

**MASSACHUSETTS DEPARTMENT OF CORRECTION
PERSONNEL ORIENTATION
103 DOC 208
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MASSACHUSETTS DEPARTMENT OF CORRECTION	DIVISION: ADMINISTRATION
TITLE: PERSONNEL ORIENTATION	NUMBER: 103 DOC 208

PURPOSE: To establish Department of Correction ("Department") policy concerning personnel orientation.

REFERENCES: M.G.L., Chapter 124, Section 1 (c) and (q).

APPLICABILITY: Staff

PUBLIC ACCESS: Yes

LOCATION: Department's Central Policy File
Deputy Commissioner of Administrative Services
Division's Policy File
Deputy Commissioner of the Prison Division's Policy
File
Each Institution's Policy File
Department Personnel Policy Manual
Each Inmate Library

RESPONSIBLE STAFF FOR IMPLEMENTATION AND MONITORING OF POLICY:

- Assistant Deputy Commissioner, Administration
- Assistant Deputy Commissioners
- Superintendents and Division Heads

EFFECTIVE DATE: 09/13/2013

CANCELLATION: 103 DOC 208.00 cancels all previous Department policy statements, bulletins, directives, orders, notices, rules or regulations regarding personnel orientation, which are inconsistent with this policy.

SEVERABILITY CLAUSE: If any part of 103 DOC 208.00 is, for any reason, held to be in excess of the authority of the Commissioner, such decision shall not affect any other part of this policy.

DEFINITIONS

1. Affirmative Action: The development of a program through which an employer acts to affirm the contributions that a diverse workforce can bring to a work environment. This is accomplished by taking specific steps to identify, recruit, hire and/or develop for advancement, persons who are identified as part of specific protected classes. Thus, an employer demonstrates its willingness to remedy past acts of discrimination against specific groups by developing goals and timetables, and mechanisms through which success is measured, with an ultimate goal of achieving a diverse workforce.
2. Affirmative Action and Diversity Plan: The document, required by Executive Order 478, which provides the method for implementation of Affirmative Action.
3. Appointing Authority: The Commissioner of Correction.
4. Bargaining Unit Employee: An employee of the Commonwealth in a job title in a statewide bargaining unit, as certified by the Massachusetts Labor Relations Commission, who is covered by an applicable collective bargaining agreement.
5. Chief Human Resources Officer: Person who oversees the Commonwealth's Human Resources Division.
6. Collective Bargaining Agreement: The contract that applies to an employee's bargaining unit.
7. Confidential Employee: A non-managerial employee whose position has been designated confidential by the Chief Human Resources Officer of the Human Resources Division, and who directly assists a manager and acts in a "confidential" capacity to a managerial or other category of employee excluded from coverage under M.G.L. Chapter 150E.
8. Department of Correction: A Commonwealth agency, under the auspices of the Executive Office of Public Safety and Security that is charged with the

detention of those committed to the custody and control of the Commonwealth.

9. Duty Station: The station within the Department through which all significant occurrences as defined by 103 DOC 105.00, Department Duty Station, shall be reported twenty four (24) hours per day, seven (7) days per week. The Duty Officer Station is located within the Bay State Correctional Center.
10. Employee: A full-time or regular part-time bargaining unit, managerial, or confidential employee of the Department, excluding all persons paid through other subsidiary accounts.
11. Equal Employment Opportunity (EEO): Guarantees the opportunity for all individuals to compete for employment and promotion free from discrimination based on their race, color, disability, religious creed, national origin, age, union affiliations, sex, sexual orientation, which shall not include persons whose sexual orientation involves minor children as the sex object, genetic information, or ancestry of any individual, or against a person who is a member of, applies to perform, or has an obligation to perform, service in a uniformed military service of the United States, including the National Guard, on the basis of that membership, application or obligation.
12. Grievance: Any dispute concerning the application or interpretation of the terms of the collective bargaining agreement. For confidential or management employees, a grievance shall be any dispute between them and supervisors regarding general conditions of employment.
13. Hostile Work Environment Harassment: A form of discrimination that includes situations where a person's verbal (e.g. sexual advances, requests for sexual favors) or physical conduct has the purpose or effect of creating an intimidating, hostile, humiliating or offensive work environment based on an employee's membership in a protected class.

14. Policy: A definite course of action adopted or pursued by the Department that guides and determines present and future decisions, statement(s) of guiding principles directing activities toward the attainment of objectives, and overall goals of the Department.
15. Probationary Period:
- (a) That period of time a new or rehired bargaining unit employee must be employed, as specified in the various collective bargaining agreements, before the employee may file a grievance challenging disciplinary action taken against the employee.
- (b) The period of time that a promoted employee must serve in the grade to which the employee has been promoted, as specified in the various collective bargaining agreements, during which the employee may be returned to a previous job title without recourse to the grievance procedure.
16. Promulgation Date: The date that the process of notification begins regarding new or revised policies. The promulgation date for Code of Massachusetts' Regulations is the date of publication in the Massachusetts Register. The promulgation date for Department of Correction policies is the date the Commissioner signs the policy, which later results in placement on the q drive and distribution via mail.
17. Workplace Violence: - Includes but is not limited to any behavior 1) that communicates a direct or indirect threat of physical harm, violence, harassment, intimidation, or other disruptive behavior, including oral, written, and electronic communications, gestures and expressions; 2) that involves an actual confrontation, including but not limited to, bullying, intimidation, harassment, stalking, concealment of or brandishing a weapon, and physical assault; 3) that damages property that is owned or leased by the Commonwealth; 4) that damages the property of others; 5) that uses Commonwealth resources to perpetrate such acts (i.e. fax machines, electronic mail, telephone, etc.); 6) that causes a reasonable person to be in

fear of their own safety or that of a colleague; or
7) causes disruption of workplace productivity.

208.02 **GENERAL POLICY**

The Department recognizes the importance of informing new employees of the conditions under which they are to be employed. In order to accomplish this objective, all new employees shall receive personnel orientation during the first week of employment to include areas covered in this policy.

