



Virginia Department of Corrections

Administration & Organization

Operating Procedure 010.4

Operating Procedure Management

Authority:

Directive 010, *Administration & Organization*

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Incarcerated Offender

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REVIEW

The Content Owner will review this operating procedure annually and re-write it no later than three years after the effective date.

COMPLIANCE

This operating procedure applies to all units operated by the Virginia Department of Corrections. Practices and procedures must comply with applicable State and Federal laws and regulations, ACA standards, PREA standards, and DOC directives and operating procedures.

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PURPOSE

This operating procedure establishes a structured, specific process to maintain and disseminate directives and operating procedures to guide Department of Corrections units in support of the Department's public safety mission and initiatives.

PROCEDURE

I. Authority

- A. The Director is responsible for developing and maintaining the DOC operations manual to guide DOC staff and offenders in all matters related to departmental operations. (2-CO-1A-17)
1. COV §53.1-10 prescribes the overall powers and duties of the DOC Director.
 2. COV §53.1-25 authorizes the Director to establish such rules as necessary for the government of state correctional facilities.
 3. COV §53.1-140 defines the powers and duties of the Director to supervise and direct probation and parole services.
 4. Other statutory sections apply to various aspects of departmental operations.
 5. The Director may deviate from or modify DOC operating procedures as necessary at any time for reasons of operational efficiency and effectiveness or to support a compelling agency business need.
- B. The Policy Initiatives Unit has been assigned primary responsibility for oversight and management of the development, review, revision, and dissemination of Department of Corrections directives and Department level operating procedures in accordance with this operating procedure. (2-CO-1A-05)

C. Directives

1. Based on powers and authority granted by the Code of Virginia, the Director issues directives as needed to authorize the issue of DOC operating procedures.
2. Each functional area of DOC procedures will have one or more directives that authorize one or more operating procedures to provide guidance on specific subjects.
3. Each directive shall designate the Signatory Authority, Reviewer, and Content Owner while specifying operating standards and issues to be addressed in each authorized operating procedure.
4. Management of Directives
 - a. The Policy Initiatives Unit develops directives for approval by the Director.
 - b. The Policy Initiatives Unit reviews statutes, regulations, standards, correctional practice, and DOC initiatives for content to be included in directives.
 - c. There is no specific review or re-write period for directives, but they will be updated as needed to incorporate changes in statute, regulation, standards, correctional practice, or DOC initiatives.
5. If a different person assumes the signatory authority position for a directive, operating procedure, or implementation memorandum, it will remain in force until the next regular re-write.

II. Department Level Operating Procedures

- A. In accordance with the authorizing directive, an operating procedure will provide specific operational instructions to organizational units.
1. Each authorized operating procedure will be written at the designated level to provide operating protocols based on sound correctional practice to meet the standards and issues established in the directive.
 2. The Policy Initiatives Unit in cooperation with the Content Owner will develop the initial draft of all Department level operating procedures.



