
II. **PURPOSE**: To establish a standard for the statewide management of volunteer and community resources.

III. **APPLICATION**: Tennessee Department of Correction (TDOC) staff, volunteers, and privately managed facilities.

IV. **DEFINITIONS**:

A. **Approving Authority**: For the purposes of this policy, the Warden, Superintendent, District Director or DRC Director.

B. **Community Resource Center (CRC)**: A TDOC organization that provides a wide array of resources, services and community referrals for offenders either released to community supervision or former offenders. The CRC includes community alliances for the purpose of providing physical, social, and economic resources to offenders.

C. **Day Reporting Center (DRC)**: A highly structured, non-residential program that combines supervision, treatment, and re-entry services.

D. **Director of Religious and Volunteer Services**: Designated staff person who is an ordained or endorsed minister in his/her faith group and who remains in good standing and is responsible for overseeing and evaluating all religious and volunteer activities within the Department.

E. **Local Community Resource Board (LCRB)**: A board that is established at each institution, DRC/CRC and district office to coordinate plans for assisting TDOC inmates and probationers or parolees with needs that can be met by volunteers through approved, organized activities.

F. **Outside Clergy**: Ordained or endorsed clergypersons who come into TDOC institutions for the purpose of ministering to inmates.

G. **Tennessee Community Resource Board (TCRB)**: A 17-member Board established by state statute to assist in the statewide development of community and volunteer resources.

H. **Volunteer**: An individual who is not paid by the TDOC and who has successfully completed the volunteer application and certification process for eligibility to volunteer in any TDOC institution or through any TDOC district office.
H. **Volunteer’s Primary Site:** The institution where the volunteer received his/her initial training and certification. This will usually be the institution or district office selected by the volunteer as his/her first choice in the volunteer application and where the volunteer spends the most time.

I. **Volunteer Services Coordinator (VSC) or Community Supervision Volunteer Coordinator (CSVC):** The person appointed by the Warden/Superintendent or District Director to oversee and evaluate all volunteer services within the institution or district office and coordinate any volunteer service function.

J. **Volunteer Services Training Manual:** A manual that contains operating guidelines for VSCs and volunteers.

V. **POLICY:** Tennessee Department of Correction policy shall provide for citizen involvement and volunteer service programs for the benefit of staff, inmates, and probationers/parolees.

VI. **PROCEDURES:**

A. The approving authority shall designate a staff member(s) to be responsible for coordinating the citizen involvement and volunteer service program.

B. The **Volunteer Services Training Manual** shall be read and reviewed by each VSC and CSVC and shall function as the guidelines for the volunteer program. The manual shall be reviewed annually by the Director of Religious and Volunteer Services and revised as necessary. The Assistant Commissioner of Rehabilitative Services shall approve all revisions.

C. An up-to-date schedule of volunteer services shall be posted in each TDOC location in areas where there are high volumes of traffic and which are visible to both staff and inmates. This posting should include a current monthly and weekly schedule to be updated at the beginning of each week.

D. The approving authority shall specify through local policy the lines of authority, responsibility, and accountability for all regular and volunteer staff of the citizen involvement and volunteer service program.

E. **Recruitment, Screening, and Assignment:**

1. Staff members at TDOC institutions or district offices requesting the services of a volunteer should contact the appropriate VSC or CSVC supervising that activity. The VSC or CSVC will submit a written request to approving authority to be approved. All approvals must be submitted to the Director of Religious and Volunteer Services. If the Director of Religious and Volunteer Services approves the request, then the VSC or CSVC shall create an appropriate volunteer job in the database. Upon creation of the volunteer job, an approved volunteer can be assigned that duty.

2. Volunteers shall be recruited from all cultural and socio-economic segments of the community and must be 18 years of age or older. No employee of the TDOC may
volunteer at his/her job site or district office. Persons with sexual abuse or harassment histories shall not have direct contact with inmates or probationers/paroles per federal PREA law.

3. The VSC shall screen and interview each volunteer. The VSC shall document interviews, NCIC background checks, PREA training and reference checks and submit them to the Director of Religious and Volunteers Services/designee to be entered into a Central Office database. All volunteers must complete and pass PREA compliance certification before being permitted to volunteer.