208.03 **COMPLETION OF PERSONNEL, PAYROLL AND AFFIRMATIVE ACTION FORMS**

Human Resources Staff shall ensure that all necessary forms, documentation and correspondence are completed by preparing a Checklist for New Employee Orientation to be signed by each new employee. (Attachment P)

The following personnel, payroll and affirmative action forms shall be completed by each new employee unless otherwise specified:

1. Commonwealth of Massachusetts Application for Employment (if not previously completed and forwarded to the Department's Division of Human Resources).
2. Prior Service Request Form (for those employees with creditable service in another state, county, city or town agency).
3. Form W-4, Employee's Federal Withholding Allowance Certificate.
4. Form M-4, Employee's Massachusetts Withholding Exemption Certificate.
5. Health/Life Insurance Forms:
 - a. Employees choosing to enroll in the Commonwealth's Group Insurance Plan must complete the following forms:
 - i. Form 1, Insurance Enrollment and Change Form.

- ii. Form 319 Life Insurance Beneficiary Designation Form.
 - iii. Insurance Data Form (those enrolling in family plan).
 - iv. Health Maintenance Organization Application Form (those enrolling in an HMO).
- 6. Dental/Vision Care Plan Forms (management and confidential employees choosing to enroll in the plan):
 - a. Form 1, Dental and Vision Enrollment and Change Form.
 - b. Dental/Vision Statement of Verification - Student Coverage (those enrolling in the family plan applying for student coverage for their unmarried dependent children age 19 or over who are full-time students).
- 7. New Member Enrollment Form - State Board of Retirement.
- 8. Participation Agreement - Mandatory OBRA Contributions (part-time, seasonal and temporary and full-time employees ineligible to be members of the Massachusetts Retirement System).
- 9. Union Dues or Agency Fee Check-Off Authorization Form (those bargaining unit employees that request such a deduction).
- 10. FBI Fingerprint Card.
- 11. Background Information Request and Waiver Form (If not previously completed).
- 12. Form I-9, Immigration and Naturalization Service Employment Eligibility Verification.
- 13. Direct Deposit Form
- 14. Form SSA-1945: Statement Concerning Your Employment in a Job Not Covered by Social Security.

15. Election Form, Health Care Spending Account/Dependent Care Assistance Program (those employees wishing to enroll in these programs).
16. Enrollment Form, Long Term Disability Plan (those employees wishing to enroll in this plan).
17. Invitation to Self-Identify - Handicapped Persons (those employees wishing to self-identify that they are handicapped).
18. Invitation to Self-Identify - Vietnam Era Veterans (those employees wishing to self-identify that they are Vietnam Era Veterans).
19. Payroll Public Records Exemption Form (those employees who seek a payroll public records exemption on the basis that they were the victim of an adjudicated crime or a victim of domestic violence, sexual assault or rape.)

208.04 **DEPARTMENT IDENTIFICATION CARDS/EMPLOYEE PHOTOGRAPHS**

1. Within the limits prescribed by each institution, new employees shall be issued a Department identification card.
2. The Department shall maintain a photograph of each employee.

208.05 **INTRODUCTION TO THE COMMONWEALTH'S PERSONNEL SYSTEM**

New employees shall receive a brief introduction to the Commonwealth's personnel system which is administered by the Human Resources Division (HRD) of the Executive Office for Administration and Finance under the provisions of M.G.L., Chapter 31 (see Attachment A). In addition, they shall be informed of their individual status under said system (e.g.: permanent, provisional).

208.06 **EMPLOYEE BENEFITS**

New employees shall receive a summary of employee benefits to include, but not limited to the following areas:

1. Leave:
 - a. Personal Leave.
 - b. Professional Days.
 - c. Vacation.
 - d. Sick Leave.
 - e. Extended Illness Leave Bank.
 - f. Holidays.
 - g. Bereavement Leave.
 - h. Civic Duty Leave.
 - i. Military Leave.
 - j. Voting Leave.
 - k. Family and Medical Leave.
 - l. Non-FMLA Family Leave.
 - m. Federal Family and Medical Leave Act.
 - n. Education Leave.
 - o. Leave for Massachusetts State Employees Blood Program.
 - p. Small Necessities Leave.
 - q. Domestic Violence Leave.
2. Tuition Remission.
3. Employee Expenses.
4. Workers' Compensation.
5. Retirement.
6. Health/Life Insurance Coverage.
7. Dental/Vision Care Plan (management and confidential employees).
8. Long Term Disability Insurance.
9. Dependent Care Assistance Program.
10. Adoption Assistance Program.
11. Massachusetts Correctional Employees' Stress Management Program.
12. Deferred Compensation Plan.
13. Massachusetts State Employees Credit Union.
14. Health Care Spending Account.

Additional information regarding employee benefits may be obtained in 103 DOC 211, Employee Benefits.

208.07 **HOURS OF EMPLOYMENT AND GENERAL RESPONSIBILITIES**

1. Upon appointment to the Department, new employees shall be informed of their hours of employment, days off and applicable institution/division policies concerning the recording of attendance. In addition, security personnel shall be informed that due to the nature of their work, they may be required to work nights, weekends, holidays and overtime.
2. New employees shall also be informed of their general responsibilities as employees. This may include, but is not limited to, such responsibilities as being on time for work; telephoning as soon as possible in the event of absence or lateness; and giving a two (2) week notice of intended resignation.

208.08 **PAY ADMINISTRATION**

New employees shall receive a brief explanation of the Commonwealth's pay plan. This shall include information on their initial salary rate; when they may expect to receive salary rate increases; and who they should contact with questions about their pay. Additional information may be obtained in 103 DOC 210, Pay Administration.

208.09 **LABOR RELATIONS**

On appointment to the Department, new employees shall be provided with the following labor relations' information:

1. The particular designation of their position (i.e.: bargaining unit, confidential, managerial) and an explanation of the meaning of these terms.
2. If applicable, the particular union that represents their bargaining unit.
3. An explanation of the agency fee provision of the collective bargaining agreements.

Additional information regarding labor relations may be obtained in 103 DOC 250, Labor Relations.

208.10 **SENIORITY**

New employees shall be informed that, per the collective bargaining agreements negotiated between the Commonwealth and the various unions representing state employees, seniority is a factor that is considered in making the following types of personnel decisions:

1. With the exception of some positions in bargaining unit 2, it is one of a number of factors considered in making promotions.
2. It is the basis on which employees with no civil service status are to be laid off in the event that there is a reduction in force.
3. It is the basis on which state employees pick their vacations.
4. In bargaining unit 3, it is the basis on which employees receive shift and day off selections and transfers.
5. In bargaining unit 4, where applicable, it is the basis on which employees receive job pick, transfers, shift and day off selections.

NOTE: Those employees that are permanent in grade pick before others.

208.11 **PROMOTIONAL OPPORTUNITIES**

Applicable collective bargaining agreements shall be consulted for further information as seniority can be defined in different ways.

