsimile Number:** _____

Pager Number: _____ **Cellular Telephone Number:** _____

Date and Time Submitted: _____

Virginia "Missing Child with Autism Alert" Request Form

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AUTHORIZATION FOR RELEASE OF CHILDS INFORMATION

For a period of one year from the execution of this form, the undersigned authorizes full disclosure of all records concerning my child to any agent of the state of Virginia, Virginia State Police, or any individual or entity assigned by the Virginia State Police, whether the records are of a public, private, internal, or confidential nature. I direct the release of such information regardless of any agreement I may have made to the contrary with any entity or individual to whom my child's information is released or presented. The intent of this authorization is to give my consent for full and complete disclosure of potentially confidential information. Additionally, I understand the duty of the Virginia State Police to release any information to the proper authorities and make other reports as may be mandated by law. I also certify that any person(s) who may furnish such information concerning the my child shall not be held accountable for giving this information; and I do hereby release such person(s) from any and all liability which may be incurred as a result of furnishing such information. I further release the Virginia State Police, Virginia Broadcasters Association and its agents, and designees under this release, from any and all liability which may be incurred as a result of furnishing such information. A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature. I have read and fully understand the contents of this "Authorization for Release of Information."

PLEASE PRINT OR TYPE:

Last Name, First Name, Middle Initial

Current Address, House Number/Box Number Street Name/Rural Route, City, State, Zip Code

Signature _____

LIABILITY AGREEMENT:

I hereby agree the information I have provided to you acting as an agent of the state of Virginia, Virginia State Police, Virginia Broadcasters Association or any individual or entity assigned by the Virginia State Police, to be truthful, factual, and correct. As the parent/legal custodian, I am aware that in order for the Virginia State Police to activate the Virginia "Missing Child with Autism Alert," the following criteria must be met:

1. The child has been diagnosed with autism spectrum disorder
2. The child is 17 years of age or younger
3. The parent/legal custodian **must reasonably believe** the child **is in danger** of serious bodily harm or death.

I am also aware I may be charged criminally for committing the crime of knowingly providing false information to law enforcement authorities. I have read and fully understand the contents of this "Liability Agreement."

PLEASE PRINT OR TYPE:

Last Name, First Name, Middle Initial

Current Address, House Number/Box Number Street Name/Rural Route, City, State, Zip Code

Signature: _____

Virginia "Missing Child with Autism Alert" Termination Form

We are terminating the "Missing Child with Autism Alert" originated by our agency. Please broadcast the following information as necessary.

Text Follows

The "Missing Child with Autism Alert" which was transmitted earlier for

(Full name) _____, missing from

(Street) _____

(City or County) _____, has been

canceled. The "Autism Alert" for (Full name) _____
_____ has been cancelled.

If there are any problems with or questions about the contents of this fax, call

_____ at _____
(NAME) (PHONE)

Text Ends

Originating Agency: _____