3. The Content Owner should provide the Policy Initiatives Unit with information needed for new or revised Department level operating procedures.
 - a. The Content Owner reviews directives, procedure memoranda, legislation, or other higher level authority to determine the need for new or revised operating procedures.
 - b. The Content Owner consults with Office of the Attorney General, other agencies, institutions of higher learning, citizen groups, service providers, and other affected parties, as needed, to receive input and promote interagency collaboration on matters of mutual concern. (4-APPFS-3D-20; 2-CO-1A-15)
 4. Based on the degree of change from current practice and procedure, the Policy Initiatives Unit will determine what level of review is necessary for Department level operating procedures to allow all levels of staff an opportunity to provide relevant input in formulation of operating procedures. (5-1A-4004; 4-4004; 4-ACRS-7B-09; 4-APPFS-3D-07)
 - a. The Policy Initiatives Unit or the Content Owner may submit the initial draft to selected subject matter experts for review and the opportunity to provide recommendations for corrections and improvements.
 - b. The Policy Initiatives Unit and Content Owner will revise the initial draft as necessary.
 - c. If needed, the Policy Initiatives Unit may send the updated draft to Executive/Operations Leadership staff for review. Executive/Operations Leadership Staff will be allowed 15 days to respond and provide recommendations for corrections and improvements.
 - d. The Policy Initiatives Unit reviews recommendations from the Executive/Operations Leadership staff with the Content Owner and the draft is revised as necessary to develop the final operating procedure for signature.
 5. The Policy & Initiatives Unit will prepare a clean document for final review and signature.
 6. Signatory authority is assigned or delegated in the directive based on the subject matter content.
 - a. The Director, Chief of Corrections Operations, Deputy Director for Administration, or the Deputy Director of Programs, Education, and Re-entry sign Department level operating procedures.
 - b. The Director of Food Services signs Food Service Manual Chapters.
 7. Department level operating procedures undergo a final review before submission to the Signatory Authority.
 - a. The Reviewer is a direct report to the Signatory Authority and is generally the Unit Head over the designated Content Owner.
 - b. In some cases, the Content Owner and Reviewer roles may be combined in one position.
- B. Department level operating procedures include a personnel policy manual that is available to each employee for reference via the Virtual Library. (5-1C-4048; 4-4048; 4-ACRS-7E-07; 4-APPS-3E-02; 2-CO-1C-01; 1-CTA-1C-01)
1. The personnel policy manual includes operating procedures covering the following areas:
 - a. Operating Procedure 010.1, *Virginia Department of Corrections Administration* - Organization chart (table of organization)
 - b. Operating Procedure 040.1, *Litigation* - Legal assistance; Insurance/ professional liability requirement
 - c. Operating Procedure 102.2, *Recruitment, Selection, and Appointment* - Recruitment and promotion; Job descriptions and qualifications
 - d. Operating Procedure 102.4, *Compensation* - Salary determinations
 - e. Operating Procedure 102.5, *Staff Medical Screening and Physical Examination* - Physical fitness policy
 - f. Operating Procedure 102.6, *Staff Orientation* - New employee orientation; New staff is informed



in writing of the institution's hostage policy in regard to staff roles and safety.

- g. Operating Procedure 102.7, *Employee Records* - Personnel records
- h. Operating Procedure 110.1, *Hours of Work and Leaves of Absence* - Benefits, holidays, leave, and work hours
- i. Operating Procedure 135.1, *Standards of Conduct* - Employee-management relations, including disciplinary procedures
- j. Operating Procedure 135.2, *Rules of Conduct Governing Employees Relationships with Offenders* - Fraternalization
- k. Operating Procedure 135.3, *Standards of Ethics and Conflict of Interest* - Code of ethics and conflict of interest; Sexual harassment and hostile work environment prevention; Statutes relating to political activities
- l. Operating Procedure 145.1, *Probationary Period* - Probationary period
- m. Operating Procedure 145.2, *Employee Performance Management* - Employee evaluation
- n. Operating Procedure 145.3, *Equal Employment Opportunity* - Equal employment opportunity / affirmative action provisions
- o. Operating Procedure 145.4, *Employee Grievances* - Employee-management relations, including grievance and appeals procedure
- p. Operating Procedure 150.5, *Employee Assistance Program* - Employee Assistance Program
- q. Operating Procedure 175.1, *Employee Separations* - Retirement, resignation, and termination
- r. Operating Procedure 240.1, *Travel* - Travel
- s. Operating Procedure 350.2, *Training and Development* - Staff development, including in-service training

2. During orientation, employees are required to sign statements acknowledging access to and awareness of personnel policies and regulations.

C. Department level operating procedures include a manual containing all procedures for institutional security and control, with detailed instructions for implementing these procedures. The manual is available to all staff on the Virtual Library. (5-3A-4174; 4-4174)

III. Procedure Dissemination and Access

A. Operating procedures are disseminated and made available to all Department of Corrections units, employees, volunteers, public citizens, and offenders as appropriate.

