

STATE OF WEST VIRGINIA
DEPARTMENT OF MILITARY AFFAIRS & PUBLIC SAFETY
DIVISION OF CORRECTIONS & REHABILITATION



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(304) 558-2036 TELEPHONE - (304) 558-5367 FAX

TO: Citizen Involvement and Volunteer Services Regular Participant
FROM: Director Of Inmate Services & Activities / Facility Citizen Involvement Coordinator
RE: Volunteer Orientation / Training

You are receiving this training packet in order to better facilitate your required Orientation / Training before assignment as a volunteer at one of our facilities. To help ensure your safety while you are providing services and / or activities at our facilities we require your attention to and completion of the attached training materials and forms. Please follow these instructions:

- Read (1) Directors Protocol XXX, Citizen Involvement and Volunteer Services, (2) The Citizen Involvement and Volunteer Services Training / Orientation Guide, Attachment #4.
- **Complete entirely, sign, date, and return, Release Of Information, Attachment #1.**
- **If Required / Attached, complete entirely, sign, date, and return, CI&VS Application, Attachment #2**
- **Complete entirely, sign, date, and return, CI&VS Emergency Data Form, Attachment #3 (Optional, but for your safety)**
- **Read, complete entirely, initial / sign, date, and return, WV DMAPS Confidentiality Agreement, Attachment #5**
- **Read, complete entirely, sign, date, and return, WVDOP Drug And Alcohol-Free Workplace Policy, Attachment #6**
- **Read, complete entirely, sign, date, and return, WVDOP Prohibited Workplace Harassment Policy, Attachment #7**
- **Read, complete entirely, initial / sign, date, and return, CI&VS Certification Form And Acknowledgement Of Understanding, Attachment #8**

You may make copies of the forms you return. To ensure confidentiality of your information, please mail / return the completed forms to the name / address provided with this packet.

For NA
at any facility

ASHLEY H. BENNETT
1409 Greenbrier St. Charleston, WV 25311
(304) 558-2036 FAX (304) 558-2115
ashley.h.bennett@wv.gov

WEST VIRGINIA
DIVISION OF CORRECTIONS

BEHIND THE WALLS

VOLUNTEER TRAINING MANUAL

BEHIND THE WALLS

CITIZEN INVOLVEMENT IN CORRECTIONS

The West Virginia Division of Corrections (WVDOC) finds that it is consistent with its statutory mission to provide the opportunity for as many inmates as is possible to interact with volunteers from the community, while still maintaining a safe and secure facility. Volunteers enhance programming being conducted by the WVDOC. Another Voice often validates what has already been stated and will help an inmate focus on his/her re-entry goals. We appreciate the time and talent citizen volunteers give to our inmate population. We want your time in our facilities to be safe and productive visits. We only ask that you conduct yourself as a respected guest and follow our policies regarding your activities while at our facilities. We train our Correctional Officers and Staff to be the very best corrections professionals in the country, please follow their directions whenever given.

Security is the number one priority of every WVDOC employee. We are tasked with providing a safe, secure, and humane corrections environment in order to provide for the safety of the public, staff, and inmates. However, each facility is divided into three areas of responsibility. **SECURITY** staff are tasked with the safe, secure, and good order of our institutions. **PROGRAMS** staff are given the responsibility to provide, facilitate, and recommend inmate programming to affect a positive re-entry into society. Most volunteer programs will fit in this area of responsibility. A staff supervisor that has expertise in your area of involvement will generally supervise the program area in which you provide volunteer services and activities. **OPERATIONS** staff are responsible for facility maintenance and ancillary services. Though each facility will differ somewhat in size, security level of inmates housed, and roles within the WVDOC, each facility will operate in basically the same manner.

SECURITY CONCERNS

The duty of every WVDOC employee is to promote inmate self-discipline and self-control. We attempt to fulfill this duty by the firm, fair, and consistent relationships that are developed with the inmate population. *Professional* and **not** *Personal* relationships are promoted. We have an expectation our volunteers will conduct themselves in the same manner.

ENTRANCE INTO FACILITIES

- The Warden/Administrator of the facility must approve your participation in volunteer programming
- Everyone who desires to participate as a volunteer within the WVDOC must fulfill certain requirements. The attached application and other forms must be completed in their entirety and signed. The acknowledgement sections of this handbook must be completed. You may be required to fulfill these obligations every other year. *If a volunteer fulfills these obligations at*

one facility he/she may request it be recognized at other WVDOC facilities where he/she desires to be a volunteer. The request will normally be granted.

- Photo identification is needed to enter any facility. Normally, you will exchange your photo identification for facility visitor identification while at our facilities.
- The Warden/Administrator will determine the amount of freedom granted any volunteer within their facility. You will normally be under direct escort or other means of observation at all times while at any WVDOC facility.

It is recognized that the WVDOC has tenured (long term, trusted, seasoned) volunteers who assist us by conducting various activities at our facilities. Wardens / Administrators have the authority to recognize those individuals at his / her discretion. Wardens / Administrators may issue those individuals WVDOC "red background" identification cards (volunteer keeps on person). Those individuals may be trusted to move about the facility without direct escort / supervision. They may also provide the direct escort / supervision for other volunteers during their group activity. This is a privilege status and not an earned status given to any volunteer. This privilege may be withdrawn without cause and especially for any violation of trust placed in that individual. The volunteer will surrender their identification upon demand by the Warden / Administrator. This identification should be honored at other facilities with the understanding the volunteer may require an orientation to any new facility the volunteer has not previously been a volunteer.

GENERAL SECURITY ISSUES

- Please follow the directions given by *any* Correctional Officer or other staff at *all* times while at our facilities. Our concern is your safety while at the facility.
- Do not interfere in any way with the interaction between a Correctional Officer or other staff member and an inmate at any time. Being an inmate advocate is a valuable role within our society but it is not the reason for your being at our facilities. Please remember that you are a guest.
- Certain situations may occur while you are at the facility such as a fire, severe weather, or other issues, which will likely cause you to stop your activities, and the inmates will be directed back to their housing areas. When these conditions occur then stop your activity immediately and ask for instructions from a Correctional Officer or other staff person.
- There are some issues addressed specifically in West Virginia State Code regarding correctional facilities. It is a felony to aid in the escape of an inmate, to bring alcohol or drugs into a correctional facility, and it is a felony to have sex with an inmate.
- Inmates in the West Virginia Division of Corrections system are not permitted to use tobacco or tobacco like products. As a volunteer you may not use or bring in any tobacco or tobacco like products at any facility.
- There are certain items that are not permitted within our facilities. That list includes but is not limited to: weapons of any kind, ammunition, tobacco and tobacco like products, cameras, cell phones, purses, wallets, checkbooks, and chewing gum. A good rule of thumb for the volunteer is to only plan to bring into the facility what is absolutely needed to provide the services you are rendering, enter the facility, and get into your vehicle. Any other items must be approved ahead of time.
- Please dress modestly and do not attempt to dress like an inmate is dressed. Excessive perfumes/cologne and jewelry are strongly discouraged. Provocative clothing, sweats, jogging suits, tank tops, medical scrubs, etc. are not permitted. Dress appropriate to the activity you are at the facility for. We reserve the right to make the final decision regarding the appropriateness of your dress and whether or not we will permit you access to the facility.

