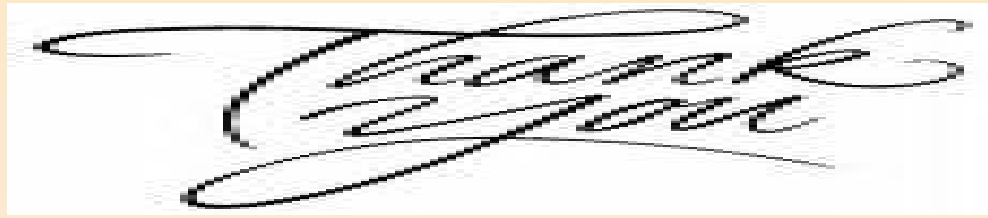




# Volunteer Orientation

## **Wayne County Correctional Facility**



- We appreciate it your interest in volunteering at the Wayne County Correctional Facility. In order for safety in the Correctional facility, various types of information will be required before entering the facility.
- Once you are approved the Director of Inmate Services will set up a schedule with you to volunteer in our facility.

# Criminal History Check

- You will have to fill out a criminal history background check
- The background checks of all volunteers are conducted in order to obtain security clearance necessary to receive access to inmates housed in our facility.

# Searches

- Every volunteer is subject to search
- Please make sure all materials for programs that are brought into the facility will be checked by Officers before going through the gates
- All materials are counted before entering the facility; and counted when leaving the facility

# Volunteer Emergency Medical Information

- We encourage all volunteers to fill out the form of emergency medical information if ever in the event that an emergency happened while doing the program at the facility.
- Also if you have any medications that you keep on you at all times please notify the Director of Inmate Services, DW o



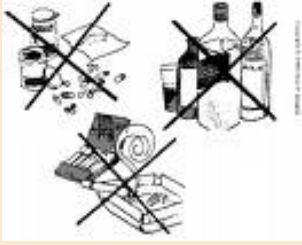
# Rules for Volunteers

- **Always** come in with a photo ID
- Leave personal belongings in your vehicle or in the lockers provided outside near the entrance
- If you are to bring anything into the facility for your program; you will need approval from the Director of Inmate Services
- Items that can be used as weapons are **not** allowed in the prison

**RULES**

- Do **not** reveal or discuss personal information involving yourself or another staff member in front of inmates
- Do **not** carry any mail or messages inside or outside of the facility for any inmate
- Do **not** give any legal advice to inmates
- You must notify the Director of Inmate Services if you discover that you have a relative or acquaintance in the facility
- If you think an inmate is going to harm themselves or others please notify staff **immediately**





- Anyone who enters the facility and is under the influence of drugs or alcohol will **not** be permitted to enter the facility
- If you feel threatened by an inmate you must report this **immediately** to the Director of Inmate Services or any available staff member.



# Volunteer Waiver



- All volunteers must sign a waiver stating that they have been informed by the Director of Inmate Services that you are entering a secure area of the facility is potentially dangerous. Any direct interaction with any inmate could prove to be dangerous because of the possibility of an assault upon an inmate / inmates.



- The volunteer will sign that they are assuming the risk of personal injury to themselves or damage to your personal effects. That also the volunteer will hold harmless the Warden, officials and employees of the Wayne County Correctional Facility and Wayne County from any and all legal liability.



# Contact with Offenders and Ex-Offender Policy

- Ensure that all volunteer contacts with offenders and ex-offenders are conducted in a professional manner.
- Volunteers will not display favoritism treatment toward one inmate or a group of inmates over another
- Volunteers will not be able to give gifts, favors or provide any services beyond those required by the WCCF

# Standards of Volunteer Conduct

- Volunteers may not allow themselves to become emotionally, physically, sexually, or financially involved with inmates, former inmates, or the families of inmates or former inmates. Chaplains, psychologists, and psychiatrists may continue a previously established therapeutic relationship with a former inmate in accordance with their respective codes of professional conduct and responsibility

- A volunteer may not offer or give to an inmate or former inmate any article, favor, or service, which is not authorized. Neither shall a volunteer accept any gift, personal service, or favor from an inmate or former inmate. If this shall happen it must be reported.
- Volunteers shall avoid situations that give rise to a conflict of interest or the appearance of a conflict of interest.