- 1. The Policy Initiatives Unit will maintain Department level directives, operating procedures, annual reviews, forms, and other documentation in the Department of Corrections Virtual Library on iDOC. (5-1A-4012, 5-1A-4013; 4-4012, 4-4013; 4-ACRS-7B-07; 2-CO-1A-16)
 - a. Documents should be posted on the Virtual Library at least 30 days before the effective date. (5-1A-4014; 4-4014; 4-ACRS-7B-08).
 - i. Emergency actions, changes with minimal impact, and changes driven by outside agencies may be posted with less than 30 days notice.
 - ii. When an operating procedure is re-written, both the "old" procedure and the "new" procedure will be posted on the Virtual Library until the new effective date.
 - b. New postings on the Virtual Library are listed in the "What's New" section.
 - c. Facilities, Probation and Parole Districts, and other units will maintain their local page on the Virtual Library.
- 2. Anyone with a DOC Windows/VMS user account can access the Virtual Library to view Directives and Operating Procedures. (5-1A-4012, 5-1A-4013; 4-4012, 4-4013; 4-ACRS-7B-07; 2-CO-1A-16, 2-CO-1A-17) Supervisors shall ensure that their employees have access to operating procedures. (5-1A-4013; 4-4013)



3. Procedures located on the Virtual Library may be copied and placed in a manual if the recipient chooses. This manual must be continually updated to remain consistent with the documents accessible on the Virtual Library.
- B. About once each month, the Policy Initiatives Unit will send an email to all DOC employees listing new postings on the Virtual Library.
- C. Changes with significant impact on offenders incarcerated in facilities shall be communicated to the offender population at least 30 days prior to the effective date if possible. (5-1A-4014; 4-4014)
- D. Organizational Unit Heads are responsible for communicating changes in operating procedures to employees and volunteers prior to implementation. (5-1A-4014; 4-4014; 4-ACRS-7B-08)
- E. COV §2.2-3700 et seq. provides that certain information may be excluded from public disclosure under the Freedom of Information Act (FOIA).
 1. Operating procedures and associated documents containing information excluded from release under FOIA shall include a statement indicating that the document is restricted and that portions of the document are excluded from public disclosure requirements under the *Virginia Freedom of Information Act* in accordance with the appropriate Code of Virginia section and that unauthorized dissemination, printing or copying of any part of the document is prohibited.
 - a. Each document containing information excluded from release under FOIA will be marked as Restricted.
 - b. Each page is marked with a banner and a watermark with the text “Unauthorized dissemination, printing, or copying is prohibited”.
 - c. For each Restricted Department level operating procedure, the Policy Initiatives Unit will maintain a redacted version suitable for public disclosure.
 - d. Restricted Operating procedures will be posted on the Virtual Library for DOC staff use.
 - e. Redacted versions of documents containing information excluded from release under FOIA will be marked as approved for public access and may be posted on the Public website with the approval of the Director or designee.
 - f. Documents with redacted information may be approved for offender access if appropriate.
 2. Organizational Units are responsible for the security of their documents containing information excluded from release under FOIA.
 - a. Local documents should be placed on the unit’s LOP page on the Virtual Library including the statement, banner, and watermark as stated for Department level documents.
 - b. The Policy Initiatives Unit must review and approve redacted versions of restricted local operating procedures and restricted implementation memoranda before public disclosure.
 3. Each document should be marked to indicate whether or not it is approved for public access
 - a. Documents with redacted information must specify the exact COV section that grants the exclusion for each section redacted.
 - b. Documents with redacted information should be approved for public access.
 - c. Documents with redacted information may be approved for offender access if appropriate.
 4. Documents containing information excluded from release under FOIA shall be printed or copied only as needed for reference, training, or audit purposes.
 - a. Documents containing information excluded from release under FOIA shall not be disseminated to the public without specific authorization from the DOC FOIA Coordinator or the Policy Initiatives Unit.
 - b. Offenders shall not be allowed to view or access documents containing information excluded from release under FOIA.



- F. Certain operating procedures are designated to be accessible to offenders: these documents should be available in the facility in areas such as the law library and library.
- G. Directives and operating procedures not containing information excluded from release under FOIA should be designated as approved for public access and can be provided on request to other agencies and to the public. All requests for operating procedures containing information excluded from release under FOIA must be forwarded to the Policy Initiatives Unit.
- H. All DOC operating procedures are listed on the DOC public website. (5-1A-4012; 4-4012; 2-CO-1A-16)
 - 1. Public Access documents are hyperlinked for direct download.
 - 2. Requests for redacted versions of restricted documents must be submitted through the DOC FOIA office.