- Only Nitro glycerin tablets, rescue inhalers, and epi-pens are permitted as keep on person items within the facility.
- Do not give gifts to or accept gifts from any inmate or from his/her family.
- Do not be a messenger between an inmate and other inmates, his/her family, or any other person whether the message is verbal or written.
- Please respect the time frames given for your activity.
- Do not share personal information with any inmate.
- There are some things that will cause the immediate termination of a volunteer. Those issues would include but are not limited to: violation of federal or state laws or institutional rules while performing volunteer activities, failure to provide services as agreed upon, and participation in or encouraging activity determined to be a threat to the facility.
- Please do not offer legal advice to an inmate unless you are a legal volunteer.
- Do not have physical contact with inmates other than a traditional greeting such as a handshake.
- Please be aware of all sanitation issues and fire evacuation procedures at your facility.
- Please note that you are only permitted to enter our facilities at the scheduled time of your activity.

HOSTAGE SITUATIONS

- It is a very real possibility to be taken as a hostage while at a WVDOC facility. If it occurs, mistreatment is likely.
- If taken as a hostage it is recommended that you do not act like a "hero". You should attempt to make the hostage taker understand that you are a person with a family and plans for the future. You should follow the directions given by the hostage taker.
- Please understand that no hostages will be exchanged, no inmate will be permitted to leave, and no weapons will be given to any inmate.
- The main goal in hostage situations is the preservation of human life including the life of the hostage taker.

VOLUNTEER CONCERNS

For purposes of this program a volunteer is any individual who has been approved and trained in accordance with the WV Division of Corrections Volunteer Policy. This individual volunteers his/her time, talent, and effort for the purpose of providing goods, services, or other volunteer activity, in order to enhance the activities and programs of the WVDOC. Volunteers are selected on the basis of their skills or personal qualities to provide assistance in recreational activities, religion, education, or other areas with a need. This is a mutually agreed upon relationship that may be terminated, at will, at any time, by either the volunteer or the WVDOC. There are no specific rights a person has, express or implied, that guarantees the privilege to act as a volunteer.

GENERAL ISSUES

- We encourage our volunteers to express in writing and/or verbally any recommendations they have regarding our volunteer programs. Any recommendations or concerns should be directed to the Warden/Administrator of the facility.
- Any WVDOC employee, contractor, or West Virginia Department of Education employee must get the express written consent of the Warden/Administrator of the facility where he / she wishes to act as a volunteer before volunteering at that facility.
- Any ex-felon must get the express written consent of the Warden/Administrator of every institution/facility/center where he/she wishes to act as a volunteer.
- Volunteers who desire to provide professional services are required to provide copies of their credentials.
- The WVDOC reserves the right to change, add, stop, or discontinue any regularly scheduled or special volunteer activity at our facilities at any time without prior notice. Depending on staff availability or other issues at the institution/facility/center the scheduled program or activity may be cancelled with little or no notice. Please do not expect a full explanation for cancelling any program or activity.
- A Programs Department supervisor familiar with the area(s) where the volunteer activity takes place will generally provide supervision of volunteer activities. That person will be the primary contact for the volunteer.
- No person may act as a volunteer at any West Virginia Division of Corrections institution/facility/center and be on any approved visitor's list of any West Virginia Division of corrections inmate at any West Virginia Division of Corrections institution/facility/center.

RELIGIOUS VOLUNTEERS

- Religious programming is inmate driven and not volunteer driven. We attempt to meet the needs as expressed by the inmate population.
- Organizations and not individuals are generally recruited to fill the needs.
- Religious leaders of the respective groups must either be ordained, or have similar credentials. A letter of endorsement by their organization will suffice.
- Religious Volunteers may only donate copies of scriptures and religious study material. These donations must be donated to the Chapel. They will be distributed in the Chapel or by the Chaplain on a first-come first-served basis. Donations to specific inmates are prohibited.
- The Religious Services Department or designated Religious Services Coordinator of an institution/facility/center may accept other donations for the benefit of the program as a whole with the Warden/Administrator's approval. No cash donations will be accepted.
- It is appropriate to conduct prayer regarding an inmate's health. However, religious volunteers are expected to encourage any inmate with medical problems to seek professional medical assistance.

SPECIAL CONCERNS

There are certain areas of concern that deserve special mention.

CONFIDENTIALITY

- No volunteer is to share any information gained by acting as a volunteer about an inmate with anyone else with or without the inmate's permission.
- Do not coerce an inmate into sharing information about themselves with others.
- It is expected that information gained as a volunteer regarding issues that could affect the security, good order, safety and health of the facility or of an individual will be shared with appropriate WVDOC staff.
- Please complete entirely and sign the attached confidentiality agreement.

DRUG AND ALCOHOL-FREE WORKPLACE

It is the responsibility of each agency to include a copy of the West Virginia Division of Personnel DRUG AND ALCOHOL-FREE WORKPLACE policy in every orientation packet for new independent contractors, volunteers, and employees. Please see the attached policy on the Drug And Alcohol-Free Workplace and sign the attached certification form.

PROHIBITED WORKPLACE HARASSMENT

It is the intent of the State of West Virginia to provide a work environment where illegal harassment based on sex (with or without sexual conduct), race, color, religion, national origin, ancestry, age, disability, and protected activity (i.e., opposition to prohibited discrimination or participation in the complaint process) or status explicitly defined as protected under applicable State and federal law as well as non-discriminatory hostile workplace harassment is prohibited. Please see the attached interpretive Bulletin on Prohibited Workplace Harassment.

TOBACCO USE

- WVDOC inmates are prohibited to use or possess tobacco products, tobacco like products, or tobacco substitutes.
- No independent contractor, volunteer or employee may give tobacco products, tobacco like products, or tobacco substitutes to any WVDOC inmate.
- For the safety of our volunteers, and the security and good order of our institutions, no volunteer will be permitted to bring into or use any tobacco products, tobacco like products, or tobacco substitutes at any WVDOC facility.

Prison Rape Elimination Act of 2003 (PREA)

The Prison Rape Elimination Act (PREA) is a federal law that prohibits and seeks to eliminate sexual assaults and sexual misconduct in correctional institutions and community corrections settings. The West Virginia Division of Corrections (WVDOC) is committed to providing a safe and healthy environment for staff and offenders.

- The WVDOC has zero-tolerance for sexual assault or abuse of any person or sexual relationships between staff and offenders.
- Offenders who have consensual sexual contact with another offender will be disciplined.
- Offenders who have non-consensual sexual contact with another offender will be disciplined and referred to law enforcement.
- Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

How to Report Institutional Sexual Assault and/or Staff Sexual Misconduct

If you have information regarding a WVDOC offender who has been sexually assaulted while under WVDOC custody or community supervision, please inform the Warden/Administrator, Associate Warden Programs, your Program Supervisor, or Parole Officer either in person, or write or call.