New employees shall be informed that, consistent with the goals contained in the Department's Affirmative Action and Diversity Plan, the Department shall make every effort to fill vacancies from within through the promotion of qualified employees. In addition, they shall be informed that vacancies are posted on

official Department bulletin boards for a period of ten (10) business days.

208.12 **EQUAL OPPORTUNITY/AFFIRMATIVE ACTION**

New employees shall be informed that the Department is an Equal Opportunity/Affirmative Action employer. In addition, they shall be informed that a copy of the Department's Affirmative Action and Diversity Plan and State Office of Affirmative Action Resolution Process Guidelines (Grievance Procedures) are on file in the Division of Human Resources, which may be consulted for additional information.

208.13 **EMPLOYEE DUTIES AND PERFORMANCE APPRAISAL**

Immediate supervisors shall inform new employees of the duties of their positions in written job descriptions (Form 30's for confidential and bargaining unit employees, and Management Questionnaires for management employees) and shall also explain to the new employees the Department's employee performance evaluation system. In addition, immediate supervisors shall notify bargaining unit employees that they are required to serve a six (6) month probationary period (nine (9) months for Correction Officers I and three (3) years for Institution School Teachers) during which time they shall be evaluated. Additional information may be obtained in 103 DOC 222, Employee Performance Evaluation.

208.14 **CONFLICT OF INTEREST AND POLITICAL ACTIVITY**

New employees shall receive a copy of the Guide to the Conflict of Interest Law (Attachment B) and A Campaign Finance Guide for State, County and Municipal Employees (Attachment C).

208.15 **AMERICAN CORRECTIONAL ASSOCIATION CODE OF ETHICS**

New employees shall receive a copy of the American Correctional Association Code of Ethics (Attachment D).

208.16 **THE MASSACHUSETTS RIGHT TO KNOW LAW**

New employees shall receive a copy of the Right To Know Workplace Notice (Attachment E).

208.17 **DEPARTMENT HOSTAGE POLICY**

New employees shall receive a copy of the Department's Hostage Policy (Attachment F).

208.18 **DRUG-FREE WORKPLACE POLICY**

1. The Department in order to ensure a safe, healthy and productive work environment for all of its employees, re-emphasizes its long-standing policy against the use of illegal drugs and alcohol on Department premises. It is prohibited for any employee of the Department to unlawfully manufacture, distribute, dispense, possess or use controlled substances at the workplace.
2. New employees shall receive a copy of the Department's Drug-Free Workplace Policy (Attachment G) and shall be informed that as a condition of employment they are required to abide by the terms of said policy.

208.19 **POLICY FOR THE PREVENTION AND ELIMINATION OF WORKPLACE VIOLENCE**

New employees shall receive a copy of 103 DOC 237, Policy for the Prevention and Elimination of Workplace Violence. This policy is located in each worksite's Policy Manual and on the Department's Intranet.

208.20 **POLICY FOR THE PROHIBITION OF DOMESTIC VIOLENCE**

New employees shall receive a copy of 103 DOC 238, Policy for the Prohibition of Domestic Violence. This policy is located in each worksite's Policy Manual and on the Department's Intranet.

208.21 **POLICY FOR THE PREVENTION AND ELIMINATION OF DISCRIMINATION AND RETALIATION IN THE WORKPLACE**

New employees shall receive a copy of 103 DOC 239, Policy for the Prevention and Elimination of Discrimination and Retaliation in the Workplace. This policy is located in each worksite's Policy Manual and on the Department's Intranet.

208.22 **CODE OF CONDUCT, EMPLOYMENT STANDARDS, PROFESSIONAL STANDARDS**

New employees in the following categories shall receive a copy of the applicable Code of Conduct, employment standards or professional standards as indicated:

1. Management and confidential employees: Code of Conduct for Managers and Confidential Employees (Attachment H).
2. Bargaining unit 1 employees: Code of Conduct for NAGE Unit 1 Employees (Attachment I).
3. Bargaining unit 2 employees: Commonwealth Employment Standards for Bargaining Unit 2 Employees (Attachment J).
4. Bargaining unit 3 employees: Code of Conduct for NAGE Unit 3 Employees (Attachment K).
5. Bargaining unit 6 employees: Code of Conduct Unit 6 (Attachment L).
6. Bargaining unit 8 and 10 employees: Article 29 Professional Standards (Attachment M).
7. Bargaining unit 9 employees: MOSES Code of Conduct Unit 9 Employees (Attachment N).

208.23 **RECEIPT OF RULES, POLICIES, CODES OF ETHICS/CONDUCT**

1. New employees shall receive the following rules, policies and codes of ethics/conduct for which they shall sign a receipt (Attachment O):

- a. Rules and Regulations Governing All Employees of the Massachusetts Department of Correction.
- b. American Correctional Association Code of Ethics.
- c. Department Hostage Policy.
- d. Drug Free Workplace Policy.
- e. Guide to the Conflict of Interest Law.
- f. A Campaign Finance Guide for State, County and Municipal Employees.
- g. 103 DOC 153, CORI Regulations.
- h. 103 CMR 157, Regulations Governing Access to and Dissemination of Evaluative Information.
- i. 103 CMR 505, Use of Force.
- j. 103 DOC 237, Policy for the Prevention and Elimination of Workplace Violence.
- k. 103 DOC 238, Policy for the Prohibition of Domestic Violence.
- l. 103 DOC 239, Policy for the Prevention and Elimination of Discrimination and Retaliation in the Workplace.
- m. Right To Know Workplace Notice (Attachment E).
- n. Code of Conduct for Managers and Confidential Employees (management and confidential employees only).
- o. Code of Conduct for NAGE Unit 1 Employees (bargaining unit 1 employees only).
- p. Commonwealth Employment Standards for Bargaining Unit 2 Employees (bargaining unit 2 employees only).
- q. Code of Conduct for NAGE Unit 3 Employees

- (bargaining unit 3 employees only).
- r. Code of Conduct Unit 6 (bargaining unit 6 employees only).
 - s. Article 29 Professional Standards (bargaining unit 8 and 10 employees only).
 - t. MOSES Code of Conduct Unit 9 Employees (bargaining unit 9 employees only).
2. The new employees receipt shall also contain a statement acknowledging access to and awareness of personnel policies and regulations as contained in the Department Personnel Policy Manual which is available for review at the Department's Division of Human Resources, Industries Drive, Norfolk, MA 02056 and all Department Correctional Institutions.
 3. The original of the receipt shall be placed in the employee's personnel file and the employee shall retain a copy.

