

Stewart B. McKinney

National Wildlife Refuge



Welcome McKinney Refuge Volunteers!

This interactive document is designed to make it easy for you to complete your annual volunteer refresher training on your own computer or tablet.

Through a series of short videos, you'll receive all the training you need to volunteer at the Outer Island Unit of the refuge.

After viewing the videos, you must complete the **TRAINING CERTIFICATION FORM** and a new **VOLUNTEER SERVICES AGREEMENT**. Sign both of these forms and return them to Refuge HQ. These forms are located at the end of this document for your convenience. There are also hyperlinks to the documents – and our Outer Island Standard Operating Procedures document and Refuge Emergency Action Plan - in **yellow** boxes.

NEW VOLUNTEERS will need to be paired with an experienced volunteer, intern or staff member the first two times that they work on the island.

**PLEASE PROCEED TO THE NEXT PAGE
TO START THE TRAINING**

Stewart B. McKinney National Wildlife Refuge Outer Island Volunteer Refresher Training



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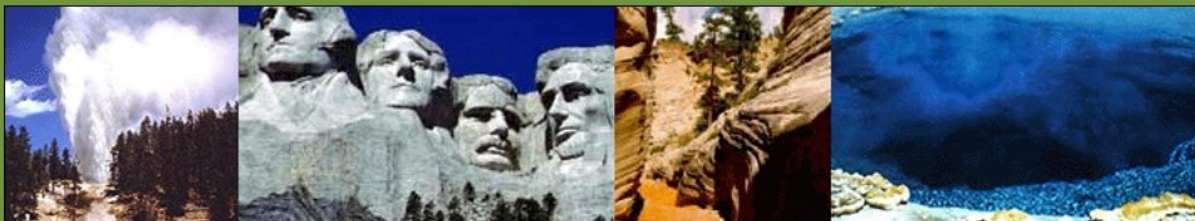
Section 1. Welcome and Introduction

U.S. Department of the Interior

The Department of the Interior



- ~ Manages over 500 million acres of Federal land (1/5th of the country)
- ~ Has 2,400 locations nationwide including national parks, wildlife refuges and other stations
- ~ Department has 600,000 volunteers.
- ~ In FWS alone, volunteers do enough work to equal 640 full-time employees



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Section 2. Who We Are

The U.S. Fish and Wildlife Service and the National Wildlife Refuge System



The US Fish and Wildlife Service has many divisions. One is focused on endangered species, while another intercepts international shipments of exotic animals and prosecutes violations of Federal wildlife laws.

The National Wildlife Refuge System, where we work, protects America's wildlife and plant populations by preserving land and various habitats. Many refuges also welcome visitors to enjoy activities such as wildlife observation, photography, interpretation, environmental education, hunting and fishing.



The NWRS was started by President Theodore Roosevelt in 1903. Today there are more than 560 National Wildlife Refuges, with at least one located in each state and territory.



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Section 3. The Refuge and Staff

Stewart B. McKinney NWR

The refuge consists of:

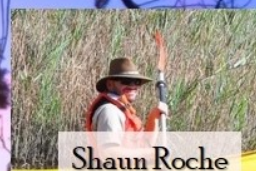
- More than 1,000 acres of wildlife habitat along Connecticut's densely populated coastline (70 miles)
- 1 barrier beach
- 2 of the largest salt marshes on the coast including the oldest maritime forest
- 8 islands
- 4 *Important Bird Areas*
- 1 federally endangered species (roseate tern)
- 2 federally threatened species (piping plover, northern long-eared bat)

To manage this resource we have:

- 5 permanent staff members
- Approximately 10 seasonal staff/interns
- 2 Friends Groups who serve as advisors/advocates
- More than 100 very dedicated volunteers



Rick Potvin



Shaun Roche



Kris Vagos



Sean Healy



Allan Chavez



ALLAN CHAVEZ was a dedicated member of the staff for over five years, until his unexpected passing in early 2022. His is greatly missed. His position has not yet been filled.

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Section 4. *Outer Island's Standard Operating Procedures*

Standard Operating Procedures

~Volunteers should familiarize themselves with the entirety of the Island SOP document.