You may report it anonymously to the Director of Corrections Investigations by calling 304-636-0222. You don't have to give your name but it is critical that you provide as many details as possible. This includes:

- The name(s) and locations of persons involved.
- The name(s) or description of any witnesses to the incident.
- WVDOC number (if an offender).
- A brief description of the incident(s).
- A brief description of where the event(s) occurred.
- The date(s), time and place of occurrence(s).
- Names and contact information of others who might have additional information about the incident.
- Your contact phone number and address (optional)

The WVDOC investigates all allegations of offender-on-offender sexual assaults and staff sexual misconduct.

Complete, Sign, Return

Policy Director 153.00
01 August 2013
Attachment #3

STATE OF WEST VIRGINIA
DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
DIVISION OF CORRECTIONS

RELEASE OF INFORMATION

I hereby authorize any representative of the West Virginia Division of Corrections bearing this release to obtain information from your files or other sources pertaining to my personal background, limited to, law enforcement, C.I.B. check, including local, state, and federal agencies records that they may have regarding me. I hereby direct you to release such information upon request of the bearer. This release is for the official use of the West Virginia Division of Corrections. Consent is granted for the West Virginia Division of Corrections to furnish such information as is described above in the course of the West Virginia Division of Corrections fulfilling its official responsibilities with regard to my application to act as a volunteer/visitor/college instructor upon the grounds of any West Virginia Division of Corrections facility. I hereby release you, the institution or establishment which you represent, including its officer, employees and related personnel both individually and collectively, from any and all liability for damages, of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any questions as to the validity of this release, you may contact me as indicated below.

State of West Virginia State of: _____
County _____ Full Name _____
(Print)
Date of Birth _____ Address _____

Social Security Number _____ Race _____

Signature

STATE OF WEST VIRGINIA
DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
DIVISION OF CORRECTIONS & REHABILITATION

CITIZEN INVOLVEMENT & VOLUNTEER SERVICES APPLICATION

NAME: _____ PHONE: _____
(LAST, FIRST, MIDDLE)

ADDRESS: _____
(P.O. BOX/NUMBER AND STREET) (CITY) (STATE) (ZIP)

BIRTHDATE: _____

SERVICE OR ACTIVITY VOLUNTEERING FOR: (You must provide copies of credentials for certain services and activities provided. Religious leaders of their groups must either be ordained / licensed, or have similar credentials, such as, an official letter of endorsement by their organization.)

WHAT ORGANIZATION DO YOU REPRESENT? (The WVDOCR normally recruits and/or selects organizations and not individuals to participate in our Citizen Involvement and Volunteer services and activities. A letter of endorsement, appointment, and/or authorization to represent the organization may be required)

(ORGANIZATION) (P.O BOX/NUMBER AND STREET) (CITY) (STATE) (ZIP)

PRESENT EMPLOYER: _____

ADDRESS: _____
(P.O BOX/NUMBER AND STREET) (CITY) (STATE) (ZIP)

REFERENCES:

1. NAME: _____

ADDRESS: _____
(P.O BOX/NUMBER AND STREET) (CITY) (STATE) (ZIP)

PHONE: _____ HOW LONG ACQUAINTED: _____

2. NAME: _____

ADDRESS: _____
(P.O BOX/NUMBER AND STREET) (CITY) (STATE) (ZIP)

PHONE: _____ HOW LONG ACQUAINTED: _____

Have you ever been convicted of a crime other than a traffic ticket or parking ticket? (If Yes, include an explanation on a separate sheet): _____

**Do you personally know, or have knowledge of any inmate incarcerated in any WVDOCR facility?
(If yes, include an explanation on a separate sheet):** _____

Briefly describe why you desire to be a volunteer: _____

I agree to allow the WVDOCR to conduct an investigation of my application to become a volunteer. I release the WVDOCR and its employees of any and all liabilities and damages that may result for me as a result of that investigation. If selected to participate in the Citizen Involvement and Volunteer Services Activity, I agree to abide by all rules and regulations of the facility where I am a volunteer. I acknowledge that I will not be paid by the WVDOCR for any services that I perform. I further agree to participate in the Citizen Involvement and Volunteer Services orientation / training and any further training required.

(SIGNATURE/DATE)

Optional (For Your Safety)
complete, Sign, Return

Policy Directive 153.00
01 April 2015
Attachment #4

STATE OF WEST VIRGINIA
DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
DIVISION OF CORRECTIONS

CITIZEN VOLUNTEER EMERGENCY DATA FORM

NAME: _____ PHONE: _____
(LAST, FIRST, MIDDLE)

ADDRESS: _____
(P.O. BOX/NUMBER AND STREET) (CITY) (STATE) (ZIP)

Do you have any existing medical condition? _____

If Yes, describe the condition: _____

Are you on medication? _____

If Yes, what is the medication? (Only individual doses of nitroglycerin tables, a rescue inhaler, epi-pen, or other medication needed on an immediate basis for life threatening situations are permitted in the facility. All other medication will have to be secured in your vehicle while you are within the secured area of this facility).

Person to notify in case of emergency: _____

Relationship: _____ Telephone Number: _____

ADDRESS: _____
(P.O. BOX/NUMBER AND STREET) (CITY) (STATE) (ZIP)

(PLEASE NOTE, IT IS THE VOLUNTEERS RESPONSIBILITY TO NOTIFY THE INSTITUTION/FACILITY/CENTER OF ANY CHANGES CONCERNING MEDICATIONS AND/OR CONTACT INFORMATION.)

Signature/Date

Read, Initial Appropriate Spaces, Sign/Date, Return

Policy Directive 153.00
01 August 2013
Attachment #5

**STATE OF WEST VIRGINIA
DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
DIVISION OF CORRECTIONS**

VOLUNTEER CERTIFICATION FORM AND ACKNOWLEDGEMENT OF UNDERSTANDING

- | <u>INITIAL</u> | <u>AREA OF ACKNOWLEDGEMENT</u> |
|-----------------------|---|
| ✓ _____ | I have read, I understand, and I will abide by the West Virginia Division of Corrections Volunteer handbook, "Behind The Walls". |
| ✓ _____ | I have completed, dated, and signed all the forms required of me honestly and to the very best of my ability. |
| ✓ _____ | I understand and agree to abide by the WVDOC policy on confidentiality, and I have read and signed the West Virginia Department of Military Affairs and Public Safety Confidentiality Agreement. |
| ✓ _____ | I have read the West Virginia Division of Personnel DRUG AND ALCOHOL-FREE WORKPLACE policy and I have signed and dated the Drug Awareness Certification Form. |
| ✓ _____ | I have read and agree to abide by the West Virginia Division of Personnel Policy PROHIBITED WORKPLACE HARASSMENT. |
| ✓ _____ | I understand and agree to abide by the WVDOC policy on tobacco use for volunteers. |
| ✓ _____ | I understand the WVDOC has zero tolerance for sexual assault or abuse of any person or sexual relationships between staff and offenders. Employees, contract staff, volunteers and vendors who engage in sexual contact or sexual misconduct with offenders will be terminated and referred for criminal prosecution when applicable. If I obtain information regarding a WVDOC offender who has been sexually assaulted while under WVDOC custody or community supervision, I understand expectations from me is to inform the Warden/Administrator, appropriate Associate Warden, or my Program Supervisor. |
| ✓ _____ | I have had an opportunity to ask questions, express concerns, and offer suggestions. |

VOLUNTEER

WITNESS

Signature of Volunteer

Signature of WVDOC Staff Witness

Printed Name of Volunteer

Printed Name & Title of WVDOC Staff Witness

Date

Date

**WEST VIRGINIA DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
CONFIDENTIALITY AGREEMENT**

OVERVIEW

The purpose of the Confidentiality Agreement is to secure the West Virginia Department of Military Affairs and Public Safety and West Virginia Division of Corrections (Authority's) most protected asset---information. The Authority stores and transmits a great deal of sensitive information. Accordingly, the Authority has concerns about protecting the confidentiality and integrity of this information, in both its paper and electronic forms.