**Introduction to the
Commonwealth's Personnel System**

The great majority of positions within the Department of Correction ("Department") are subject to the provisions of M.G.L., Chapter 31 (Massachusetts Civil Service Law) and require the taking of a written examination administered by the Human Resources Division (HRD) of the Executive Office for Administration and Finance in order for an individual to be employed or continue in employment. This necessitates an individual taking an examination for a position prior to being employed in that position, or in some cases, being hired and taking an examination at a later date. Associated with the process are the following types of appointments:

1. Permanent - An appointment from a certified eligible list to a permanent position on a permanent basis as a result of having taken and passed a civil service test. Appointees must serve a six-month probationary period (nine-months for Correction Officers I).
2. Provisional - An appointment in the absence of, or pending the establishment of a civil service eligible list. Provisional appointees have no civil service status.

An employee should utilize the following procedure in applying for and taking said examinations:

1. The employee should read the official Department bulletin boards on a regular basis, as this is where the HRD examination announcements are posted.
2. When the employee sees an announcement posted for an examination of which the employee is qualified, the employee may apply on-line at the Human Resources Division website: <https://www.csexam.hrd.state.ma.us/hrd> up until midnight on the exam's last day to file or obtain an application for the examination (HRD Application Identification Sheet) from the DOC Division of Human Resources. This form should be completed and mailed (certified mail return receipt requested is strongly recommended), or brought in person to the Human Resources Division, 3rd Floor, Room 301 One Ashburton Place, Boston, MA 02108 accompanied by the appropriate application fee. Additionally, if an application is sent by mail, the examination announcement number should be written in the lower left hand corner of the envelope to ensure timely processing. Under certain circumstances an employee may seek a waiver of the application fee. To do so, the employee must submit a completed Request for Waiver of Examination Application Fee, which is attached. In addition, an employee should be aware of

the following points regarding applying for a civil service examination:

- i. The employee must assume full responsibility for properly filling out the application to include applying for the correct type of examination (i.e.: Open or Promotional). Questions regarding the correct type of examination should be directed to the Department Division of Human Resources.
 - ii. The application fee should be in the form of a money order made payable to the Commonwealth of Massachusetts. The employee's Social Security Number and the Examination Announcement Number should be written on the front of the money order. No personal checks or cash shall be accepted.
 - iii. The last date for filing applications, except on Open Continuous Examinations, is set forth on the test announcement. Exam applications may be processed on-line at the Human Resources Division website up until midnight on the last day to file or paper applications MUST be received in HRD by 5:00 p.m. on the last day to file or be postmarked by midnight on the last day to file.
 - iv. An applicant's address is recorded in the computer from the application. This address is used for all correspondence concerning examinations, eligible list standing and interview notices. It is essential that applicants advise the Human Resources Division, Customer Services, 3rd Floor, Room 301, One Ashburton Place, Boston, MA 02108 of any changes of address.
3. The employee should report to the designated location to take the examination per the Notice to Appear received from HRD. This notice is mailed by HRD approximately (2) two weeks before the examination date. If said notice is not received within (5) five business days before the examination date, the employee should contact the HRD at (617) 727-3777. The employees can also log on the HRD Civil Service site (<http://www.mass.gov/hrd/csintro.htm>) to get a copy of the notice to appear form.

The Commonwealth of Massachusetts
Human Resources Division, Civil Service Unit
One Ashburton Place
Boston, MA 02108

Telephone (617) 727-3777
Toll Free w/in MA: 1-800-392-6178
TTY: (617) 878-9762
Fax: (617) 727-0399

Request for Waiver of the Civil Service Examination Fee

JOB TITLE: _____ ANNOUNCEMENT #: _____

In accordance with the provisions of Section 5 (n) of Chapter 31 of the Massachusetts General Laws, I request a waiver of the Examination Application Fee. **I have attached documentation (e.g., receipts, check stubs, agency verification) verifying that I have received assistance within the past twelve months through the program(s) listed below.**

Place a check mark next to the applicable program(s).

- | | |
|--|---|
| <input type="checkbox"/> Aid to families with dependent children (AFDC) | <input type="checkbox"/> Massachusetts Veterans Services |
| <input type="checkbox"/> Civil service employment training (G.L.c.31) | <input type="checkbox"/> Medical Assistance (Medicaid) (MA) |
| <input type="checkbox"/> Family Housing | <input type="checkbox"/> Refugee Assistance |
| <input type="checkbox"/> Federal Veterans Job Training | <input type="checkbox"/> Rental Assistance |
| <input type="checkbox"/> Federal Veterans Rehabilitation | <input type="checkbox"/> Social Security (RSDI) |
| <input type="checkbox"/> Food Stamps (FS) | <input type="checkbox"/> Supplemental security Income (SSI) |
| <input type="checkbox"/> Free and reduced price lunch or milk at school or day care center | <input type="checkbox"/> Unemployment Insurance (UI) |
| <input type="checkbox"/> Fuel Assistance | <input type="checkbox"/> Vocational Rehabilitation Training (VRT) |
| <input type="checkbox"/> General Relief (GR) | <input type="checkbox"/> Women Infants Children Program (WIC) |
| | <input type="checkbox"/> Worker's Compensation |

Please indicate below the name and address of each agency providing assistance.

1. Agency Name: _____

Address: _____

2. Agency Name: _____

Address: _____

I understand that if my waiver application cannot be verified, it will be denied and my application will be canceled. If I am not eligible for a fee waiver as described above, I must pay the required fee in the form of a money order or certified bank check made payable to the Commonwealth of Massachusetts.

I hereby declare under penalties of perjury that the statement above is true. I authorize the agency administering the benefits I have indicated above to release information sufficient to verify my claim to the Human Resources Division.

Applicant's Name (PRINT)

Social Security Number

Applicant's Signature

Date of Application

Attachment B, not on Intranet

Attachment C, not on Intranet

Attachment D

AMERICAN CORRECTIONAL ASSOCIATION CODE OF ETHICS

Preamble: The American Correctional Association expects of its members unfailing honesty, respect for the dignity and individuality of human beings and a commitment to professional and compassionate service. To this end, we subscribe to the following principles:

Members will respect and protect the civil and legal rights of all individuals.

Members will treat every professional situation with concern for the person's welfare and with no intent of personal gain.

Relationships with colleagues will be such that they promote mutual respect within the profession and improve the quality of service.