# Contraband

- The introduction of contraband into or upon the grounds of the WCCF without the Warden's knowledge and consent is **prohibited**. Contraband is defined as any material that can reasonable be expected to cause physical injury or adversely affect the security, safety, or good order of the institution.

- Volunteers failing to abide by these conditions or who violate the restrictions of these policies will be subject to termination of services.
- Volunteers will have to sign a waiver stating they understand the policies, if there is any questions please don't hesitate to ask the Director of Inmate Services, Warden or Deputy Warden.

# Thank You

- Once again we thank you for your time and dedication for volunteering at the Wayne County Correctional Facility







**Wayne County Correctional Facility**  
**44 Mid-Wayne Drive Honesdale PA 18431**  
**PHONE: (570) 253-5970    FAX: (570) 253-3928**

***Kevin Bishop***

***John Masco***

***Justin J. Rivardo***

***Warden***

***Deputy Warden***

***Director of Inmate Services***

Dear Volunteer,

Thank you so much for your interest in becoming a volunteer at the Wayne County Correctional Facility. With your knowledge and ability you can help improve the lives of the inmates at our facility is greatly appreciated.

In order for safety in the correctional facility, various types of information will be required before we can approve your entry into the facility as a volunteer. A background investigation of all volunteers is conducted in order to obtain security clearance necessary to receive access to inmates housed in our facility. Please fill out the attached forms and return to the Director of Inmate Services. Upon your arrival you will need to provide your driver's license in order for us to make a copy to keep in your volunteer folder.

Once you are approved, the Director of Inmate Services will set up a schedule for you to volunteer at our facility. Once again, we thank you for your time and dedication for volunteering at the Wayne County Correctional Facility.

Sincerely,

***Justin J. Rivardo***

Acting Director of Inmate Services

**Wayne County Correctional Facility**  
**44 Mid-Wayne Drive Honesdale PA 18431**  
**PHONE: (570) 253-5970    FAX: (570) 253-3928**

**Rules and Regulations for Volunteers**

- Volunteers will have to bring in a photo –ID
- Volunteers are to leave your personal belongings in your vehicle or in the lockers located outside the walk in area
- Volunteers will have to have prior approval from the Director of Inmate Services for any materials to be brought into the facility
- Items which can be used as weapons are NOT allowed in the prison
- Volunteers should not reveal or discuss personal information involving yourself or another staff member in front of inmates, which include:
  - Home or cell phone number
  - Employer’s phone number
  - Relatives or friend’s phone number
  - Home address
  - Places you commonly visit
  - Any other information construed as personal
- Do not carry any mail or messages (verbal or written) inside or outside the facility for any inmate
- Do not give any legal advice to inmates
- Do not give any item to an inmate which is considered contraband or is not permitted according to policy
- Volunteers must notify the Director of Inmate Services if you discover that you have a relative or acquaintance in the facility
- If volunteers think an inmate is going to harm themselves or others, or is planning to escape you must notify a member of the correctional staff immediately
- A volunteer who enters the facility and is under the influence of drug or alcohol or is suspected of being in an intoxicated state will not be permitted to enter the facility

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- If a volunteer ever feels threatened by an inmate must report this immediately to the Director of Inmate Services or Correctional staff.

**For security reason certain items are not allowed to be carried in the facility by volunteers this includes:**

Knives of any kind	Drinks	Fingernail clippers	Cameras
Pepper spray	Cell phones	Cigarettes	Coats
Matches	Hats	Medicine	Purses
Drugs	Food	Gum	Candy

## **Volunteer Policy**

### **Contact with Offenders & Ex-Offenders:**

**Policy** It is the policy of the Wayne County Prison to ensure that all volunteer contacts with offenders and ex-offenders are conducted in a professional manner. For the purpose of this policy, the term “inmates” refers to inmates and former inmates of the Wayne County Correctional Facility or other correctional or detention facilities.

**Procedural Overview** Volunteers will interact with inmates in a respectful and personable manner, treating them humanely and protecting against violations of their rights. No profane, demeaning, indecent, ethnic, or other discriminatory language or references will be directed toward any inmate. Abuse, any form of corporal punishment, or the use of exercise as punishment is prohibited. Volunteers failing to abide by these conditions, or who violate the restrictions of this policy will be subject to termination of services. Ongoing volunteer contracts with former inmates or their families and close associates will be limited to those persons with whom the employee was acquainted or associated before the inmate’s entry into the Wayne County Correctional Facility. In such cases, before making such contacts the volunteer is obligated to advise the Director of Inmate Services the extent and history of the relationship.