The attached Confidentiality Agreement is being instituted to ensure that all persons with access to protected NPPI, PII, SPII, and PHI information or any other information deemed confidential, fully understand their obligations to limit their use of such information and to protect such information from disclosure. Special attention items, as well as definitions, are highlighted below. If you have any questions about this agreement or fail to understand the contents, please contact personnel for further information.

Special attention items:

- Use of protected NPPI, PII, SPII, and PHI information and confidential information is permitted only when the user has a need to know such information;
- Disclosure of protected NPPI, PII, SPII, and PHI information or confidential information is only permitted when the Authority consents in writing and in conformity with the Authority's policies and procedures, as may be amended from time to time; and
- Protected NPPI, PII, SPII, and PHI information and confidential information is protected in all forms, electronic and paper.

DEFINITIONS

Disclosure – The release, transfer, provision of, access to, or divulging in any other manner of information outside the entity holding the information.

Need-to-know – The necessity for access to, or knowledge or possession of, specific information required to carry out official duties

**WEST VIRGINIA DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
CONFIDENTIALITY AGREEMENT**

Protected Health Information (PHI) – With regard to HIPAA covered entities, individually identifiable health information, including demographic information, whether oral or recorded in any form or medium, that relates to the individual's health, health care services and supplies, or payment for services or supplies, and which identifies the individual or could reasonable be used to identify the individual. This includes information that relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual including but not limited to preventive, diagnostic, therapeutic, rehabilitative, maintenance or palliative care as well as counseling, service, assessment, or procedure with respect to the physical or mental condition, or functional status of an individual or that affects the structure or function of the body; or past, present or future payment for the provision of health care to an individual; and includes identity information, such as social security number or driver's license number, even if the name is not included, such that the health information is linked to the individual. Protected health information does not include the following:

1. Records covered by the Family Educational Rights and Privacy Act.
2. Employment records held by the entity in its role as employer (although use and dissemination of these records may be subject to other federal and state laws such as the Family and Medical Leave Act and those related to West Virginia Workers' Compensation).

Personally Identifiable Information (PII)- All information that identifies, or can be used to identify, locate, or contact (or impersonate) a particular individual. Personally identifiable information is contained in public and non-public records. Examples may include but are not limited to a specific individual's: first name (including an e-mail address); telephone number or fax number dedicated to contacting the individual at their physical place of residence; social security number; credit and debit card account numbers; financial records, including loan accounts and payment history; consumer report information; mother's maiden name; biometric identifiers, including but not limited to, fingerprints; facial recognition and iris scans; driver identification number; full face image; birth date; birth adoption certificate number; physical description; genetic information; medical, disability or employment records, including salary information; computer information, including information collected through the internet cookie; criminal history, etc. When connected with one or more of the items of information specified above, personally identifiable information includes any other information concerning an individual that, if disclosed, identifies or can be used to identify a specific person physically or electronically.

Sensitive Personally Identifiable Information (SPII)- Those elements of PII that must receive heightened protection due to legal or policy requirements.

**WEST VIRGINIA DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
CONFIDENTIALITY AGREEMENT**

Sensitive PII includes:

- i) Most date elements in State personnel records
- ii) Occupational licensing data
- iii) Driver history records
- iv) State/Federal contacts data
- v) Employment and training program data
- vi) Permits data
- vii) Historical records repository data
- viii) Personnel data
- ix) Inmate data (IMIS)

Very Sensitive includes:

- i) Social Security numbers
- ii) Credit card numbers
- iii) Food assistance programs data
- iv) Criminal history data
- v) Comprehensive law enforcement data
- vi) Foster care data
- vii) Health and Medical data
- viii) Welfare records/data
- ix) Domestic abuse data
- x) Driver license numbers
- xi) Individual financial account numbers
- xii) PREA investigations

Extremely sensitive includes:

- i) State law enforcement investigative records
- ii) Communications systems
- iii) Child and Adult protective services client data

Non-Public Personal Information (NPPI) – Any personally identifiable information collected about an individual, including but not limited to, social security numbers, credit card or bank account numbers, medical or educational records, financial information collected by a financial institution used in connection with providing a financial product or service, or other sensitive, confidential or protected data, unless that information is otherwise publicly available.

Read, Complete appropriate spaces, Sign, Date
Return pages 4 and 5

Policy Directive 153.00
01 August 2013
Attachment #7
Page 4 of 5

**WEST VIRGINIA DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
CONFIDENTIALITY AGREEMENT**

✓ _____ Initial

This agreement, including the attached overview, is entered into between the West Virginia Division of Corrections, a division of the West Virginia Department of Military Affairs and Public Safety (hereinafter DMAPS and both hereafter combined as Authority) and ✓ _____ (hereinafter the User). The User is considered: an Employee, a Consultant, a Vendor, or Other, please specify ✓ _____. West Virginia Division of Corrections, DMAPS and the User are jointly referred to as the Parties throughout this agreement).

All of the Parties agree as follows:

It is understood between the Parties that during the terms of the User's Employment, Contract, or Other, that the User will only collect such protected Non-Public Personal Information (NPPI), Personally Identifiable Information (PII), Sensitive Personally Identifiable Information (SPII), and Protected Health Information (PHI) or other confidential information in conformance with Authority's policy, procedures and rules.

It is also understood between the Parties that during the terms of the User's Employment, Contract, or Other to the extent that the User has a need-to-know such information, the User may have access to protected NPPI, PII, SPII, and PHI or other information deemed confidential, in either paper, electronic or verbal form.

The User agrees not to disclose to anyone, directly or indirectly, any such NPPI, PII, SPII, and PHI or other confidential information, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the Authority's policies, procedures, rules, or state or federal law. If information-specific releases, provisions, and restrictions do not exist, then User agrees to disclose confidential information only (1) upon approval of Authority's counsel or designee; and/or (2) with individuals who are known by the User to have prior authorization by their superior to have access to the data or information. All the above applies to the release of information in total or fragmented form. Further, the User agrees not to misuse any media, documents, forms or certificates in any manner which might compromise the confidentiality or security, or otherwise be illegal or against Authority's policies, procedures or rules, such as altering a record, using a certificate improperly, etc.

