

INTERNAL MANAGEMENT POLICY & PROCEDURE

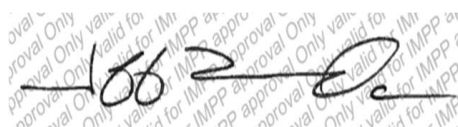
Applicability: ☒ Adult Operation Only ☐ JUVENILE Operations Only ☐ DEPARTMENT-WIDE

IMPP #: 21-105A

PAGE #: 1 of 4

VICTIM SERVICES: Processing Requests by Victims and Others for Cessation of Communications from Residents

Original Date Issued: 03-14-23 Replaces IMPP Issued: N/A **CURRENT EFFECTIVE DATE: 03-14-23**

Approved By: , Secretary Next Scheduled Review: 01/2026

POLICY

Victims of crime, as well as all other individuals in the public, have the right to refuse unwelcome communications by residents. Contacts in the form of ordinary mail, telephone calls, and e-mails made by residents may be prohibited upon receipt of a proper written request by the victim or other individual. Residents subject to an order prohibiting communications who then violate the order may be punished by imposition of disciplinary penalties, and in certain instances, as warranted by the particular facts of the case, may also be criminally prosecuted.

DEFINITIONS

Communications: Attempted or completed verbal and/or written contact by any method, including, but not restricted to mail, telephone, and e-mail, whether directly or through a third party, including conference calling or passing of messages.

Victim: A person who suffers direct or threatened physical, emotional, psychological, or financial harm as a result of the commission or attempted commission of a crime.

- a. Primary victim: the person(s) directly impacted by the crime.
- b. Secondary victim: the person(s) indirectly impacted by the crime.

PROCEDURES

I. Cease Communications requests

- A. Residents must not communicate with any person, either directly or through third parties, who has filed a written objection to the communication with the Office of Victim Services.
 1. Designated Victim Services Facility Liaisons are to be the point of contact for any person contacting a facility or the Office of Victim Services regarding unwanted communication.
 2. An individual does not have to be a primary or secondary victim, or to have received communication in order to request a Cease Communications order, although more information about correspondence or calls received may be requested by KDOC.
 3. An individual requesting a Cease Communications order must be at least 18 years of age.
 - a. A person may not request a Cease Communications order on behalf of another unless one of the following conditions is met:

- 1) That person is the parent or legal guardian of the individual named in the Cease Communications order, in accordance with the guidelines in Section II.
 - 2) That person has power of attorney over the individual named in the Cease Communications order
 - b. If a group of individuals or family wants to request a Cease Communications order, each individual must make their own request.
- B. Upon contact from the individual requesting the Cease Communications order, the Facility Victim Services Liaison must obtain a written objection to communication from the requestor using the Request for Cease Communications Order (Attachment A).
1. The individual requesting the order may be offered further services through the Office of Victim Services, if appropriate.
 2. The information necessary to issue a Cease Communications order must be sent by the Facility Victim Services Liaison to the appropriate facility Enforcement, Apprehensions, and Investigations (EAI) Agent, as the Warden's designee, within one business day of receipt of the written request.
 3. An EAI Agent must prepare the Cease Communications Order (Attachment B) upon receipt and arrange for service to the resident.
- C. Service upon the resident must be completed by Unit Team or other designated staff within two business days of issuance of the order.
1. The resident must not be informed of the exact contents of the request, only that a request for a Cease Communications order has been received.
 - a. Victim contact information provided on Attachment A is considered confidential and must not be shared with the resident.
 2. A copy of the final signed Cease Communications order must be emailed, faxed, or delivered to the Facility Victim Services Liaison within three business days of the request being signed.
 3. The order must still be considered valid even if the resident refuses to sign the order.
 4. Upon request, a copy of the Cease Communications order must be sent to the requestor of the order by the Facility Victim Services Liaison.
 5. Any communication initiated by the resident to the requestor between the time the Cease Communications order was requested and when the order was served on the resident may not be subject to disciplinary action.
 6. KDOC staff designated by the Secretary are responsible for imaging the final Cease Communications order and for entering it into the Central Monitoring database in accordance with IMPP 12-125D - Central Monitoring of Residents.
- D. Upon issuance of the Cease Communications order, facility EAI staff must cross reference any contact information provided by the victim on Attachment A with the resident's phone, mail, and email lists to ensure that the victim's provided contact information has been blocked from all resident communication systems to prevent the resident from attempting contact.
1. Facility EAI staff must not cross-reference solely by victim name.

2. Phone numbers, email, and mail addresses must also be checked against victims' provided information.

II. Cease Communications orders regarding minors

- A. In the instance of unwanted communications to a minor, the objection may be filed with the Facility Victim Services Liaison by the parent or guardian of the minor.
- B. A Cease Communications order for a minor must remain in place after the individual is no longer a minor, unless the individual requests removal of the order in accordance with Section V.
- C. The resident may not be prohibited from writing to the resident's natural or adoptive child, unless:
 1. The child was the victim of the crime for which the resident is incarcerated, or
 2. The person having legal custody of the child files a written objection with Victim Services or,
 3. The resident has not obtained a court order permitting this written communication with the child.
 - a. In the event a court order is obtained granting visiting or communication privileges with a resident's minor natural or adoptive child, the objection of a custodial parent shall not block communication between the resident and child.