U.S. Fish and Wildlife Service

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Standard Operating Procedures - Outer Island Unit

Individual and Family Access to the Island

Individuals or family groups who wish to visit the island may do so from **May 30th to September 25th** during normal operating hours – 8:00 AM to sunset. **RESERVATIONS ARE NOT REQUIRED FOR INDIVIDUALS OR FAMILIES TO VISIT.** Outer Island will be open for enhanced visitation (including tours, visitor access to tide pools, etc.) whenever an Island Keeper or Visitor Services Volunteer is on duty. Full-time Island Keeper interns will be on the island to serve visitors from approximately May 30th until approximately August 15th. After this date, enhanced visitation may be curtailed on weekdays because of a lack of availability of additional *temporary* Island Keepers. USFWS staff, Connecticut State University (CSU) coordinators, Island Keepers and/or the senior Visitor Services Volunteer may close the island at any time because of severe weather. The Refuge Manager must be informed immediately by phone if this occurs.

**CLICK HERE TO DOWNLOAD THE
STANDARD OPERATING PROCEDURES**

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**CLICK THIS IMAGE TO WATCH
TRAINING VIDEO FOUR**

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Section 5. Your Volunteer Services Agreement

Volunteer Services Agreement

All Federal volunteers must have a current VSA on file.

Your volunteer affirmation statement says the following:

- ~ I understand that I will not receive any compensation for the above service and that volunteers are NOT considered Federal employees except as otherwise provided by law.
- ~ I understand that volunteer service is not creditable for leave accrual or any other employee benefits.
- ~ I also understand that either the government or I may cancel this agreement at any time by notifying the other party.
- ~ I understand that my volunteer position may require a reference check, background investigation, and/or a criminal history inquiry in order for me to perform my duties.
- ~ I understand that all publications, films, slides, videos, artistic or similar endeavors, resulting from my volunteer services as specifically stated in the attached job description, will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.



**CLICK HERE TO DOWNLOAD THE
VOLUNTEER SERVICES AGREEMENT**



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Section 6. *Emergencies and Safety Procedures*

Safety

~ All Federal volunteers must familiarize themselves with and comply with safety standards and emergency plans.

FISH & WILDLIFE SERVICE, REGION FIVE

EMERGENCY ACTION PLAN

FACILITY: Stewart B. McKinney National Wildlife Refuge

DATE REVIEWED: 4/13/16

I. PURPOSE

To establish procedures and guidelines to be followed in the event that a fire or other emergency develops in the facility. For additional information regarding this plan call:

Richard Potvin, Refuge Manager 860-399-2513 (Name, Title and Phone #)

(Name, Title and Phone #)

II. POLICY

The safety and well-being of all employees and visitors, and the protection of our natural resources, are the primary concerns of the United States Fish and Wildlife Service during an emergency. When an emergency occurs, Service Management will ensure that necessary actions will be taken to comply with this plan and related regulations as outlined in the 29 CFR 1910.38.



**CLICK HERE TO DOWNLOAD THE
EMERGENCY ACTION PLAN**

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SBM NWR Volunteer Training Safety

**CLICK THIS IMAGE TO WATCH
TRAINING VIDEO SIX**

7



SBM NWR Volunteer Training Safety

**CLICK THIS IMAGE TO WATCH
TRAINING VIDEO SEVEN**

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Section 7. Signing Up and Volunteering

Volunteer Scheduling

Using SignUpGenius.com to schedule your volunteer time at Outer Island

A screenshot of the SignUpGenius website. The header is orange with the SignUpGenius logo and navigation links: Features, Pricing, More, Create a Sign Up, Log In, and a search icon. The main content area has a green background with a photo of four diverse people (three men and one woman) looking at their phones. Overlaid on the photo is the text "Powerful Group Organizing Features" in white, followed by "Say goodbye to paper sign ups and reply-all emails and hello to smart online sign up tools. Be a genius!" and a "View Plans" button.

Powerful Group Organizing Features

Say goodbye to paper sign ups and reply-all emails and hello to smart online sign up tools. Be a genius!