The User understands it is the responsibility of the User to request clarification from the User's immediate supervisor that if there are questions about the confidentiality of information or its collection, use or release.

Return

**WEST VIRGINIA DEPARTMENT OF MILITARY AFFAIRS AND PUBLIC SAFETY
CONFIDENTIALITY AGREEMENT**

Any document, report, study, article or other written information in whatever format, prepared by the User or information in whatever format that might be given to the User in the course of their Employment, Contract, or Other, and any software, computer equipment, and/or any other property including, but not limited to, copyrighted materials that may be available from time to time, is the exclusive property of the Authority and shall remain in the Authority's possession except as otherwise specifically permitted by the Authority. The User understands that all access to information is subject to monitoring and audit.

The User understands that even when the User no longer has access to records of the Authority, the User is still bound by this document and must continue to maintain the confidentiality of information to which access was previously given.

By signing below, the User acknowledges reading and understanding the contents of this document and understands that any improper collection, use or disclosure of NPPI, PII, SPII, and PHI or other information deemed confidential may result in disciplinary action. In addition, the Authority reserves the right to seek any remedy available at law or in equity for any violation of this agreement.

Authority: _____

By: _____ Its: _____


Date: _____

✓ User: *(print)* _____

✓ By: *(sign)* _____ Its: _____

✓ Date: _____

West Virginia Division of Personnel




DRUG- AND ALCOHOL-FREE WORKPLACE

I. PURPOSE

- A. The purpose of this policy is to establish clear and uniform guidelines in accordance with federal and State regulations regarding alcohol, drugs, or controlled substances, including the provisions of the Drug-Free Workplace Act of 1988.
 - 1. Further, the purpose of this policy is to make every effort to institute and maintain a drug- and alcohol-free workplace.
 - 2. This policy shall cover all independent contractors, volunteers, and employees of the State of West Virginia, including executive, administrative, classified, non-classified, exempt, and temporary employees, and employees of county health departments affiliated with the West Virginia Division of Personnel.
- B. The policy's goal is to comply with the Drug-Free Workplace statute and to eliminate the presence and/or use of alcohol and illegal drugs in the workplace.
 - 1. Further, the intent of this policy is to ensure that State government workplaces are safe, productive, and secure for independent contractors, volunteers, employees and citizens.
 - 2. This policy prohibits the use of alcohol and/or illegal drugs in the workplace as such use may affect an independent contractor's, volunteer's, or employee's job performance; bring discredit upon the reputation of the State of West Virginia, as the employer, and/or threaten the safety of independent contractors, volunteers, employees, individuals entrusted to the care of the State, and the general public.

II. DEFINITIONS

- A. Alcoholic Liquors: These include alcohol, beer, wine and spirits, and any liquid or solid containing alcohol and capable of being used as a beverage.
- B. Independent Contractor: Any department, division, unit, or any person responsible for the performance of work under a contract.
- C. Controlled Substance: A federally-regulated substance listed in Exhibit A and/or Schedules I through V of Section 202 of the Controlled Substance Act (21 U.S.C. 812) and West Virginia Code § 60A-2-201, et seq., that when taken into the body, may impair one's mental faculties and/or physical performance.
- D. Conviction: A finding of guilt, (including a plea of nolo contendere) or the imposition of a sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or State criminal drug statutes.
- E. Criminal Drug Statute: A criminal statute involving the manufacture, distribution, dispensation, use, or possession of any controlled substance.

 **West Virginia Division of Personnel**

DRUG- AND ALCOHOL-FREE WORKPLACE

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- F. **Employee:** Any person who works full-time or part-time, including management, or temporary staff who are directly engaged in the performance of work for a State employer.
- G. **Federal Agency:** Any agency as that term is defined in Section 552(f) of the Title IV, United States Code.
- H. **Grantee:** Any department, division, unit, or any person responsible for the performance of work under the provisions of a federal grant.
- I. **Legal Drug:** Legal drugs include medications prescribed by a physician, and over-the-counter medications which have been legally obtained and are being used solely for the purpose for which they were prescribed by a physician or manufactured.
- J. **Illegal Drug:** Any drug which is not legally obtainable and is being used in a manner or for a purpose other than as prescribed. Illegal drugs include those controlled substances under federal or State law which are not authorized for sale, possession, or use, and legal drugs which are obtained or distributed illegally.
- K. **Workplace:** A work site where service or work is performed in connection with an independent contractor's, volunteer's, or employee's public employment or service. The workplace shall include facilities, property, buildings, offices, structures, automobiles, trucks, trailers, other vehicles, and parking areas provided by the State, even if not owned, leased, or operated by the State.
- L. **Volunteer:** Any authorized individual not receiving compensation while directly engaged in the performance of services for a State employer.

III. POLICY


- A. It is the policy of West Virginia State government to ensure that its workplaces are free of alcohol, illegal drugs and controlled substances by prohibiting the use, possession, purchase, distribution, sale, or having such substances in the body system. Although the sale and use of alcohol by an adult may be legal, the possession, use, distribution, or dispensation of alcohol in the workplace is strictly prohibited.
- B. This policy is applicable while independent contractors, volunteers, and employees are engaged in any work service-related activity which includes performance of agency business. Work/service-related activity includes, but is not limited to, conducting work service, representing the State or the agency, receiving awards, speaking as a State or agency representative, and participation in receptions when invited as a result of State employment service.
- C. The possession, use, distribution, or dispensation of alcohol; the reporting to work under the influence of alcohol, or having alcohol in the body system at work, whether the alcohol was consumed at work or away from work, are all prohibited in the workplace. When reasonable suspicion exists that an independent contractor, volunteer, or employee has reported to work under the influence of alcohol, illegal drugs, or is impaired due to abuse or misuse of controlled substances or prescribed medications, the individual may be subject to assessment and disciplinary action or termination of service agreement.



DRUG- AND ALCOHOL-FREE WORKPLACE

POLICY

- D. The unlawful possession, use, manufacture, distribution, or dispensation of a controlled substance or illegal drug; the reporting to work under the influence of a controlled substance or illegal drug; having an illegal drug in the body system; or possession of drug paraphernalia are all prohibited in the workplace.
- E. As a condition of employment/service with the State of West Virginia, independent contractors, volunteers, and employees shall:
 - 1. Abide by the terms of this policy;
 - 2. Notify their supervisor or department head of any criminal drug statute conviction for a violation occurring in the workplace, no later than 5 days after such conviction, and
 - 3. Sign the "Employee Drug Awareness Certification Form" or "Independent Contractor Volunteer Drug Awareness Certification Form."
- F. It shall be the responsibility of the Division of Personnel to establish a drug awareness program for independent contractors, volunteers, and State employees to provide training on the following:
 - 1. The Employee Referral Program;
 - 2. The dangers of alcohol use or drug abuse in the workplace;
 - 3. The establishment and maintenance of a drug- and alcohol-free workplace;
 - 4. The penalties for the use or possession of illegal drugs or alcohol in the workplace, and
 - 5. The availability of literature concerning the abuse of alcohol and or drugs as well as treatment alternatives.
- G. It shall be the responsibility of each agency to:
 - 1. Maintain a copy of the Drug- and Alcohol-Free Workplace Policy in an accessible location and display its Poster in a central location.
 - 2. Include a copy of the policy in every orientation packet for new independent contractors, volunteers, and employees.
 - 3. Maintain the signed "Employee Drug Awareness Certification Form" in each employee's agency personnel file or the signed "Independent Contractor Volunteer Drug Awareness Certification Form" on file.
 - 4. Enforce the policy and take appropriate action against individuals who are convicted or violate the policy within 30 days from the date of the conviction or violation.
 - 5. Promptly deal with any possession, consumption, and or distribution of alcohol, an illegal drug or controlled substance in the workplace, in accordance with legal and administrative disciplin-