Public criticisms of colleagues or their agencies will be made only when warranted, verifiable and constructive in purpose.

Members will respect the importance of all disciplines within the criminal justice system and work to improve cooperation with each segment.

Subject to the individual's right to privacy, members will honor the public's right to know and will share information with the public to the extent permitted by law.

Members will respect and protect the right of the public to be safeguarded from criminal activity.

Members will not use their positions to secure personal privileges or advantages.

Members will not, while acting in an official capacity, allow personal interest to impair objectivity in the performance of duty.

No member will enter into any activity or agreement, formal or informal, which presents a conflict of interest or is

inconsistent with the conscientious performance of his or her duties.

No member will accept any gift, service or favor that is or appears to be improper or implies an obligation inconsistent with the free and objective exercise of his or her professional duties.

In any public statement, members will clearly distinguish between personal views and those statements or positions made on behalf of an agency or the Association.

Each member will report to the appropriate authority any corrupt or unethical behavior where there is sufficient cause to initiate a review.

Members will not discriminate against any individual because of race, gender, creed, national origin, religious affiliation, age or any other type of prohibited discrimination.

Members will preserve the integrity of private information; they will neither seek data on individuals beyond that needed to perform their responsibilities, nor reveal nonpublic data unless expressly authorized to do so.

Any member who is responsible for agency personnel actions will make all appointments, promotions, or dismissals in accordance with established civil service rules, applicable contract agreements and individual merit, and not in furtherance of partisan interests.



RIGHT TO KNOW WORKPLACE NOTICE

The Commonwealth of Massachusetts
Department of Labor
Division of Occupational Safety

John S. Ziemba
Director

Robert J. Prezioso
Commissioner

The **RIGHT TO KNOW LAW, Chapter 111F** of the Massachusetts General Laws, provides rights to Public Sector employees* regarding the communication of information on toxic and hazardous substances. These rights include:

WORKPLACE NOTICE- A notice must be posted in a central location in the workplace informing employees of their rights under the law. The notice must be in the English language. In workplaces where employees' first language is other than English, the notice must be posted in that language.

TRAINING- Employers must provide an annual training program to employees who work with toxic or hazardous substances. New employees must receive training within thirty days from date of hire. The training program must be conducted by a competent person and may be in the form of verbal and/or written instruction. At a minimum, training must include an explanation of employee rights, information on how to read an MSDS, the specific hazards of the chemicals used, handled or stored in the workplace, the type of personal protective equipment to be worn, and information on labeling of hazardous substances. This training must be done with pay during the employee's normal work shift or work hours. A record of this training must be maintained by the employer.

MATERIAL SAFETY DATA SHEET (MSDS) - The Material Safety Data Sheet is the document that provides information on each toxic or hazardous substance used or stored in the workplace. An employee or his or her designated representative has the right to obtain and examine the MSDS for any toxic or hazardous substance to which the employee "is, has been, or may be", exposed, if the employee's request is made to the employer in writing. After four working days from the date the request is made, an employee can refuse to work with the substance under two circumstances:

1. The employer fails to: (a) furnish the employee with the MSDS and (b) furnish the employee with proof that the employer has exercised diligent effort to obtain the MSDS, either through the manufacturer or through the Deputy Director of the Division of Occupational Safety, or,
2. The MSDS provided by the employer is incomplete or outdated.

LABELING- All containers in the workplace of more than five pounds or more than one gallon, containing toxic or hazardous substances, must be labeled with the chemical name of the substance. Containers of mixtures must be labeled with the chemical name of each toxic or hazardous constituent when the constituents comprise one percent or more of the mixture. Containers must also be labeled with the appropriate National Fire Prevention Association (NFPA) symbol if available. Labels must be clear, prominent, in English and weather resistant. There are some exceptions to the labeling requirements for containers which are labeled in accordance with certain Federal laws.

NON-DISCRIMINATION- An employee who believes he or she has been discharged, disciplined, or in any other manner discriminated against by an employer for exercising rights granted under the Law, has one hundred eighty days following the violation of the Law or following the date on which he or she obtained knowledge that a violation occurred, to file a complaint with the Deputy Director of the Division of Occupational Safety. A copy of the complaint must be sent to the employer at the same time by certified mail.

NOTE- The employee rights listed above are further defined in Chapter 111F of the Massachusetts General Laws and the Code of Massachusetts Regulations 454 CMR 21.00. Copies of the law and regulation can be obtained at the Statehouse Bookstore (Phone: 617-727-2834).

All Right-to Know Inquiries should be addressed to:
Division of Occupational Safety
1001 Watertown Street
West Newton, MA 02465
Phone: 617-969-7177
Fax: 617-727-4581

*Private sector employees in Massachusetts are covered by a similar regulation, the Hazard Communication Standard (29 CFR 1910.1200), enforced by the Federal Occupational Safety and Health Administration (OSHA 617-565-9860).

This form may be reproduced

Attachment F

**MASSACHUSETTS DEPARTMENT OF CORRECTION
HOSTAGE POLICY**

It is the policy of the Massachusetts Department of Correction ("Department") that in the event than an employee is held hostage the Department shall not accede to inmate demands.

Attachment G

Attachment H, not on Intranet

Attachment I, not on Intranet

Attachment J, not on Intranet

Attachment K, not on Intranet

Attachment L, not on Intranet

Attachment M, not on Intranet

Attachment N, not on Intranet

Attachment O
RECEIPT FORM

I, _____, hereby acknowledge
(Print Name)

receipt of the following rules, policies and codes of ethics/conduct. I also acknowledge that I am obligated to familiarize myself with and abide by their contents:

- Rules and Regulations Governing All Employees of the Massachusetts Department of Correction.
- American Correctional Association Code of Ethics.
- Department Hostage Policy.
- Drug-Free Workplace Policy.
- Guide to the Conflict of Interest Law.
- A Campaign Finance Guide for State, County and Municipal Employees
- Payroll Public Records Exemption Form
- 103 CMR 153, CORI Regulations
- 103 CMR 157, Regulations Governing Access to and Dissemination of Evaluative Information
- 103 CMR 505, Use of Force
- 103 DOC 237, Prevention and Elimination of Workplace Violence
- 103 DOC 238, Policy for the Prohibition of Domestic Violence
- 103 DOC 239, Policy for the Prevention and Elimination of Discrimination and Retaliation in the Workplace
- Right To Know Workplace Notice.