[View Plans](#)

**CLICK HERE TO SIGN UP FOR
VOLUNTEER TIMES AT OUTER ISLAND**



**CLICK THIS IMAGE TO
WATCH TRAINING
VIDEO EIGHT**

U.S. Fish and Wildlife Service

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Section 8. COVID-19 Best Practices



Protecting Yourself from COVID-19 in the Workplace

Safety and Health Awareness for Workers



U.S. Department of the Interior | Office of Occupational Safety and Health

**CLICK THIS IMAGE TO
WATCH TRAINING
VIDEO NINE**

**CLICK HERE TO DOWNLOAD
THE COVID-19 DOCUMENTS
RICK REFERENCES IN THE
VIDEO TO FOLLOW ALONG**

U.S. Fish and Wildlife Service

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This concludes your refresher training.

Now, please completely fill out the TRAINING CERTIFICATION FORM and VOLUNTEER SERVICES AGREEMENT (click on the links or just print pages 11-13 of this document) sign the forms and then:

- email them to shaun_roche@fws.gov

or

- fax them to 860-399-2515

or

- mail them to Shaun Roche, Visitor Services Manager, USFWS, 733 Old Clinton Road, Westbrook, CT 06498



United States Department of the Interior

FISH AND WILDLIFE SERVICE

Stewart B. McKinney National Wildlife Refuge
733 Old Clinton Road
Westbrook, CT 06498
Tel. 860-399-2513 Fax 860-399-2515



To: File

Re: **Stewart B. McKinney N.W.R.**
Volunteer Training Certification

I am a volunteer for the U.S. Fish and Wildlife Service - Stewart B. McKinney National Wildlife Refuge and I have completed the required yearly training session, including safety training, for the position of Visitor Services Volunteer. This training was established by the Refuge Manager in accordance with agency and departmental policy.

From: Volunteer Name

(Print) _____ (Sign) _____

Date: _____

or digitally sign and date below:

VOLUNTEER SERVICE AGREEMENT—NATURAL & CULTURAL RESOURCES

1. VOLUNTEER AGREEMENT TYPE (Choose 1) <input type="checkbox"/> Individual OR <input type="checkbox"/> Group		2. NAME OF GROUP (if applicable)	
3. NAME OF VOLUNTEER OR GROUP LEADER COMPLETING FORM (Last, First)		4. U.S. CITIZEN OR PERMANENT RESIDENT <input type="checkbox"/> Yes, I am a U.S. citizen or Permanent Resident <input type="checkbox"/> No, I am not a US Citizen or Permanent Resident (if applicable, list visa type _____)	
5. STREET ADDRESS, APT #	6. CITY	7. STATE	8. ZIP CODE
9. DATE OF BIRTH	10. PHONE	11. EMAIL ADDRESS	

12. DEMOGRAPHIC INFORMATION (Optional): Please indicate both ethnicity and race and tell us if you are a veteran or have a disability. Multiracial respondents may select two or more races. This information will inform our understanding of diversity and inclusion among the volunteer force in the natural and cultural resource areas.

12a. Ethnicity (Select one): <input type="checkbox"/> Hispanic, Latino, or Spanish Origin <input type="checkbox"/> Not Hispanic, Latino, or Spanish Origin	12b. Race (Select one or more, regardless of ethnicity): <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	12c. Are you a Military Veteran or Active Duty Military? <input type="checkbox"/> Yes <input type="checkbox"/> No 12d. Do you have a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No
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EMERGENCY CONTACT INFORMATION

13. NAME (Last, First)	14. PHONE	15. EMAIL ADDRESS	
16. STREET ADDRESS, APT #	17. CITY	18. STATE	19. ZIP CODE

GOVERNMENT OFFICIAL COMPLETES THIS SECTION

20. NAME OF AGENCY/ BUREAU	21. AGREEMENT #
22. AGENCY CONTACT NAME (Last, First)	23. AGENCY CONTACT EMAIL & PHONE
24. REIMBURSEMENTS APPROVED: <input type="checkbox"/> Yes <input type="checkbox"/> No Type and Rate of Reimbursement:	25. VOLUNTEER POSITION/GROUP PROJECT TITLE:

26. Description of service to be performed. Provide a brief abstract of volunteer or service activity and the location of the volunteer activity, and attach description of service to be performed. Service description should include details such as time and schedule commitment, use of government vehicle, use of personal equipment and/or vehicle, skills required (note certifications if necessary), level of physical activity required, etc.