 *West Virginia Division of Personnel*

DRUG- AND ALCOHOL-FREE WORKPLACE

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ary procedures. Supervisors should contact their respective agency personnel office or individual designated by the appointing authority for guidance. However, in emergency situations supervisors should first ensure the safety of others and then immediately contact 911, appropriate law enforcement officials, or agency security. Agencies in Kanawha county may also contact the Division of Protective Services at 558-9911 for assistance.

- a. Employees who are in violation of the provisions of the Drug-Free Workplace Act, or this policy, shall be subject to disciplinary action, up to and including dismissal, and may be required to participate in a drug rehabilitation program. Independent contractors and volunteers shall be subject to the termination of the service agreement.
 - b. State agencies who are independent contractors or grantees of federal contracts or grants amounting to at least \$25,000 are subject to suspension of payments and termination of the contract or grant for violations of any of the requirements of a drug-free workplace if they make a false initial certification, or if the number of drug-related convictions of employees indicates that the employer has not made a good faith effort to maintain a drug-free workplace.
6. Provide training to every employee, including supervisors and managers, concerning the Drug and Alcohol-Free Workplace Policy.

IV. REFERENCES

- A. Drug-Free Workplace Act, 41 U.S.C. Sections 701-707.
- B. West Virginia Code § 60A-2-201 et seq. and applicable federal statutes.

V. EFFECTIVE DATE: October 1, 1991.

VI. REVISIONS

- A. Previous Revisions: January 16, 2003
- B. Latest Revision: October 1, 2004


VII. POLICY NUMBER: DOP-P2

Approved and Issued By:


Willard M. Farley, Acting Director of Personnel

Date Signed: October 1, 2004.

Read, Complete Appropriate Space, Sign, Date, Return

West Virginia Division of Personnel  **DRUG- AND ALCOHOL-FREE WORKPLACE** POLICY

EMPLOYEE DRUG AWARENESS CERTIFICATION FORM

✓ I, _____, certify that I have received a copy of the West Virginia State Drug- and Alcohol-Free Workplace Policy.

I agree to abide by the terms of the policy and I am aware that with any violation of this policy, I will be subject to disciplinary action, up to and including dismissal. I may also be required to participate in a drug-abuse assistance or drug-rehabilitation program.

In addition, I understand that under federal law and as a condition of employment, if I am convicted of any violation of a criminal drug offense in the workplace, I must report this conviction to my supervisor and the appointing authority within five days of the conviction.

✓ _____
Name (Print)

✓ _____
Signature

✓ _____
Date

RETURN THIS FORM TO YOUR IMMEDIATE SUPERVISOR

**PROHIBITED WORKPLACE HARASSMENT**

NOTE: This policy replaces Interpretive Bulletin DOP-B6 (Prohibited Workplace Harassment).

- I. PURPOSE:** The purpose of this policy is to prescribe a work environment where illegal harassment based on sex (with or without sexual conduct), race, color, religion, national origin, ancestry, age, disability, and protected activity (i.e., opposition to prohibited discrimination or participation in the complaint process) or status explicitly defined as protected under applicable State and federal law as well as nondiscriminatory hostile workplace harassment does not occur. Employees have the right to be free from harassment while in a State government workplace, and the State has the legal obligation to ensure that such harassment does not occur and that effective means of redress are available. This policy shall cover all independent contractors, volunteers, and employees of the State of West Virginia, including executive, administrative, classified, non-classified, exempt, and temporary employees, and employees of county health departments affiliated with the West Virginia Division of Personnel.

II. DEFINITIONS

- A. **Appointing Authority:** The executive or administrative head of a unit of State government who is authorized by statute to appoint employees in the classified or classified-exempt service.
- B. **Discriminatory Hostile Work Environment Harassment:** Illegal harassment based on sex (with or without sexual conduct), race, color, religion, national origin, ancestry, age, disability, and protected activity (i.e., opposition to prohibited discrimination or participation in the complaint process), or status explicitly defined as protected under applicable State and federal law.
- C. **Employee:** Any person who lawfully occupies a permanent or temporary position with the State, or any affiliated political subdivision, and who is paid a wage or salary including, but not limited to, executive, administrative, classified, non-classified, exempt, seasonal and temporary employees, and employees of county health departments affiliated with the West Virginia Division of Personnel. For the purpose of this document, "employee" shall also include authorized students and interns performing services for an employer under direct supervision irrespective of receipt of wages.
- D. **Employer:** The State or any affiliated political subdivision including, but not limited to, executive, administrative, classified, non-classified, exempt, and county health departments affiliated with the West Virginia Division of Personnel.
- E. **Equal Employment Opportunity (EEO) Coordinator/Counselor:** The agency employee selected by an appointing authority to advise employees and management concerning proper EEO procedures and to function as a liaison with the State EEO Office.
- F. **Hostile Work Environment Sexual Harassment:** A type of illegal sexual harassment based on gender that is sufficiently severe and pervasive as to alter the conditions of the employee's employment and create a hostile and abusive working environment.
- G. **Independent Contractor:** Any entity or person responsible for the performance of work under a contract.



