POLICY

In accordance with the provisions of this IMPP and IMPPs 08-101D and 19-101D, media representatives are to be provided access to all correctional facilities during emergency and non-emergency situations consistent with the restrictions required by each facility's need for maintaining the safety of staff and the media representatives, the order and security of the facility, and the residents’ right to privacy.

Each Warden or Superintendent is responsible to identify the areas in the facility that are accessible to media representatives during both emergency and non-emergency conditions.

Access by the public is to be in accordance with procedures promulgated by each facility warden or superintendent. Such access may provide for educational visits or tours, escorted by designated staff, at times which are convenient to and consistent with the efficient operation of the facility and which ensure the safety and security of the staff, residents, and the general public.

DEFINITIONS

Executive Director of Public Affairs: The Central Office designee responsible for the overall administration of the Department's public information program.

Public Information Officer: An individual assigned the responsibility to coordinate a public information program of Central Office or a facility.

Face-to-face interview: An interview of a resident by news media, which requires the presence of the media interviewer within the correctional facility or the resident in a media studio or other off-site location.

Media Representative: Current employee acting in the interest of a Kansas-based news publication, accredited news services, licensed radio and television broadcast station(s) or network(s), and government franchised community cable television systems that originate scheduled news programming available to the general public. This includes newspapers and magazines, published at least weekly or monthly and containing news and feature articles appealing to a broad spectrum of public interest. This definition excludes employees, representatives, or any individual associated with broadcast programs syndicated by independent producers, or television stations or networks for the primary purpose of advertisement, entertainment, and syndicated television broadcast talk shows.

Offender: A person under post-incarceration supervision with the Secretary of Corrections.

Resident: A person who is in the legal custody of the Secretary of Corrections housed in a correctional facility.

PROCEDURES
I. Requests for Media Access to Correctional Facilities

A. All decisions concerning media requests for access to correctional facilities are to be made by the warden or superintendent.

B. Requests for media access to correctional facilities are to ordinarily be made at least 48 hours in advance.

1. The warden or superintendent may waive the 48-hour requirement if good cause is shown, and facility operations must not be unduly disrupted or security compromised.

C. Requests for media access to correctional facilities are not to be made more than 60 days in advance.

D. Requests initiated by the media are to be in writing, using Media Request for Access to Correctional Facility Form (Attachment A), or they may be made over the telephone. Those making telephone requests are to complete Attachment A upon arrival at the facility.

1. The Kansas Department of Corrections does not grant interviews with specific residents, except for those rare circumstances where residents are designated by the Department to participate in news stories about topics determined appropriate, members of the media are not ordinarily to be approved for interviews with specific residents. Rather, media members may request an interview with a resident, or residents, on a specific topic, and the staff of the affected Departmental facility are to endeavor to provide residents appropriate for interviews on such topics. Nevertheless, media members may contact a specific resident in the following manner:

   a. The media member may write a letter to the resident, sending it through the standard mail process;

   b. The letter must:

      (i) explain the reporter’s/writer’s identity;

      (ii) provide a list of questions the reporter/writer would like the resident to answer;

      (iii) ask for a response at the resident’s earliest opportunity; and,

      (iv) provide a telephone number that may be added to the resident’s approved calling list.

   c. Residents are to have the option of responding to the written request. If the resident chooses to add the media member to his/her approved calling list, the change must be made per provisions of IMPP 10-111 or other applicable policy.

      (i) Written communication between residents and the media or telephone communication initiated by residents are reasonable alternatives for face-to-face access to the news media and is not to require the warden’s or superintendent’s review or the execution of a Consent and Waiver for Media Access/Interview Form (Attachment B).

      (ii) Residents are not to be provided access to facility telephones to accommodate resident/media contacts.

II. Notification Requirements

A. When a media request for access to a facility for purposes other than a face-to-face interview is received, the warden or superintendent is to consult with the Executive Director of Public Affairs...
prior to the time that request is acted upon. If the warden determines that such consultation is not necessary, the Departmental Public Information Officer is to be notified, in writing or by telephone, as soon as is reasonably possible.