VOLUNTEER/SERVICE ACTIVITY ABSTRACT

27. **Check all that apply:** ☐ Description of service attached ☐ OF-301b Volunteer Sign-up Form for Groups attached ☐ Risk Assessment attached
☐ Valid Driver's License required ☐ Background Investigation required
☐ Medical Clearance Required ☐ Other:

PARENTAL CONSENT FOR VOLUNTEER UNDER AGE 18

28. NAME	29. PHONE	30. EMAIL ADDRESS	
31. STREET ADDRESS, APT #	29. CITY	30. STATE	31. ZIP CODE

32. I affirm that I am the parent/guardian of the abovenamed volunteer. I understand that the agency volunteer program does not provide compensation, except as otherwise provided by law; and that the service will not confer on the volunteer the status of a Federal employee. I have read the attached description of the service that the volunteer will perform. I give my permission for _____ to participate in the specified volunteer activity.

33. (NAME OF YOUTH)

34. Parent/Guardian Signature

Date

VOLUNTEER & GROUP LEADER AFFIRMATION

35. ☐ I understand that I will not receive any compensation for the above service and that volunteers are NOT considered Federal employees except as otherwise provided by law. I understand that volunteer service is not creditable for leave accrual or any other employee benefits. I also understand that either the government or I may cancel this agreement at any time by notifying the other party. I understand that my volunteer position may require a reference check, background investigation, and/or a criminal history inquiry in order for me to perform my duties.
- ☐ I understand that all publications, films, slides, videos, artistic or similar endeavors, resulting from my volunteer services as specifically stated in the attached job description, will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.
- ☐ I understand the health and physical condition requirements for doing the work as described in the job description and at the project location.
- ☐ I know of no medical condition or physical limitation that may adversely affect my (or members of the group's) ability to provide this service. (If a group, see attached OF-301b)
- ☐ I consent to being photographed and to the release of my photographic image. (If a group, see attached OF-301b)

I do hereby volunteer my services as described above, to assist in authorized activities at _____ and I agree to follow all applicable safety guidelines. See attached OF301b attached if a member of a group. (NAME OF FEDERAL AGENCY)

36. Signature of Volunteer or Group Leader

Date

The abovenamed agency agrees, while this arrangement is in effect, to provide such materials, equipment, and facilities that are available and needed to perform the service described above, and to consider you as a Federal employee only for the purposes of tort claims, liability and injury compensation to the extent not covered by your volunteer group, if any.

37. Signature of Government Representative

Date

TERMINATION OF AGREEMENT

38. Agreement Terminated Date:

Total Hours Completed:

39. Signature of Government Representative:

PUBLIC BURDEN STATEMENT

Completing this form is voluntary, but failure to provide the information will prevent program participation. According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1093-0006. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of the Interior (USDOL), U.S. Department of Agriculture (USDA), U.S. Department of Defense (USDOD), and U.S. Department of Commerce (USDOC) are equal opportunity providers and employers and prohibit discrimination in all programs and activities on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means of communication of program information should contact the volunteer program to which they are applying. If you would like to file a Section 508-related complaint, please contact the DOI Section 508 Program via email at section508@ios.doi.gov or phone (202) 208-1530.

PRIVACY ACT STATEMENT

Collection and use is covered by Privacy Act System of Records INTERIOR/DOI-05 Interior Volunteer Services File System (which may be viewed at <https://www.doi.gov/privacy/doi-notices>) and OPM/GOVT-1 General Personnel Records (which may be viewed at <https://www.opm.gov/information-management/privacy-policy/#url=SORNs>) and is consistent with the provisions of 5 USC 552a (Privacy Act of 1974), which authorizes acceptance of the information requested on this form. The information is used to identify persons interested in participating in a government volunteer program, managing the volunteer program, including tort claims and injury compensation. Records or information contained in this system may be disclosed outside the agencies participating in this program as a routine use pursuant to 5 U.S.C. 552a(b)(3). Completing this form is voluntary, but failure to provide the information will prevent program participation.