IV. Review Process

- A. Operating procedures are reviewed annually and re-written every three years. Updates are made as needed to incorporate changes in statute, regulation, standards, or correctional practice. (5-1A-4012, 5-1A-4013; 4-4012, 4-4013; 4-ACRS-7B-08; 4-APPFS-3D-06; 2-CO-1A-17)
- B. For Department and local operating procedures, the Content Owner shall conduct an annual review to ensure that the procedure remains in conformity with DOC directives and other management changes; that it continues to be necessary; and that it adequately addresses the need for which it was developed.
- C. For Department level operating procedures, the annual review should be documented on an *Annual Review Memo* signed by the Content Owner. Any revision submissions for Department level procedures must be forwarded to the Policy Initiatives Unit.
- D. For local level operating procedures and implementation memoranda, the annual review should be documented on an [Annual Procedure Review](#) 010_F12 signed by the Organizational Unit Head.
- E. For Department and local operating procedures, the Content Owner shall review and update the procedure within three years of its effective date. Any revision submissions for Department level procedures must be forwarded to the Policy Initiatives Unit.

V. Unit-specific Procedures

A. Local Operating Procedures

- 1. Local operating procedures authorized by directive shall bear the procedure number, address the ACA/PREA standards, and address the issues as required in the directive.
- 2. If an organizational unit has need for an operating procedure on a subject not covered by a Department level operating procedure, the unit may write and maintain a local operating procedure.
- 3. A local operating procedure cannot be written on the same subject as a Department level operating procedure; an implementation memorandum must be used if needed.
- 4. Local operating procedures not authorized by directive are identified with the three-digit number of the most closely related directive and a sequential letter i.e. 001.A.
- 5. Local operating procedures (including those specifically authorized by a directive) will be signed by the Organizational Unit Head and Regional Administrator.
- 6. The organizational unit shall review each local operating procedure annually (documented on an [Annual Procedure Review](#) 010_F12) and re-write every three years. Updates shall be made as needed to incorporate changes in statute, regulation, standards, or correctional practice. (5-1C-4049; 4-4049)

B. Implementation Memoranda

- 1. If necessary, an organizational unit may write and maintain an implementation memorandum to provide unit specific information not provided by a Department level operating procedure. (See



[Implementation Memorandum Template](#) 010_F10.)

2. At any time, an organizational unit shall not have more than one active implementation memorandum for any operating procedure.
3. An implementation memorandum will use the same number as the related Department level operating procedure and include only the additional local information.
4. Implementation Memoranda will be signed by the Organizational Unit Head and Regional Administrator.
5. The organizational unit shall review each implementation memorandum annually (documented on an [Annual Procedure Review](#) 010_F12) and re-write every three years. Updates shall be made as needed to incorporate changes in statute, regulation, standards, or correctional practice. (5-1C-4049; 4-4049)

C. Operating Procedure Variance

1. When special circumstances make certain provisions of a Department level operating procedure impractical for an operating unit, the [Procedure Variance Request](#) 010_F11 shall be used to request a variance to those specific provisions.
2. The *Procedure Variance Request* should be submitted to the appropriate Regional Administrator and Regional Operations Chief for review, and forwarded for approval to the Signatory Authority position that signed the operating procedure.
3. Once approved, a *Procedure Variance Request* is effective for three years or until there is a substantive change in the operating procedure, whichever comes first.

VI. Format and Supporting Documents

A. Numbering System

1. Directives are identified with a three-digit number; directives within the same functional area have related numbers.
2. Operating procedures (Department or local level) specifically authorized by a directive are identified with the three digit directive number and a sequential number as assigned in the directive, i.e. 001.1.

B. All documents generated under this operating procedure should use the templates, formats, and styles as provided by the Policy Initiatives Unit whenever practicable. Previously approved documents need not be updated for the sole purpose of conversion to a new format or style.

1. Operating procedures will be written in accordance with the *Procedure Style Guidelines* (see Attachment 1).
2. [Operating Procedure Template](#) 010_F7 and [Operating Procedure Template \(Restricted\)](#) 010_F8 are to be used for all operating procedures.
3. References to ACA, PREA, or other standards should appear in red font within parentheses at the end of the first paragraph of text that supports the standard. Multiple references may be needed in one or more operating procedures to address all facets of a standard.

