



POLICY AND PROCEDURE

NO.572

Amber Alert

Date Issued January 5, 2021	Date Effective January 5, 2021	Revision No. 1	No. of pages 4
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1. INTRODUCTION:

The Massachusetts Amber Alert Plan is a voluntary, cooperative effort between the Worcester Police Department and the Massachusetts State Police, to establish an emergency alert system to notify the public when a child has been abducted and it is believed that the child’s life is in serious danger of bodily harm or death. The plan also calls upon the local media outlets to interrupt regular programming to broadcast information about the missing child. The goal of the AMBER Alert Plan is to provide law enforcement with another tool to help recover abducted children and quickly apprehend the suspect.

2. ACTIVATION GUIDELINES:

Upon notification that a child has been abducted; **the sector supervisor must be informed. It shall be the supervisor’s responsibility to determine if the case meets the criteria for activating the Alert Plan.**

ALL of the following AMBER Alert Plan criteria **must** be met before activation can take place:

- A child, 17 years of age or younger, has been abducted
- Law Enforcement believes the child is in serious danger of bodily harm or death
- There exists enough descriptive information for law enforcement to believe an AMBER Alert will help locate the child

3. AMBER Alert Procedure:

- Information is received regarding the abduction of a child.
- Initial investigation confirms criteria for AMBER Alert activation
- On duty Unit Commander is notified
- Unit Commander confirms the following information has been obtained
 - Name, age and physical description of child
 - Description of child clothing
 - Location and time that the child was-last seen
 - Description of Vehicle that was involved in the abduction
 - Description and/or identification of possible suspects
 - Last known direction of travel and possible destination
 - A recent photograph of the abducted child
- Unit Commander completes the fillable PDF AMBER Alert Activation Request **AMBER ALERT Activation Request Form** (Also Located in Department Forms under WPD (S:))

Drive), and immediately: S:\Department Forms\AMBER ALERT Activation Request Form.pdf

- Emails the completed request form to machildamberalert@mass.gov
- Telephones MSP Communications at 508-820-2121 for verification that the email has been received.
- MSP confirms receipt of AMBER Alert Form and either agrees to activate the plan or denies activation

4. CONCLUSION:

This plan is a tool to use when investigating the report of an abducted child. Nothing in this plan precludes the CJIS protocol for entry of missing persons. Likewise all other unit policies and procedures need to be adhered to when investigating the report of missing children. This includes when the request for activation has been denied.

PER:



STEVEN M. SARGENT

*1/5/2021 Updated several section to reflect current process and form



MASSACHUSETTS AMBER ALERT Activation

Request-Immediate Action Required

(To Be Completed By Investigating Agency)



Massachusetts State Police Communications Section Voice (508) 820-2121 Email: machildameralert@mass.gov	Requesting Department: _____ Phone # _____ Name and <u>DIRECT</u> phone number of the Authorized Submitting Official: _____ Phone# _____
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Abduction Date & Time	Date: _____	Time: _____	City/Town: _____
Location	Specific Location: _____		

Vehicle Information	Color: _____	Year: _____	Make: _____	Model: _____	State and Plate #: _____
Other Vehicle Descriptors (dents, scratches, stickers, damage etc.) _____					
Last Seen Direction of Travel (Road/Route/Highway): _____				City/Town: _____	

Abducted Child Information <small>(For multiple victims, use multiple forms)</small>	Name (First, MI, Last) _____		Parental Consent to Release Child's Name: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Last Seen (Time): _____		Specific Location w/City/Town: _____		Age/DOB: _____
Race: _____		Male: <input type="checkbox"/> Female: <input type="checkbox"/>		
Hair: (color/style) _____ Eyes: (color/glasses) _____				
Height: _____ Weight: _____ Scars/Marks _____				
Clothing: _____				
Additional Information: _____				

Suspect Information <small>(For multiple suspects, use multiple forms)</small>	Name (First, MI, Last) _____		Age/DOB: _____		Race: _____	
Suspect Description: _____		Hair: (color/style) _____		Eyes: (color/glasses) _____		
Height: _____		Weight: _____		Scars/Marks/Tattoos _____		
Clothing: _____						
Additional Information (Custody Issues, Criminal History, Cell Phone etc.): _____						

Abduction Gist	Possible destination if known, additional suspects, type of weapon if used etc.:
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Revised 03/02/2020

When complete, save & email to: machildameralert@mass.gov



**MASSACHUSETTS AMBER ALERT Activation
Request-Immediate Action Required**



Abduction
Gist (Cont.)

A large, empty rectangular box with a light blue gradient background, intended for the user to provide details for the abduction gist.

When complete, save & email to: machildamberalert@mass.gov