4. Volunteer Services Application and NCIC Background Check
   a. To be considered for a position, any prospective volunteer must complete an online Volunteer Services Application at https://apps.tn.gov/vserv-app/institution to facilitate the processing of NCIC background checks. Outside clergy must also complete Outside Clergy Application, CR-3347.
   b. The VSC or chaplain shall submit an NCIC Criminal History Request, CR-3552, on all prospective volunteers, and outside clergy who wish to become volunteers, within ten working days of receipt of the Volunteer Services Application. The CR-3552 is automatically generated via the volunteer database once an application is submitted. NCIC background checks will automatically be generated by the volunteer database every three years in the month the volunteer began service.
   c. At TDOC facilities, DRCs/CRCs and district offices, NCIC checks shall be reviewed by the appropriate approving authority prior to the volunteer beginning his/her duties. At privately managed facilities, the procedures outlined in Policy #301.04 (Job Requirements) shall be followed concerning the handling of NCIC checks for volunteers. The approving authority may deny an applicant based on criminal background results or if it is believed that the security of the TDOC location or safety of individuals could be jeopardized. When appropriate, the approving authority may terminate a volunteer’s service based on new charges that have occurred since the prior background check. This information shall be entered on the volunteer services database.
   d. The requirements established in Section VI.(E)(4) may be waived by the approving authority for special volunteers (i.e., entertainment, church groups, community sports teams, etc.) and students who enter the facility solely for the purpose of attending a class no more than four times per calendar year, provided they receive acceptable NCIC background checks. VSCs or another appointed designee supervising these activities are required to document such visits in the volunteer services database.

5. Volunteers may provide professional services only when certified or licensed to do so.

6. With written approval of the approving authority, relatives and spouses of employees may work as volunteers at the same work site.
7. Orientation and training for volunteers is mandatory and shall follow the guidelines detailed in the Volunteer Services Training Manual. Active volunteers shall be recertified at the end of their first year of service as a volunteer. Orientation and recertification shall be conducted by the VSC or appointed designee and shall include a review of the Volunteer Services Training Manual; a review of Policies #115.01, #302.05, #305.03, #502.06.1, and #502.06.2; and an explanation of the program in which the volunteer will be working. After a volunteer has been serving for three years, recertification at the volunteer’s primary site will be every three years. Volunteers do not need to be recertified at multiple facilities.

F. Once the volunteer is approved by the approving authority, the VSC shall ensure that each volunteer is issued a Volunteer Badge, CR-2131. The Volunteer Badge, CR-2131, will be color-coded for the primary department in which the individual is volunteering and shall include a photo to be used for identification. The Volunteer Badge, CR-2131 shall be issued within 30 days of the completion of volunteer orientation. Volunteers will check in with their volunteer badge, a driver’s license or other approved photo ID at check point and will be issued a visitor’s badge upon arrival at the facility or district office. The volunteer badge/photo ID shall be relinquished at Central Control. Upon departure, volunteers will be given back their volunteer badge/photo ID. Designated TDOC staff shall make the volunteer badge.

The approving authority shall designate specific days and/or times for approved volunteers to be photographed and issued a volunteer badge. Additional days may be scheduled as needed. Volunteers approved to provide services at more than one location shall utilize the same ID badge for each site. Privately managed facilities shall use only a volunteer ID badge approved by the TDOC. Volunteers shall be assigned based on their areas of expertise and interest. Badge colors will be as follows:

1. Religious Services (Teal)
2. Health Services (Brown),
3. Education (Green),
4. Reentry Services (Gold),
5. Community Supervision (Gold),
6. Statewide Badges (Purple)

G. A volunteer may not be on the visitation list or be added to the visitation list of any inmate at the institution where he/she is actively volunteering. Nor may the volunteer’s phone number be listed on or added to an inmate’s approved calling list at the location where he/she is actively volunteering. Volunteers at district offices and DRCs/CRCs shall not share their personal phone number(s) with probationers/parolees. Volunteers shall not have personal communication with inmates or probationers/parolees through the use of any electronic
device, including any specialized apps, email correspondence, texting or friending through social media. Volunteers shall not be added to the visiting list of an inmate at any institution for one year from the date of termination of volunteer service, unless the inmate is immediate family and was so prior to the volunteer’s approval.