C. Attachments

1. An attachment (see [Attachment Template](#) 010_F9) is added to an operating procedure or an implementation memorandum when there is need to provide information that does not fit within the text, i.e. contact information or instructions for completing a form.
2. Attachments with a Department level operating procedure will be identified as Attachment 1, 2, etc.
3. Attachments to a local operating procedure or an implementation memorandum will be identified as Attachment A, B, etc.
4. The effective date of an attachment should match the effective date of the related operating procedure.



- a. The revision date should remain the same until there is a change in the content of the attachment.
- b. If an attachment is changed before the related operating procedure is re-written, the revision date will be changed and, if necessary (major change), a revision date may be added next to the effective date which should remain the same as the current operating procedure.

D. Forms

1. A form (see [Form Template](#) 010_F13) is provided when there is a need for the user to enter information. Form data fields should be provided for online forms.
2. A Department level form is identified with the form name, the directive number, the letter “F” and a sequential number, i.e. *Form Name* 001_F6.
3. A local level form is identified with the form name, the directive number, the letter “F” and a sequential letter, i.e. *Form Name* 001_FA.
4. Each form may be referenced in and used with multiple operating procedures.
5. Forms should be updated as needed but not necessarily updated when the procedure is re-written.
 - a. The revision date should be changed to reflect the date draft changes are made to the form.
 - b. The form filename (001_F6_2-19 {month-year}) should be changed to reflect the date draft changes are made to the form

VII. Amendments to Directives, Operating Procedures, and Implementation Memoranda

- A. Directives, operating procedures, and implementation memoranda should be changed as needed to keep the document current with changes in statute, regulation, standards, or correctional practice.
- B. Directives will generally be re-written to incorporate significant changes.
- C. Significant changes to operating procedures and associated documents should be documented on an [Amendment to Operating Procedure](#) 010_F14 signed by the Content Owner, Reviewer, and Signatory Authority positions that signed the original document.
- D. Minor corrections and technical changes can be made on the authority of the Content Owner without issuing an *Amendment to Operating Procedure*.
- E. Changes to the content of a document should be denoted with additions in black type with gray 25% highlight and deletions in black type with a strike through and gray 25% highlight.
 1. The type of change (added, deleted, changed) and the effective date should appear in 9 font within parentheses at the end of the first paragraph of the affected section.
 2. The date of all changes to a document should be entered in the *Amended* section in the operating procedure header.
 3. Attachments may be changed by use of highlight as above or replaced by a new version with the revision date noted in the footer.
 4. Form changes will generally require the issue of an updated form.
- F. Major changes that affect multiple sections of a directive, operating procedure, or implementation memorandum may require that the entire document be re-written before the three-year life expires.
- G. For Department level operating procedures, the Policy Initiatives Unit will determine, in consultation with the Content Owner, whether an *Amendment to Operating Procedure*, re-write of an existing procedure, or a new operating procedure is needed and work with the Content Owner to develop an initial draft.
- H. For local operating procedures and implementation memoranda, the unit Content Owner should provide the information to the Operations Manager or other unit authority responsible for procedures. Operational units will establish an internal procedure development process.



VIII. Policy Initiatives Unit Duties

- A. Ensure that all Department level operating procedures are clearly written and properly formatted
- B. Assess potential impact on related administrative and operational issues, and provide appropriate input to Executive Staff
- C. Develop transmittals for subject matter expert and executive staff reviews
- D. Assist the Content Owner, as necessary, in maintaining current, relevant operating procedures
- E. Coordinate final operating procedure approvals and dissemination
- F. Maintain current directives and operating procedures on the Virtual Library
- G. Submit appropriate operating procedures for posting on the DOC public website
- H. Assist in audit preparations by provided protocols and primary documentation
- I. Maintain master files of current and superseded procedures
- J. Provide copies of archived documents to the Attorney General's Office, Human Resources Hearing Officers and others as needed
- K. Provide documents to satisfy FOIA requests including redacted versions of restricted documents
- L. Provide documents and information in support of other correctional and law enforcement agencies
- M. Monitor the effective date of operating procedures
- N. Notify the Content Owner of operating procedure annual reviews
- O. Assist the Content Owner to develop re-writes when due
- P. Serve as a resource for DOC staff, other state agencies, local law enforcement agencies and jails, correctional agencies for other states, and the public to find procedure references, provide copies of procedures, and research superseded procedures