III. Other Cease Communications Orders

- A. If the need for a Cease Communications order arises from an issue other than an individual's request for the order, these orders may be processed through the Enforcement, Apprehensions, and Investigations Unit (EAI) and do not have to be processed through the Office of Victim Services.
 1. If such an order does involve a crime victim or potential crime victim, the EAI office must consult with the Facility Victim Services Liaison for possible victim assistance.

IV. Response to Violations of the Cease Communications order

- A. When a requestor reports a violation of the Cease Communications order, EAI must be responsible for investigating the violation. Possible violations include but are not limited to:
 1. K.A.R. 44-12-211 Telephones or other communication devices (Class I offense)
 2. K.A.R. 44-12-601 Mail (Class II offense)
 3. K.A.R. 44-12-306 Threatening or intimidating any person (Class I violation)
 4. K.A.R. 44-12-304 Disobeying orders (Class I offense)
- B. If a violation is reported, a resident is to immediately be placed on readable mail and have his/her phone calls and/or emails monitored, as determined appropriate by the EAI Agent Supervisor.
 1. This status must remain in place until the EAI Special Agent Supervisor determines it should be lifted, in consultation with the Facility Victim Services Liaison as appropriate.
- C. If the communication is determined to be in violation of criminal statute (criminal threat, violation of a Protection from Abuse order, etc.), documentation of the violation may be forwarded to the local County Attorney for possible prosecution.

V. Removal of a Cease Communications order

- A. In order for a Cease Communications order imposed at the request of a victim or other member of the public to be removed, the individual making the request must fill out the Request for Removal of Cease Communications Order (Attachment C) and return the completed form to the Facility Victim Services Liaison.
 - 1. The Request for Removal form must be notarized.
- B. The EAI office at the facility where the resident is currently housed must be responsible for issuing the Removal of Cease Communications Order (Attachment D).
 - 1. KDOC staff designated by the Secretary must indicate in Central Monitoring that the order has been removed.

VI. This IMPP must serve as final policy in all departmental facilities, and no General Orders shall be developed or implemented on this subject.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff, residents, and offenders and those entities that are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees, residents, or offenders, or an independent duty owed by the Department of Corrections to employees, residents, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS

None.

REFERENCES

K.A.R. 44-12-211; 44-12-304; 44-12-306; 44-12-601
IMPP 12-125D

HISTORY

03-14-23 Original

ATTACHMENTS

Attachments	Title of Attachments	Page Total
A	Request for a Cease Communications Order	1 page
B	Cease Communications Order	1 page
C	Request for Removal of Cease Communications Order	1 page
D	Removal of Cease Communication Order	1 page

Request for Cease Communications Order (Adult)

I, _____, hereby object to any further contact or attempts at contact from
(Requestor)

_____. I request that a Cease Communications order be issued to said resident.
(Resident Name and Number)

Signature of Requestor

Date

Request for Cease Communications Order (Minor/Power of Attorney)

I, _____, hereby object to any further contact or attempts at contact from
(Requestor)

_____ with _____
(Resident Name and Number) (Name for the Cease Communications order)

By signing below, as the Requestor, I am verifying that I am this individual's legal custodian and/or have power of attorney for this individual. I understand that in order for this Cease Communications to be issued for a minor, this resident cannot be prohibited from writing to his/her natural or adoptive child, unless the child was the victim of the crime for which the resident is incarcerated, and the resident has not obtained a court order permitting this written communication with the child.

Signature of Requestor

Date

To be filled out by the requestor:

All contact information provided on this form is considered confidential and not to be shared with a resident.

The following email addresses should be blocked from the electronic resident messaging/email system to prevent the resident from attempting contact:

The following phone numbers should be blocked from the resident phone system to prevent the resident from attempting contact:

The following street address should be blocked to prevent the resident from attempting contact:

CEASE COMMUNICATIONS ORDER

Date:

Resident Name:

Resident Number:

Facility:

You are hereby duly informed that you are not to contact, attempt to contact, communicate with or attempt to communicate with:

(Name of person with whom communication is prohibited)

under any circumstances, either by mail, phone, email and/or through a third party (including attempts at three way calling or passing of messages), effective as of this date.

If the aforementioned person makes contact with you, this does not void this order. Any contact made by this person should be reported to Unit Team, and no response should be made unless this order is removed in accordance with this IMPP.

If you are found in violation of this order, disciplinary action and/or criminal prosecution may occur. Any and all communication is to stop immediately. Refusal to sign this order in no way excuses you from violating the order because you have been informed of its content and consequences. This order applies at any KDOC correctional facility and any violation of this order will be disciplined regardless of your facility location at the time of the violation.

Issuing the order:

(Signature of EAI staff issuing the order)

(Printed name and title)

I, _____, acknowledge the receipt of this order on _____
(Resident name and #) (Date)

(Resident's Signature)

(Witness/Staff Signature)

Request for Removal of Cease Communications Order

I, _____, hereby request that the Cease Communications
(Requestor)

order issued to:

_____ at my request, be removed.
(Resident Name and Number)

Signature Date

Subscribed and sworn to before me this _____ day of _____, 20____,

Notary Public Signature

My Commission Expires

REMOVAL OF CEASE COMMUNICATIONS ORDER

Date:

Name:

Resident Number:

Facility:

You are hereby duly informed that the Cease Communications Order issued on _____ directing you to
cease contact or attempted contact with _____ has been removed effective this
date.

Issuing the removal:

(Signature of EAI staff)

(Printed name and title)

I, _____, acknowledge the receipt of this
(Resident name and #)

Removal of Cease Communications Order on _____.
(Date)

(Resident's Signature)

(Witness/Staff Signature)