H. The VSC or appointed designee shall establish and maintain a hard copy file on every approved volunteer. Each file shall contain the following information for each volunteer:

1. A copy of the Volunteer Confidentiality and Policy Agreement/Training Certification, CR-2935, which has been read and signed by the volunteer. Particular attention should be directed to policies concerning security of the institution and confidentiality of information.

2. A copy of any license or certification required to perform professional services.

3. Documented completion of NCIC background check; However, copies of the actual NCIC background check shall not be kept in the file after the final decision has been made on the volunteer’s application.

I. Volunteer files shall be protected from inmate and probationer/parolee access. In addition to a hard copy file, all files will be maintained in the volunteer database and in electronic files in Central Office. Files that have been inactive for three years will be archived.

J. Upon request, the Director of Religious and Volunteer Services shall provide quarterly reports to the Deputy Commissioner of Administrative Services/General Counsel, Assistant Commissioner of Rehabilitative Services, Assistant Commissioner of Operational Support, Assistant Commissioner of Prisons, and the Assistant Commissioner of Community Supervision containing the following information:

1. Number of certified/active volunteers

2. Number of new volunteers since the following quarter

3. Number of terminated volunteers

4. Total number of hours worked by volunteers

5. Individual reports for volunteer hours served in each volunteer service function category

6. Any other report requested by the individuals listed in this section.

K. Performance Evaluation and Recognition:

1. Each volunteer or volunteer group shall be evaluated annually using the format in the volunteer database.
2. On an annual basis, the approving authority/VSC shall provide for a means of recognizing the accomplishments and contributions of volunteers.

L. **Restriction and Termination:** If after an investigation it is necessary to limit the services of a volunteer, the approving authority shall notify the volunteer in writing of such action. A copy of the written notification shall be forwarded to the VSC who shall place it in the volunteer’s file and make necessary entries in the volunteer database. The approving authority may restrict a volunteer to entering only the assigned TDOC location which shall be designated as the volunteer’s primary site. The approving authority may later remove such restrictions thereby allowing the volunteer to enter other TDOC locations. The approving authority may also terminate the services of a volunteer, and such termination shall apply to all institutions, unless the Director of Religious and Volunteer Services, and the Assistant Commissioner of Rehabilitative Services/Assistant Commissioner of Community Supervision determine otherwise. The approving authority shall restrict, postpone, or terminate the services of a volunteer for reasons including, but not limited to, the following:

1. Conduct inappropriate to the situation
2. Violation of TDOC policy
3. Unlawful conduct
4. The addition of a volunteer to an inmate’s visiting list at any TDOC or privately managed institution, unless approved by the Warden/Superintendent.
5. Misstatement of fact on the application or failure to inform the VSC of changes in information included in the application.
6. Misconduct, harassment, or abuse of inmates, probationers/parolees or staff, including but not limited to sexual misconduct, harassment or abuse. Any romantic or sexual relationship with an inmate or probationer/parolee will result in immediate termination of all services provided by the volunteer. The Department has a zero-tolerance policy for this type of conduct. (See Policy #502.06)

M. A volunteer may present any grievance related to volunteer services to the TCRB, which shall make recommendations to the Commissioner as appropriate. The grievant may appeal any decision of the TCRB to the Commissioner. The grievant shall submit his/her grievance in writing within 15 working days of the date of occurrence. The TCRB shall respond to the grievance within 15 working days of the date the grievance is received. The grievant may appeal a non-grievance related decision or a grievance related recommendation of the TCRB directly to the Commissioner. The appeal shall be submitted within 15 working days of the date the grievant receives the Board’s response or the Board decision is made known. The Commissioner shall respond within 15 working days of the date the grievance appeal is received, or the Board’s recommendation for response is received. The Commissioner’s response, which is final, shall be mailed directly to the grievant and to the TCRB.
N. With written approval of the approving authority, former inmates/probationers and parolees may become volunteers, provided the following criteria are met upon approval:

1. Probation/parole has been completed at the time of application or applicant has approval from his/her probation/parole officer.

2. The three references listed on a volunteer’s application all provide positive recommendations.

3. Any special conditions established by the approving authority is agreed to in writing prior to the volunteer’s completion of the certification process.

4. During the first two years after release, former inmates may not serve as volunteers at any institution where they were incarcerated.

O. Volunteers shall not be permitted to work in a location where there is an acquaintance with an inmate or probationer/parolee unless approved by the approving authority. Failure to disclose such a relationship shall be grounds for termination.