Attachment O (Continued)

In addition, as an employee in the following category:

- | | |
|---|--|
| <input type="checkbox"/> Management. | <input type="checkbox"/> Bargaining Unit 6. |
| <input type="checkbox"/> Confidential. | <input type="checkbox"/> Bargaining Unit 8. |
| <input type="checkbox"/> Bargaining Unit 1. | <input type="checkbox"/> Bargaining Unit 9. |
| <input type="checkbox"/> Bargaining Unit 2. | <input type="checkbox"/> Bargaining Unit 10. |
| <input type="checkbox"/> Bargaining Unit 3. | <input type="checkbox"/> Not Applicable. |

RECEIPT FORM

I acknowledge receipt of the applicable code of conduct as indicated below, and I acknowledge that I am obligated to familiarize myself with it and abide by its terms, conditions, and requirements:

- Code of Conduct for Managers and Employees Not Employed Pursuant to Collective Bargaining Agreements (management and confidential employees).
- Code of Conduct for NAGE Unit 1 Employees
- Commonwealth Employment Standards for Bargaining Unit 2 Employees
- Code of Conduct for NAGE Unit 3 Employees
- Code of Conduct for Unit 6
- Article 29 Professional Standards for (bargaining unit 8 and 10 employees)
- MOSES Code of Conduct for Unit 9 Employees

Further, I acknowledge access to and awareness of personnel policies and regulations as contained in the Department Personnel Policy Manual, which is available for review at the Department's Division of Human Resources, Industries Drive, Norfolk, MA 02056 and all Department correctional institutions.

Signature of Employee

Date

Attachment P
Commonwealth of Massachusetts Human Resources Division
Checklist for New Employee Orientation

Employee Name: _____ Hire Date: _____
 Position: _____ Employee ID: _____

Please indicate employee type (check all that apply):

___ Bargaining Unit ___ Confidential ___ TPL (Technical Pay Law)
 ___ Manager ___ Contract* ___ Seasonal ___ Intermittent ___ 960 hr appt
 ___ Civil Service: **Select one:** ___ Appointment from List ___ Provisional Hire ___ Other

* Denotes items below that also apply to contract employees

***Please check off items below to confirm what was discussed and
 which documents were shared.***

Section 1: Issues to Discuss

Welcome

- Organizational Chart *
- Job Description *
- State Government *

Employee Responsibilities

- Work Week and Schedules *
- Attendance*
- Probationary Period
- Professionalism*
- Safety/Use of State Property*
- Job Performance Evaluations*
- Statement of Financial Interest (if applicable)*
- State Ethics eLearning course

Benefits and Compensation

- Bi-Weekly Pay Advice*
- Direct Deposit *
- Group Insurance
- Deferred Compensation
- Dental/Vision
- Miscellaneous Pay Issues
- Leaves
- Extended Illness Leave Bank

Career Development

- Training*
- Tuition Remission

Leaving State Service

- Retirement
- Notice
- COBRA

Section 2: Required Documentation & Information

- Commonwealth of Massachusetts Application for Employment
- Standard Contract Form (for Contract Employees)*
- Contract Employee Disclosure Form (Sunshine Policy)*
- Code of Conduct or Standards of Employment Signature Form
- I-9 Form and two forms of ID
- W-4 Federal Income Tax Withholding Form *
- M-4 State Income Tax Withholding Form *
- Direct Deposit Form *
- SSA Form 1945 concerning Social Security Benefits (requires employee signature)
- State Retirement System - New Member Enrollment Form or mandated OBRA*
- Group Insurance Commission (GIC) Benefit Decision Guide
- GIC Employee Acknowledgement Form
- CORI (certain positions)

Section 3: Other Documents (if applicable)

- Recruitment paperwork and supporting documentation *
- Statement of Financial Interest
- Request for prior service credit, information & form

Employee Name : _____

Section 3 (cont)

- Emergency Contact Data Sheet *
- Copy of required license(s) for job*
- GIC Insurance Enrollment and Change Form (Form-1)
- GIC Insurance Data Form (IDF Form) and documentation (marriage/birth certificates. If applicable, divorce decree.)
- GIC Life Insurance Beneficiary Designation Form (319 one to three beneficiaries; G-500 four or more beneficiaries or special designations such as estate or trust)
- GIC Pre-Tax Basic Life & Health Insurance Plan - Election Not to Participate form
- HMO or POS application – if one of these plans selected
- GIC Dental & Vision Enrollment and Change Form (Form-1) (managers and confidential employees only)
- Long Term Disability (LTD) brochure
- Dependent Care Assistance Program (DCAP) application*
- Health Care Spending Account (HCSA) application
- MBTA/Commuter Rail Pass Program

Section 4:

Agency-Specific Policies (list)

- _____
- _____
- _____
- _____

Section 5: Handouts

Statewide Policies, Employment Law, Rules and Information

- New Employee Orientation Guide
- Affirmative Action/EEO (Title VII of the Civil Rights Act of 1964)* Executive Order 478
- Code of Conduct or Employment Standards for Bargaining Unit Employees
- Code of Conduct for Managers and Confidentials
- Computer Operations – Information Technology Policy*
- Deduction Schedule
- Domestic Violence Policy (Executive Order 398) *
- Drug Free Workplace Policy*
- Introduction to Conflict of Interest Law*
- Manager Handbook
- Mentoring Brochure
- Public Employees and Campaigns brochure
- Sexual Harassment Policy (Title VII of the Civil Rights Act and MGL)*
- Smoking Policy*
- Sunshine Policy (Executive Order 444)*
- Workplace Violence Prevention Policy (Executive Order 442)*

I hereby acknowledge that I have received copies of all the policies/procedures listed above in Sections 2,3, and 5 and/or have been given guidance on where I can find these policies online. I understand that it is my responsibility to read and comply with all policies, rules and regulations. I have discussed all the items in Sec. 1 and have received all the necessary forms in Sec. 2+3. If I have any questions, I will contact a Human Resources Representative.

Signatures:

Employee*

Date*

Human Resources Representative/Agency Manager

Date*

Duplicate signed copy to be given to employee. Original copy to be kept in Personnel File



PAYROLL PUBLIC RECORDS EXEMPTION FORM

THIS FORM IS CONFIDENTIAL AND MAY NOT BE DISCLOSED FOR ANY REASON

Under the public records law G. L. c. 4, § 7(26), an employee’s name, title, salary and department are considered public information. If a public information request is made for this information, your department (or the Office of the Comptroller for statewide payroll requests) is mandated to provide this information, including electronically. Under the public records law, a person making a public records request can not be asked the reason for the request, nor can the Commonwealth control how that individual uses or publishes this information.