PROHIBITED WORKPLACE HARASSMENT

- H. **Nondiscriminatory Hostile Workplace Harassment:** A form of harassment commonly referred to as "bullying" that involves verbal, non-verbal or physical conduct that is not discriminatory in nature but is so atrocious, intolerable, extreme and outrageous in nature that it exceeds the bounds of decency and creates fear, intimidates, ostracizes, psychologically or physically threatens, embarrasses, ridicules, or in some other way unreasonably over burdens or precludes an employee from reasonably performing her or his work.
- I. **Quid Pro Quo Sexual Harassment:** Meaning "this for that" or "something for something," a type of illegal sexual harassment in which the satisfaction of a sexual demand is used as the basis of a tangible employment action.
- J. **Retaliation:** Adverse action pertaining to any aspect of employment (hiring, firing, pay, job assignments, promotions, layoff, training, fringe benefits, and any other term or condition of employment) taken against an individual for participating in a complaint and/or investigation process. For the purpose of this policy, retaliation shall also include actions taken against such an individual by the accused or other employees.
- K. **Sexual Harassment:** A type of illegal harassment which involves any unsolicited and unwelcome sexual advances, requests for sexual favors, or other verbal, written, or physical conduct of a sexual nature when:
1. Submission to such conduct is made either explicitly or implicitly as a term or condition of an individual's employment;
 2. Submission to or rejection of such conduct is used as the basis for personnel actions affecting an employee; or,
 3. Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance by creating an intimidating, hostile, or offensive working environment.
- L. **State EEO Office:** The State agency authorized by Executive Order to direct all aspects of the statewide EEO program to prevent unlawful employment discrimination and to promote diversity in West Virginia State government.
- M. **Third-party Harassment: Hostile Environment or Quid Pro Quo Harassment** in which:
1. An employee is harassed by a non-employee such as a client or vendor;
 2. An employee harasses a non-employee with whom the agency has a business relationship; or,
 3. An employee believes that a hostile environment exists due to a sexual relationship involving two other employees.
- N. **Volunteer:** Any authorized individual directly engaged in the performance of services for a State employer without promise, expectation, or receipt of compensation.
- O. **Workplace:** A worksite where service or work is performed in connection with an independent contractor's, volunteer's, or employee's public employment or service, including sites of social



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functions and conferences. The workplace includes, but is not limited to, facilities, property, buildings, offices, structures, automobiles, trucks, trailers, other vehicles, and parking areas provided by the State, even if not owned, leased, or operated by the State.

- P. Work-/service-related Activity: Includes, but is not limited to, conducting work/service, representing the State or the agency, receiving awards, speaking as a State or agency representative, and participating in receptions when invited as a result of State employment/service.

III. POLICY

- A. Illegal harassment is prohibited by the West Virginia Human Rights Act and Title VII of the Civil Rights Act of 1964 where such conduct has the purpose or effect of interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.
- B. Although some harassment may not violate existing discrimination laws, such behavior can result in a tort claim for intentional infliction of emotional distress. As such, all forms of harassment are prohibited.
1. This policy extends to employees while engaged in any work-/service-related activity which includes the performance of agency business.
 2. Further, this prohibition applies to independent contractors and volunteers while engaged in any work-/service-related activity in a workplace owned, leased, or operated by a public agency or entity.
 3. Any employee found to be in violation of this policy will be subject to disciplinary action up to and including dismissal.
- C. Management is potentially liable for acts of harassment in the workplace whether or not the source or target of harassment is another employee or a non-employee.
1. Liability for such acts can be imputed on the employer, unless the employer demonstrates that immediate and appropriate corrective action was taken upon notice of the improper conduct.
 2. Employees may also be held personally liable for harassment.
 3. Employees who experience third-party harassment shall also have standing to file claims for discrimination or harassment where employment opportunities or benefits are granted or a hostile environment is created because of an individual's submission to the employer's sexual advances or requests for sexual favors.
- D. Illegal harassment prohibited by State and federal anti-discrimination laws which includes words, conduct, or action, usually repeated or persistent, directed at a specific person that annoys, alarms, or causes substantial emotional distress in that person and serves no legitimate purpose.



PROHIBITED WORKPLACE HARASSMENT

- E. There are two legally recognized types of sexual harassment claims: (1) Quid Pro Quo Sexual Harassment, and (2) Hostile Work Environment Sexual Harassment. Such harassment involves verbal and/or physical conduct which may include, but is not limited to:
1. Sexually explicit or implicit propositions;
 2. Improper questions about an employee's private life;
 3. Sexually discriminatory ridicule, insults, jokes, or drawings;
 4. Undesired, intentional touching such as embracing, patting, or pinching;
 5. Remarks directed against one's sex as a class or group;
 6. Threatened, attempted, or actual sexual assault or rape;
 7. Repeated sexually explicit or implicit comments or obscene and suggestive remarks that are unwelcome or discomfiting to the employee;
 8. Offers of tangible employment benefits in exchange for sexual favors, or threats or reprisals for negative responses to sexual advances; and/or,
 9. Sexual harassment by a supervisor of an employee of the same sex.
- F. Although the scope of The Civil Rights Act of 1964 does not extend to protect employees that are not members of a protected class from unlawful employment discrimination, an employee can still impute liability upon an employer for the infliction of emotional distress if the employer fails to take corrective action when an employee provides notice of nondiscriminatory workplace harassment that has subsequently created a hostile work environment for the employee.
- G. Nondiscriminatory Hostile Workplace Harassment consists of unreasonable or outrageous behavior that deliberately causes extreme physical and/or emotional distress. Such conduct involves the repeated unwelcome mistreatment of one or more employees often involving a combination of intimidation, humiliation, and sabotage of performance which may include, but is not limited to:
1. Unwarranted constant and destructive criticism;
 2. Singling out and isolating, ignoring, ostracizing, etc.;
 3. Persistently demeaning, patronizing, belittling, and ridiculing; and/or,
 4. Threatening, shouting at, and humiliating particularly in front of others.

IV. COMPLAINT AND INVESTIGATION

- A. It is important to note that **Nondiscriminatory** Hostile Workplace Harassment claims are not within the jurisdiction of the State EEO Office.

1. Employees must address such complaints through their manager/supervisor, the West Virginia Public Employees Grievance Procedure, or litigation.
 2. Complaints regarding illegal harassment shall be handled in accordance with established EEO procedures.
 3. All information shall be held in strictest confidence and shall be disclosed only to appropriate individuals on a need-to-know basis to investigate and resolve the matter.
- B. While an individual alleging illegal harassment has a duty to promptly report the incident or complaint to the agency's EEO Coordinator/Counselor or his or her immediate supervisor, the individual also has the right to file such complaints with the West Virginia Human Rights Commission and/or the United States Equal Employment Opportunity Commission (EEOC).

V. RESPONSIBILITIES

- A. Employees have the responsibility to:
1. Refrain from all forms of harassment.
 2. Promptly report allegations or observations of harassment to the appropriate individuals (i.e., supervisor, manager, EEO Coordinator/Counselor, or human resources).
 3. Fully cooperate in and not interfere with any employer-authorized investigation.
 4. Not retaliate against those who participate in the complaint and/or investigation process.
 5. Participate in required training.
 6. Acknowledge understanding of and compliance with this policy by signing the Prohibited Workplace Harassment Acknowledgment Form (Appendix A).
- B. Appointing authorities have the responsibility to:
1. Monitor the work environment to ensure that it is free of harassment.
 2. Promptly investigate complaints of harassment.
 3. Enforce this policy and take immediate and appropriate action to address violations.
 4. Ensure that complainants, falsely accused individuals, and/or persons interviewed regarding complaints suffer no adverse impact in their employment or retaliation.
 5. Ensure that confidentiality is maintained by keeping all information regarding a complaint of harassment in a separate, confidential file with access restricted to appropriate individuals on a need-to-know basis.