P. The Commissioner, Chairman of the Board of and Parole (BOP), or their designees shall provide for the appointment of a Tennessee Community Resource Board (TCRB) in accordance with TCA 41-10-105. The TCRB may incorporate as a non-profit organization. No member of the TCRB shall be a paid employee of the TDOC.

Q. The TCRB shall perform the following services:

1. Coordinate with and assist TDOC and BOP in developing and utilizing volunteer resources in assisting parolees, probationers, and inmates in re integrating into society as productive, law-abiding citizens.

2. Establish and coordinate a network of local parole, probation, and institutional community resource boards on matters of statewide impact.

3. Advise TDOC and BOP on matters of public interest and concern.

4. Assist TDOC and BOP in accomplishing their missions.

5. Review and recommend programs having statewide impact involving volunteers and oversee projects when appropriate.

R. Local Community Resource Board (LCRB): The institution shall provide for the appointment of an LCRB. All LCRBs shall meet at least quarterly, with the approving authority attending at least two of the quarterly meetings per year. The purpose of this board shall be to:

1. Develop a coordinated program plan for utilizing volunteer resources by the institution/DRC and CRC/district office. The plan shall include, but not be limited to, a
coordinated plan for helping inmates/parolees reintegrate into society as productive, law-abiding citizens.

2. Develop policies, procedures, and processes for utilization of volunteer resources by the institution/DRC and CRC/district office.

3. Review and make suggestions to the approving authority regarding program and policy decisions related to volunteer services and/or other areas that may benefit the institutional, DRC/CRC or district office’s operation.

4. Establish specific programs and goals for utilizing volunteer resources and monitor performance measure to determine whether goals for utilizing volunteers are met.

5. Participate in regional and statewide volunteer activities.

6. Encourage participation of an inmate representative from the inmate council at board meetings or make provisions for the inmate council to make recommendations to the Board.

7. The LCRB shall submit semi-annual reports to the TCRB detailing its progress in each of the areas above.

8. An agenda and minutes of the meeting shall be provided to the appointing authority and the VSC.

T. Members of the TCRB are approved for statewide badges. The Director of Religious and Volunteer Services shall review and approve any additional requests for statewide badges.

U. Volunteers may be allowed to bring in outside food, paper goods, plastic utensils, beverages, and necessary serving items at the discretion of the Warden for special events such as but not limited to graduations, holidays, meetings and family days. An itemized list of all requested items must be submitted to the Chaplain and approved by the Warden 21 days prior to the event. All food, beverage(s) and paper goods items will be cleared by security before being allowed entry into the facility. Volunteers are responsible for providing all supplies necessary for the serving of their food items and cleaning up after the event. All beverages must be in sealed plastic containers. At the conclusion of the event, offenders will not be allowed to return to their units with any food items.

VII. ACA STANDARDS: 5-ACI-1A-14, 5-ACI-1G-01 through 5-ACI-1G-07.

VIII. EXPIRATION DATE: July 1, 2024
Dear Clergy Person:

Thank you for your interest in visiting an inmate at __________________________ as an Outside Clergy person in accordance with TDOC Policy # 118.01. Each inmate is entitled to receive visits from one outside clergyperson without the visit counting against his/her other visiting privileges.

Please answer all questions below and return this Application with evidence of your ordination to:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

All information provided is confidential.

We will conduct an NCIC Background check as required by Policy #118.01.

Only approved Outside Clergy may schedule a visit, and they must call us at least (7) days prior to an intended visit, except in cases of emergency. Visits generally last about 1 hour.

Name: __________________________________________ D.O.B. ______________________
Drivers License # and State: __________________ / ___ SSN: _________________________
Other States you have lived/resided/worked in: ____ , ____ , ____ , ____ , ____ , ____ , ____ , ____ , ____
Aliases: __________________ , __________________ , __________________ , __________________ , __________________
Home Address: __________________________________________ State: ______ ZIP: ___________
Home Phone: (_____) _____________
E-mail: _______________________________
Race: _______________________________

Denomination/Church/Mosque/Temple: ________________________________________________
Street Address: ____________________________
Mail Address: ____________________________ City: __________________________ State: _______
Phone Number: (_____) _____________________
Please give two references (Name, Address, and Phone) of individuals who can confirm your status as an ordained clergy person:

____________________________________________________________________________________

____________________________________________________________________________________

“Clergy / Pastoral Visit” privileges are extended to ordained clergy only. Others are encouraged to ask the inmate that they be placed on the normal visiting list of family and friends.