- ! Volunteers will not engage in any of the following kinds of activities in regard to inmates or their family members and close associates.
- ! Display favoritism or preferential treatment toward one inmate or group of inmates over another;

**Wayne County Correctional Facility**  
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- ! Give gifts, favors or provide any services beyond those required by the Wayne County Correctional Facility;
- ! Accept for themselves or family members any personal reward, tangible or intangible, or any other consideration; or
- ! Engage in any non-incidental contact outside the jail.

### **Standards of Volunteer Conduct**

**Policy** It is the policy of the Wayne County Correctional Facility to provide for Ethical Rules of Conduct for volunteers to conduct themselves in such a manner that their services will not discredit themselves or the Wayne County Correctional Facility.

#### **Objectives**

- ! Volunteers will conduct themselves in a manner that creates and maintains respect for the Wayne County Correctional Facility
- ! Volunteers will immediately report any violation or apparent violation of Standards of Conduct to the Warden, Deputy Warden or Director of Inmate Services
- ! Volunteers who fail to conduct themselves in accordance with these standards will be subject to termination.

These standards apply to all volunteers of the Wayne County Correctional Facility. Volunteers are subject to certain standards and prohibitions – some statutory, some regulatory, and some a matter of good ethical and moral practice that is essential to the efficiency of the organization.

The Warden of the Wayne County Correctional Facility has the primary responsibility for ensuring that the Standards of Volunteer Conduct are provided and made known to each volunteer. Each new volunteer shall receive and sign for this Policy Statement at the time of appointment. In addition, all volunteers shall receive and sign for any updated versions of this Policy Statement when issued.

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**Personal Conduct** It is essential to the orderly running of the Wayne County Correctional Facility that volunteers conduct themselves professionally. The following are some types of behavior that cannot be tolerated in the Correctional Facility.

**Alcohol/Narcotics:** The use of illegal drugs or narcotics or the abuse of any drug or narcotic at any time is strictly prohibited. Use of alcoholic beverages or being under the influence of alcohol while volunteering is prohibited.

**Sexual Relationships/Contact with Inmates:** Volunteers may not allow themselves to show partiality toward, or become emotionally, physically, sexually, or financially involved with inmates, former inmates, or the families of inmates or former inmates. Chaplains, psychologists, and psychiatrists may continue a previously established therapeutic relationship with a former inmate in accordance with their respective codes of professional conduct and responsibility.

A volunteer may not offer or give to an inmate or a former inmate or any member of his or her family, or to any person known to be associated with an inmate or former inmate, any article, favor, or service, which is not authorized. Neither shall a volunteer accept any gift, personal service, or favor from an inmate or former inmate, or from anyone known to be associated with or related to an inmate or former inmate. If such contact occurs, it must be reported:

A volunteer may not show favoritism or give preferential services to one inmate, or a group of inmates, over another

A volunteer may not use brutality, physical violence, or intimidation toward inmates, or use any force beyond that which is reasonably necessary to subdue an inmate

A volunteer who becomes involved in any situation that might give the appearance of improper involvement with inmates or former inmates or the families of inmates or former inmates must report the contact, to the Warden, Deputy Warden or Director of Inmate Services as soon as practicable. This includes, but is not limited to: telephone calls or written communication with such persons outside the normal scope of employment. Volunteers shall avoid situations that give rise to a conflict of interest or the appearance of a conflict of interest.

**Contraband** The introduction of contraband into or upon the grounds of the Wayne County Correctional Facility, or taking or attempting to take there from, anything whatsoever without the Warden's knowledge and consent, is prohibited. Contraband is defined as any material that can reasonably be expected to cause physical injury or adversely affect the security, safety, or good order of the institution. Contraband includes, but is not limited to, the following:

NO

! Tobacco and tobacco products

! Letters

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- |           |                       |
|-----------|-----------------------|
| ! Stamps  | ! Food                |
| ! Money   | ! Writing material    |
| ! Tools   | ! Messages            |
| ! Weapons | ! Drugs               |
| ! Paper   | ! Alcoholic Beverages |

**Criminal History Check**

Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Drivers Licenses Number & State: \_\_\_\_\_

Are you a US Citizen: Yes\_\_ No\_\_      Social Security Number: \_\_\_\_\_

Do you wear glasses: Yes\_\_ No\_\_      Eye Color: \_\_\_\_\_

Hair Color: \_\_\_\_\_      Weight: \_\_\_\_\_ Height: \_\_\_\_\_

Have you ever been convicted of a crime: If so state number, date, place & nature of conviction?