However, the public records law also provides certain exemptions, including G. L. c. 66, § 10(d), which states that the name, home address, home telephone number, place of employment or education for state employees and family members who are also employed by the Commonwealth are exempt from public records disclosure if the employee was a victim of an adjudicated crime or is a victim of domestic violence, sexual assault or rape. **If you believe you qualify for one of these exemptions, please complete this form, attach supporting documentation or a written statement of your circumstances, and submit to your Human Resources Director.**

Please see the attached Frequently Asked Questions (FAQs) for additional information. If you have any questions about completion of this form, or whether or not you qualify for this exemption, please contact the Domestic Violence Office. If you are uncomfortable discussing this with your HR Director, you may speak in confidence to your Department’s General Counsel, or in lieu of a Department individual, you may contact **Jean Haertl, Director of Workplace and Domestic Violence Prevention at 617-878-9822**. Please note that Department Heads, Chief Fiscal Officers, Payroll Directors, General Counsel and other high ranking managers or officers, and other individuals who represent the Department publicly are not eligible for this exemption.

If approved, the exemption flag for you and any family members that you list below who are also state employees, will be entered in the payroll system on a separate panel with a generic “do not publish” flag. This form, supporting documentation and any conversations relating to this exemption is considered strictly confidential and will not be disclosed for any reason. All supporting documentation will be reviewed and then returned to you, or destroyed, and shall not be included in your personnel file. This form shall be maintained in one confidential file within the agency’s Human Resource/or General Counsel’s Office or a centralized location designated by the Agency Head/Cabinet Secretary or Appointing Authority.

CERTIFICATION

I (Print Name clearly) _____ hereby certify under the pains and penalties of perjury that I am an employee and the following exemption applies to me and any family members I have listed below.

___ **I am a victim of an adjudicated crime** (e.g. victim of a crime such as burglary, assault, battery, stalking, arson where matter has been resolved. The alleged perpetrator was arrested and this matter was either dismissed, litigated or settled). *Please provide official documentation of final disposition of case or other supporting documentation supporting claim (such as an affidavit from your attorney, the prosecutor for the case, or your caseworker).*

___ **I am a victim of domestic violence, sexual assault, or rape.** *While documentation is not required, if available, please provide a copy of any existing 209A restraining order, or a signed statement outlining your situation.*

I am identifying the following family members who are also state employees who should also have the exemption flag:

Name: _____ Relationship: _____ Department: _____ Employee ID # _____

Name: _____ Relationship: _____ Department: _____ Employee ID # _____

Signature of Employee

Employee ID #

date

Signature of Family Member

Signature of Family Member

Signature of HR Director or Authorized Designee

date documentation confirmed

PLEASE SUBMIT THIS FORM TO: HEATHER M. HALL-MARTIN, DV COORDINATOR
DIVISION OF HUMAN RESOURCES, PO BOX 946 - INDUSTRIES DRIVE, NORFOLK, MA 02056
PHONE: 508-850-7867

PAYROLL PUBLIC RECORDS EXEMPTION FORM

FREQUENTLY ASKED QUESTIONS

- 1. Why is this form being distributed?** Under the public records law G. L. c. 4, § 7(26), an employee's name, title, salary and department are considered public information. If a public information request is made to either your employing department, or a statewide payroll request is made to the Office of the Comptroller (CTR), your department and CTR are mandated to provide this information, including electronically. Under the public records law, a person making a public records request can not be asked the reason for the request, nor can the Commonwealth control how that individual uses or publishes this information.




The personal safety of certain victims of adjudicated crimes or domestic violence, sexual assault or rape may be compromised when this type of information is released. There are exemptions under G. L. c. 66, § 10(d), which state that the name, home address, home telephone number, place of employment or education for state employees and family members who are also employed by the Commonwealth are exempt from public records disclosure if the employee was a victim of an adjudicated crime or is a victim of domestic violence, sexual assault or rape. This form is being distributed to enable employees to self identify for this exemption. **Please note that Department Heads, and other individuals who represent the Department publicly are not eligible for this exemption.**

- 2. I am a victim of domestic violence, sexual assault, or rape but I do not have documentation proving that I am a victim. Can I still claim this exemption?** Yes. We know that many victims of domestic violence, sexual assault or rape typically do not want to disclose these issues to their employer due to their concerns regarding confidentiality and privacy, the fear that their employment or opportunities will change, and concerns about being stigmatized. If you are a victim of domestic violence, sexual assault or rape we encourage you to complete this form and submit to your HR Director to obtain the exemption. Your HR Director may ask you to submit either a signed statement outlining your circumstances and safety concerns or a copy of a protective order, if any. If you are uncomfortable providing written documentation, you may provide a brief oral description to your HR Director identifying the need for the exemption due to safety concerns. Your HR Director (or designee) may ask you some questions to ensure that your request is legitimate so that the exemption is provided only to eligible individuals. Your HR Director will not offer legal advice, but may provide a list of resources related to domestic violence and may address your needs or concerns for any workplace safety plans.
- 3. What if I don't want to turn this form into my HR Director?** There is no requirement that you complete or turn in this form. However, if you qualify for the exemption and you want to have your name, title and department exempted from payroll public records requests made either to your department or to the Office of the Comptroller (statewide payroll requests) you must submit this form. You may submit this form and supporting documentation (if available) to your HR Director, your General Counsel or in the alternative, you have the option of contacting (in confidence) **Jean Haertl, Director, Workplace and Domestic Violence Prevention** who will facilitate the processing of your form. Your HR Director will be notified that your exemption has been entered in the payroll system.
- 4. What happens after I turn in the form to my HR Director?** If approved, the exemption for you and any family members that you list will be entered in the payroll system. The reason for the exemption is not identified in the payroll system. Access to the exemption in the payroll system will be limited to HR Directors and those individuals who must redact your (and family members) information when a payroll public records request is made.
- 5. Where will these forms kept and who will have access to the forms?** The forms will be kept in one confidential file within the agency/department's Human Resources office. If the forms are not submitted to your HR or General Counsel, but are submitted to **Jean Haertl, Director, Workplace and Domestic Violence Prevention**, the forms will be retained at the Human Resources Division in a confidential file. In either case, the forms are confidential and will not be disseminated for any reason. All supporting documentation related to the submission of the form will either be returned to you at the time of the request or destroyed.
- 6. Why are the forms retained on file, rather than just destroyed when the exemption is entered in the payroll system?** Given the risk of ineligible individuals seeking to obtain the exemption, so that their payroll information is not released publicly, the Commonwealth needs to be able to conduct quality assurance reviews or audits of the use of exemptions. Therefore, CTR will conduct periodic quality assurance with HR Directors to ensure that they are obtaining the forms, reviewing the basis for the exemption, and maintaining confidential files for the forms. CTR will not contact any employee directly to verify the information related to the exemption.