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6. Ensure that all employees receive appropriate training and that supervisory personnel complete Division of Personnel training on the Prohibited Workplace Harassment policy.
7. Ensure that all required reports are provided to the State EEO Office.
8. Post the Prohibited Workplace Harassment Poster (Appendix B) at conspicuous locations throughout the agency.
9. Communicate this policy to all employees through inclusion in the orientation process of all new employees, and by making it readily available at all work locations.
10. Maintain the signed Prohibited Workplace Harassment Acknowledgment Form (Appendix A) in each employee's agency personnel file.

VI. REFERENCES


A. Federal

1. U.S. Const., amend. XIV.
2. Executive Order 11246 of 1965, as amended.
3. 8 USC 1324 et seq., (Immigration Reform and Control Act of 1986).
4. 29 USC 206(d) et seq., (Equal Pay Act of 1963, as amended).
5. 29 USC 621, et seq., (Age Discrimination in Employment Act of 1967, as amended).
6. 29 USC 701 et seq., (Rehabilitation Act of 1973).
7. 29 USC 791 et seq., (Rehabilitation Act of 1992).
8. 29 USC 2601 et seq., (Family and Medical Leave Act of 1993).
9. 38 USC 4301 et seq., (Uniform Services Employment and Re-employment Rights Act of 1994).
10. 42 USC 1981 et seq., (Civil Rights Act of 1991).
11. 42 USC 12101 et seq., (Americans with Disabilities Act of 1990).
12. 42 USCA 12101 et seq., (Americans with Disabilities Act Amendments Act of 2008).
13. 42 USC 2000e(k) (Pregnancy Discrimination Act of 1978).
14. 42 USC 2000d-2000d-7, (Civil Rights Remedies Equalization Act of 1986).
15. 42 USC 2000e et seq., (Title VII of the U.S. Civil Rights Act of 1964, as amended).
16. 42 USC 2000ff et seq., (Genetic Information Nondiscrimination Act of 2008).
17. 29 CFR 1600-1699 (EEOC Uniform Guidelines).

B. State

1. West Virginia Code § 5-11-1 et seq., West Virginia Human Rights Act.
2. West Virginia Code § 5-15-1 et seq., White Cane Law.
3. West Virginia Code § 21-3-19, Discrimination for use of tobacco products prohibited.
4. West Virginia Code § 21-5-17, Employers prohibited from discharging employees for time lost as volunteer firemen or emergency medical service attendant.
5. West Virginia Code § 21-5-18, Employers prohibited from discharging employees for time lost as emergency medical service personnel.
6. West Virginia Code § 21-5E-1 et seq., Equal Pay for Equal Work for State Employees.

West Virginia Division of Personnel



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7. West Virginia Code § 23-5A-3, Termination of Injured Employee Prohibited; re-employment of injured employees.
8. West Virginia Code § 52-3-1, Discrimination for Jury Service.
9. Executive Order No. 3-94 (April 30, 1994).

VII. EFFECTIVE DATE: May 1, 1993 (this effective date pertains to the original DOP-P6 Policy, Sexual Harassment Prohibited).

VIII. REVISIONS

A. Previous Revisions

1. Pertaining to the original DOP-P6 Policy, Sexual Harassment Prohibited: July 15, 1994, October 20, 1994, and January 1, 2004.
2. Pertaining to the Interpretive Bulletin: January 1, 2005 and December 1, 2006.

B. Latest Revision: December 1, 2011.

IX. POLICY NUMBER: DOP-P6.

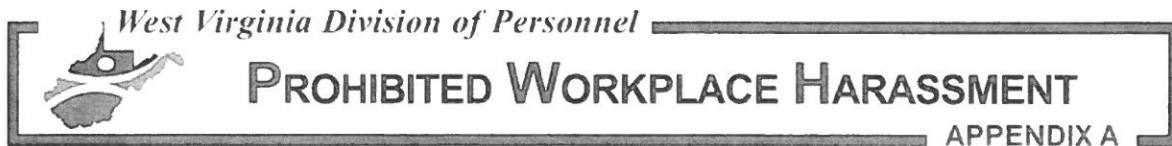
Approved and Issued By:



Sara P. Walker, Director of Personnel

Date Signed: November 29, 2011.

Read, Complete Appropriate Spaces, Sign, Date, Return



POLICY ACKNOWLEDGMENT FORM

I, _____, certify that I have received a copy of the West Virginia Division of Personnel Prohibited Workplace Harassment policy (DOP-P6).

I understand that illegal harassment based on sex (with or without sexual conduct), race, color, religion, national origin, ancestry, age, disability, and protected activity (i.e., opposition to prohibited discrimination or participation in the complaint process.) or status explicitly defined as protected under applicable State and federal law, as well as nondiscriminatory hostile workplace harassment, is prohibited and will not be tolerated in the workplace. Further, I understand my responsibility to promptly report allegations of illegal harassment, fully cooperate in and not interfere with any authorized investigation, and not retaliate against those who participate in the complaint and/or investigation process.

My signature acknowledges my receipt of the policy and my understanding of its contents and requirements. My signature does not indicate that I agree or disagree with the content of the policy. However, I understand I must abide by the terms of the policy and I am aware that with any violation of this policy, I will be subject to disciplinary action, up to and including dismissal.

Employee's Name (Print)

Employee's Signature

TO BE COMPLETED BY SUPERVISOR

I, _____, certify that I have discussed with and provided the above listed employee a copy of the West Virginia Division of Personnel Prohibited Workplace Harassment policy (DOP-P6).

Supervisor's Name (Print)

Supervisor's Signature

Date

Distribution: Original – Human Resources
Copy – Employee

PROHIBITED WORKPLACE HARASSMENT

Illegal harassment based on sex (with or without sexual conduct), race, color, religion, national origin, ancestry, age, disability, genetics, and protected activity (i.e., opposition to prohibited discrimination or participation in the complaint process), or status explicitly defined as protected under applicable State and federal law, as well as nondiscriminatory hostile workplace harassment (bullying), is prohibited in the workplace.

If you feel you are a victim of illegal harassment, you have a duty to promptly report the incident to your agency's Equal Employment Opportunity (EEO) Coordinator/Counselor or your supervisor. In addition, you have the right to file a complaint/grievance with the:

- West Virginia Equal Employment Opportunity Office: 304-558-0400
- West Virginia Public Employees Grievance Board: 304-558-3361
- West Virginia Human Rights Commission: 304-558-2616
- United States Equal Employment Opportunity Commission: 800-669-4000; 800-669-6820(TTY)

If you feel you are a victim of nondiscriminatory hostile workplace harassment, you should immediately notify your manager or human resources office. You may also file a grievance with the West Virginia Public Employees Grievance Board.

If you believe you have witnessed harassment of another, please report the incident(s) to your agency EEO Coordinator/Counselor, supervisor, or human resources office.

If you have questions about the West Virginia Division of Personnel's statewide Prohibited Workplace Harassment policy, you may contact the Employee Relations Section at 304-558-3950 ext 57209.

WRITTEN POLICY AVAILABLE FROM

West Virginia Division of Personnel
State Capitol Complex, Building 6, Room 416
304-558-3950 ext. 57209

OR ON THE WEB AT: www.personnel.wv.gov