Are you the Pastor / Leader of your church/mosque/temple? Yes: ___________ No: ____________

If “No” to the above,

1) What is your religious office/ordination? ____________________________________________________________________________

2) What is your religious relationship to this inmate? _________________________________________________________________________

3) Are you trained and authorized to perform all of the duties of the pastor / leader? Yes ___________, with the exception / restriction of __________________________________________________________________________

Name of Inmate: ______________________________________ TDOC ID ________________

How long have you known this inmate? ________________________________________________

Have you ever been convicted of a felony? Yes _____ No _____

If so, please provide details: ______________________________________________________________________________________________

I agree that I am familiar with all policies and procedures governing visitation with inmates and that I will abide by the same, as they may be amended from time to time.

Your Signature: ___________________________________________ Date: ______________________

Please attach evidence of your ordination
I __________________________ have completed orientation and training for the specific job assigned. Prior to beginning my service for the State of Tennessee, Department of Correction, the following were explained to me:

1. I will maintain complete confidentiality of written and verbal information provided to me that is necessary in performing my volunteer service.

2. I will be absolutely immune from liability for acts or omissions within the scope of my assigned duties, except for willful, malicious or criminal acts or omissions or for acts or omissions done for personal gain.

3. I am not eligible for Worker’s Compensation benefits from the State of Tennessee if injured in the performance of my volunteer duties.

4. I understand that my volunteer service may be curtailed, postponed or terminated for reasons including, but not limited to:
   a) Service is no longer required
   b) The program or activity is completed
   c) Lack of participation by offenders or volunteers
   d) Conduct inappropriate to the situation
   e) Violation of TDOC policy
   f) Unlawful conduct
   g) An institutional services volunteer is added to an inmate’s visitation list
   h) Misstatement of fact on application or failure to inform volunteer coordinator of changes in information included in application
   i) Poor performance rating
   j) Sexual misconduct, harassment, or sexual abuse

5. I have reviewed and understand the policies and training listed below which directly affect my work as a volunteer and do agree to abide by these and all other TDOC policies during my tenure of service as a volunteer for the Tennessee Department of Correction.

   115.01 Standards for Volunteer Staff
   302.05 Sexual Misconduct, Workplace Discrimination, and Harassment
   305.03 Employee/Offender Interaction
   502.06 Prison Rape Elimination Act Implementation and Compliance
   502.06.2 Prison Rape Elimination Act Allegations, Investigations, and Sexual Abuse Response Teams

I agree to abide by these policies and all other TDOC policies during my tenure as a volunteer for the Tennessee Department of Correction.

_________________________________________  __________________________
SIGNATURE  DATE

TRAINING CERTIFICATION

Required orientation and training completed on ________________________________

_________________________________________
SIGNATURE OF TRAINER
Date: _________________________________

SECTION I - To be completed by volunteer/employee. (PLEASE PRINT CLEARLY)

Name: ________________________________________________  ________________________________________________  ________________________________________________

Last   First   Middle

DOB: ____________________________  SSN: ______-____-____

SEX: ____________________________  RACE: ____________________________

DRIVER LICENSE #: ____________________________  ISSUE DATE: ____________________________

List All Other States Where Individual Has Resided or Worked:

1) ______  2) ______  3) ______  4) ______  5) ______  6) ______  7) ______  8) ______

List All Aliases/Maiden/Legal Names Used:

1) ________________________________

2) ________________________________

3) ________________________________

4) ________________________________

5) ________________________________

6) ________________________________

7) ________________________________

8) ________________________________

Individual is on Probation/Parole?  □ Yes  □ No

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SECTION II - To be completed by Volunteer Coordinator and signed by Warden/Superintendent or Designee

Purpose: New Volunteer/New Employee

Site: ________________________________  Contact Person: ________________________________

Telephone (___) - Ext. ______  Fax Number: (___) - ______

Authorizing Signature: ________________________________  Title: Warden/Superintendent/Designee

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SECTION III - To be completed by Volunteer Coordinator. (Warden/Superintendent/Designee for employee)

Synopsis of Information Obtained: _______________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

FBI# (if known): ________________________________  SID# (if known) ________________________________