PAYROLL PUBLIC RECORDS EXEMPTION FORM

FREQUENTLY ASKED QUESTIONS

7. **How long will the exemption last?** The exemption will be valid for 5 years. Upon the date of expiration, HRD will notify your HR Director who will, in turn, notify you that the exemption will be removed unless you resubmit a new form.
8. **Is it ever appropriate for my HR Director to ask to maintain a copy an active restraining order?** Yes. An active 209A abuse prevention order applies to your workplace, and violation of that order is a mandatory arrest for any abuser. Your HR Director should work with you to ensure a safety plan is completed that addresses the provisions set forth within this order. 
9. **I have family members who also work for the Commonwealth. Can their names and departments be excluded from public disclosure?** Yes. If you qualify under one of the exemptions, either as a victim of an adjudicated crime, or as a victim of domestic violence, rape or sexual assault, you may identify any family member who also works for a Commonwealth state agency. We are only able to apply the exemption to employees in the payroll system (not state authorities, quasi-public entities, municipalities or employees in higher education who are not paid through the payroll system). You must identify the legal name, department, and employee ID of the family member and obtain their signature in order for the exemption to be entered in the payroll system.
10. **Who is considered a “family” member?** A family member is the spouse, child, foster child, step child, parent, step parent, brother, sister, grandparent, grandchild of either the victim or his/her spouse, person for whom the employee is legal guardian, or a person living in the victim’s immediate household.
11. **I am a state employee and I have a family member who is victim of domestic violence. Can I claim the exemption for either my family member or myself?** No. The exemptions under this form may be claimed solely by the victim. For privacy reasons you may not identify another individual who is a victim under either exemption in order to claim the exemption either for you or for them. We encourage you to work with the victim to claim this exemption through their department. If the victim is not a state employee, the victim will need to submit this form and documentation to the family member’s HR Director requesting the exemption for the employee as a family member.
12. **I filed this form and received the exemption. Recently, a family member has now started working for the Commonwealth. Can I list this family member now?** Yes. You may claim the exemption for you or any family member at any time. Just complete this form with the listed family member and submit to your HR Director. You do not have to resubmit supporting documentation since this has already been reviewed.
13. **How is the Commonwealth guarding against the misuse of the public records exemption program?** Employees who are untruthful in their request for exemption from the public records law may be subject to disciplinary action.
14. **How do I know that my information will not be released?** This process is new and will take some time to implement. However, the Commonwealth is committed to upholding current public records statutes, including authorized exemptions. HR Directors must coordinate with their Public Information Officers for all payroll information requests to ensure that all exempted employee records are redacted from any disclosed report.
15. **What if I am denied my request for an exemption?** If you are denied a request by your HR Director or General Counsel, you may contact **Jean Haertl, Director, Domestic and Workplace Violence Prevention** who will review for a final determination. Every effort will be made to make this determination quickly. If you receive the exemption, your HR Director will be notified and your exemption will be entered in the payroll system.
16. **Will I be notified if someone requests my personal information and will I be told who that person is so I can work to increase my safety planning?** CTR notifies CFOs and Payroll Directors when any payroll request is made to CTR related to your department (either statewide or for a specific individual). Requests made directly to your department should be handled in a similar way, with coordination between your HR Director and the Public Records Officer. Safety planning should be discussed with your HR Director/Domestic Violence Coordinator.
17. **Does this exemption apply if I am in the middle of the court process – am I still eligible for exemption?** Maybe. For victims of adjudicated crimes (crimes that have been resolved through the courts system after an

PAYROLL PUBLIC RECORDS EXEMPTION FORM

FREQUENTLY ASKED QUESTIONS

arrest has been made) you will need to provide some documentation of the case. This may include a trial report, prosecutor statement, or other supporting documentation of the case and outcome. If you are involved in a current criminal case and you have imminent safety concerns, your HR Director will determine whether the exemption is appropriate. Since the goal is safety, and you would be eligible for the exemption once the criminal matter is resolved, we believe that the exemption can be used to protect disclosure of your payroll information.



18. **The criminal charges against my perpetrator were dismissed – am I still eligible for exemption?**
Yes. The fact that a case was dismissed does not negate the fact that you are a victim of a crime. Therefore, if you have been involved in a recent criminal case as a victim and you have imminent safety concerns, your HR Director will determine whether the exemption is appropriate.
19. **If I transfer to another agency does the exemption follow me? Is the receiving agency notified of my exemption status? Who is responsible for that notification? Do I bring my paperwork with me?** The exemption is tied to an employee ID and will transfer with the employee ID. The paperwork will remain with the previous department, unless you request that this information be transferred to your new agency.
20. **Am I responsible for notifying our Public Records person that I have an exemption?** No, and for privacy reasons, you should not be communicating this information directly to anyone in your agency other than the HR Director. It is the joint responsibility of the HR Director and the Public Records Officer to coordinate efforts when payroll requests are made to ensure they view the Commonwealth Information Warehouse (CIW) to identify exempted employees prior to responding to any information requests.
21. **What are the available internal and external resources to address a domestic violence, sexual assault, or a rape related situation?** You should check with your HR Director, victim service personnel or domestic violence coordinator for internal available training, policy or victim assistance resources. The Commonwealth of Massachusetts has an extensive network of legal, counseling, and support resources to assist victims.

Victims of domestic violence are urged to contact the State Domestic Violence Hotline (SAFELINK) a free and confidential 24 hour resource at 1-877-785-2020 for domestic violence assistance or support.

- Jane Doe, Inc., the Massachusetts Coalition Against Sexual Assault and Domestic Violence is a non-profit with 60 rape crisis and domestic violence member programs offering free and confidential services across the state. For a list of Jane Doe, Inc member programs, please visit www.JaneDoe.org.
- In addition, The Massachusetts Office for Victim Assistance, established by law as an independent state agency in 1984, offers extensive services and resources for victims of crime. For more information, please visit www.mass.gov/mova
- For Executive branch employees, specific domestic violence and workplace violence policy and training resources are available. Please visit www.mass.gov/hrd