\_\_\_\_\_  
\_\_\_\_\_

Are you currently on parole, or probation? Yes\_\_\_\_ No\_\_\_\_

If YES please list the name of your supervising probation/parole officer and how they may be contacted:

\_\_\_\_\_  
\_\_\_\_\_

Do you correspond or visit with any inmates: Yes\_\_\_\_ No\_\_\_\_

If so list their location and the individual's name: \_\_\_\_\_

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Program Interested in Volunteering: \_\_\_\_\_

Referred by: \_\_\_\_\_

I hereby authorize release to the Warden of Wayne County Correctional Facility any record of criminal offenses for which I have been arrested and convicted, and any information related to those convictions.

---

*Signature for Authorization to Release Information*

*Print Name*

## **Volunteer Emergency Medical Information**

Person to be contacted in Case of an Emergency: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Relationship: \_\_\_\_\_

Alternate Person to be contacted in case of Emergency: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

Do you have any medications which must be kept on you at all times? \_\_\_\_\_

If so, please list specific medications:

\_\_\_\_\_

List Allergies: \_\_\_\_\_



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Return this form to: Warden Bishop  
Att: Programs/ Justin J. Rivardo  
Wayne County Correctional Facility  
44 Mid-Wayne Drive, Honesdale PA 18431

## Volunteer Waiver

I \_\_\_\_\_ have been informed by the Director of Inmate Services of the Wayne County Correctional Facility that entering the secure area of the facility is potentially dangerous. I have been advised that direct interaction with any inmate could prove to be dangerous because of the possibility of an assault upon my person by an inmate or inmates. I have requested permission to interactively participate in programs with inmates.

It is in my request to be a volunteer at the Wayne County Correctional Facility; I hereby acknowledge that I am assuming the risk of personal injury to myself and/or damage to my personal effects. I hereby hold harmless the Warden, officials and employees of the Wayne County Correctional Facility, and Wayne County from any and all legal liability.

---

Signature

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Correctional Staff of Wayne County Correctional Facility

**Wayne County Correctional Facility**  
**44 Mid-Wayne Drive Honesdale PA 18431**  
**PHONE: (570) 253-5970 FAX: (570) 253-3928**

Return this form to: Warden Bishop  
Attn: Programs/ Justin J. Rivardo  
Wayne County Correctional Facility  
44 Mid-Wayne Drive, Honesdale PA 18431

**I, \_\_\_\_\_ have read and understood, Standards of Volunteer  
Conduct and Contact with Offenders and Ex-Offenders policies.**

**I will abide by these policies, and understand that if there is any infraction of these  
policies, my services at the Wayne County Correctional Facility will be terminated.**

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Signature

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Date

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Director of Inmate Services

Return this form to: Warden Bishop  
Attn: Programs / Justin J. Rivardo  
Wayne County Correctional Facility

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Office use only

Warrant [ ] Yes [ ] No

Criminal Record [ ] Yes [ ] No

# Interview Form for Volunteers

Volunteers name \_\_\_\_\_

Program \_\_\_\_\_

Date of Interview \_\_\_\_\_

Date Volunteer is Starting \_\_\_\_\_

Handed Volunteer Packet \_\_\_\_\_

1. What is your experience with volunteering?

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2. Have you ever volunteered in a prison before?

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3. Are you familiar with any inmate in this facility? And if you are how?

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4. Have you ever been convicted of a crime / date / jurisdiction

---

---

5. Are you currently on parole or probation? If so who is your officer

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6. Is there any material that you will be bringing into the facility when you are volunteering

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7. Read the volunteer packet \_\_\_\_\_

8. Hand in the following sheets that need to be signed :

a. Background Check \_\_\_\_\_

b. Emergency Medical Information \_\_\_\_\_

c. Volunteer Waiver \_\_\_\_\_

d. Policy Standards \_\_\_\_\_

9. When are you available to volunteer

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10. When are you willing to start \_\_\_\_\_

11. Any questions

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Director of Inmate Services