DEFINITIONS OF TERMS USED IN THIS OPERATING PROCEDURE

Amendment - An authorized change to an operating procedure, attachment, or form documented on an *Amendment to Operating Procedure*

Attachment - A document associated with an operating procedure or an implementation memorandum that provides information, i.e. contact information or instructions

Content Owner - The person in the designated position that has direct knowledge and control of the subject matter of the operating procedure

Directive - A written statement signed by the Director to authorize one or more operating procedures referencing applicable statutes, policies, regulations, and standards and listing issues to be addressed in each operating procedure; directives do not regulate the public or private sector

Executive Staff - For purposes of directive and operating procedure review, Executive Staff includes the Director and designated senior staff to include Regional Operations Chiefs and Regional Administrators

Form - A document provided for the user to enter information

Implementation Memorandum - Instructions or protocol developed by an organizational unit if needed to provide additional information to a Department level operating procedure to guide operations of that unit

Operating Procedure - A specific written protocol that provides for the implementation and uniform application of DOC directives and approved by the appropriate DOC authority

Operations Leadership - For purposes of operating procedure review, includes the Facility Unit Heads and Chief P&P Officers



Organizational Unit - A DOC unit, such as a correctional facility, regional office, probation and parole office, Virginia Correctional Enterprises (VCE), Academy for Staff Development, Corrections Construction Unit, Agribusiness Unit, and individual headquarters unit (i.e. Human Resources, Offender Management, Internal Audit)

Organizational Unit Head - The person occupying the highest position in a DOC organizational unit

Policy Initiatives Unit - The DOC operating unit that is responsible for oversight and management of the Department of Corrections directive and procedure development/review/revision/dissemination process

Reviewer - The final level of review before the Signatory Authority for an operating procedure or amendment

Signatory Authority - One or more positions assigned the authority for approval of a directive, operating procedure, implementation memorandum, or amendment

Standard - A statement promulgated by the American Correctional Association or other authority that defines a required or essential condition to be achieved or maintained

REFERENCES

COV §2.2-3700 et seq., *The Virginia Freedom of Information Act*

COV §53.1-10, *Powers and duties of Director*

COV §53.1-25, *Director to prescribe rules; rules to be available to prisoners*

COV §53.1-140, *Powers and duties of Director of Department*

Operating Procedure 010.1, *Virginia Department of Corrections Administration*

Operating Procedure 040.1, *Litigation*

Operating Procedure 102.2, *Recruitment, Selection, and Appointment*

Operating Procedure 102.4, *Compensation*

Operating Procedure 102.5, *Staff Medical Screening and Physical Examination*

Operating Procedure 102.6, *Staff Orientation*

Operating Procedure 102.7, *Employee Records*

Operating Procedure 110.1, *Hours of Work and Leaves of Absence*

Operating Procedure 135.1, *Standards of Conduct*

Operating Procedure 135.2, *Rules of Conduct Governing Employees Relationships with Offenders*

Operating Procedure 135.3, *Standards of Ethics and Conflict of Interest*

Operating Procedure 145.1, *Probationary Period*

Operating Procedure 145.2, *Employee Performance Management*

Operating Procedure 145.3, *Equal Employment Opportunity*

Operating Procedure 145.4, *Employee Grievances*

Operating Procedure 150.5, *Employee Assistance Program*

Operating Procedure 175.1, *Employee Separations*

Operating Procedure 240.1, *Travel*

Operating Procedure 350.2, *Training and Development*

ATTACHMENTS

Attachment 1: *Procedure and Attachment Style Guidelines*

FORM CITATIONS



[Operating Procedure Template](#) 010_F7

[Operating Procedure Template \(Restricted\)](#) 010_F8

[Attachment Template](#) 010_F9

[Implementation Memorandum Template](#) 010_F10

[Procedure Variance Request](#) 010_F11

[Annual Procedure Review](#) 010_F12

[Form Template](#) 010_F13

[Amendment to Operating Procedure](#) 010_F14