III. Decision Making Criteria - Media Access

A. The following criteria are to be considered in making a decision to allow media access to areas of a correctional facility.

1. Whether such access would create a life-threatening situation to residents or staff or the media representative, or constitute an invasion of privacy to residents;
2. Whether such access would aggravate a crisis or already volatile situation;
3. Whether such access would or likely could cause a disruption of the orderly operation of the facility or the Department;
4. Whether staff are available to brief and escort media representatives; and
5. Whether or not the residents who are being reviewed for media clearance have known victims.
   a. The mere presence of known victims does not exclude media access; however, the Office of Victim Services is to be consulted in conjunction with the Executive Director of Public Affairs.

B. All media access to correctional facilities is to be conducted consistent with security procedures established by each facility.

IV. Interviews, Photographs and Release of Information

A. Department personnel are not to authorize media personnel to interview or photograph a resident within a Correctional Facility unless the resident has first executed a Consent and Waiver for Media Access/Interview Form, Attachment B.

1. A copy of the completed/signed form is maintained in the facility resident file.

B. Department personnel are not to authorize media personnel to interview a resident in any setting unless the resident has first executed a Consent and Waiver Form, Attachment B.

1. Media representatives may use the mail system to request resident cooperation for interview purposes in lieu of face-to-face interviews.
2. Written and/or telephone communication with the media may be initiated by residents with very limited staff involvement.
3. Facility telephones must not be made available to residents for media interviews.
4. Direct access to individual residents by media representatives must be reviewed on a case-by-case basis.
5. Except as necessary during an emergency situation, resident-initiated correspondence and telephone communication with the media is not to be obstructed.

C. Execution of Consent and Waiver form is not necessary in order for media personnel to photograph a resident who is in the public domain.

1. Media personnel may be kept at the same distance as members of the general public in order to maintain security and control over the resident.
D. The dissemination of non-criminal history information and the RDU report by staff is to be in accordance with the provisions of IMPP 05-101D.

V. Media Access to Offenders on Community Based Supervision

A. Media access to adult offenders on post-incarceration supervision is not to be restricted or controlled by Departmental policy or procedures, but media access to parole offices/community supervision agencies requires the prior approval of the parole director or designee.

1. Requests for media contact with offenders on post release supervision are to be sent to the Central Office Public Information Officer who is to coordinate with the Parole Director.

VI. Decision Making Criteria - Public Access

A. Each Warden or Superintendent is to develop general orders to facilitate public access to their respective facilities.

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

IMPP 05-101D, 08-101D, 19-101D

HISTORY

04-27-16 Original
05-13-22 Revision 1

ATTACHMENTS

<table>
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<tr>
<th>Attachment</th>
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<tr>
<td>A</td>
<td>Media Request for Access to Correctional Facility/Photo or Interview and Waiver</td>
<td>2 page(s)</td>
</tr>
<tr>
<td>B</td>
<td>Resident Consent and Waiver for Media Access/Interview</td>
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VOID AFTER 60 DAYS FROM DATE OF REQUEST

KANSAS DEPARTMENT OF CORRECTIONS

MEDIA REQUEST FOR ACCESS TO CORRECTIONAL FACILITY/PHOTO OR INTERVIEW AND WAIVER

REQUEST TIME/DATE: ____________________________

I, ____________________________, representing ____________________________, hereby request access to the ____________________________, and specifically ____________________________ at ____________________________ on ____________________________ day of ____________________________, 20____

I seek to [ ] interview (and) [ ] photograph (Check appropriate box) the following person(s) or places ____________________________. 

I understand and assume the risk of entering a correctional facility, and hereby waive any right or claim against the State of Kansas, the Kansas Department of Corrections, and its officers, agents, and employees for damage to me or to the equipment I carry onto the premises.

I also understand that the policy of the Department of Corrections is that a resident may not be interviewed or photographed (including videotaped) unless the has executed a written consent to that action and a waiver of liability. I agree to be bound by that policy and to obtain such written consent prior to conducting such interviews or taking any photographs of a resident while the resident is within a correctional facility.

On behalf of my company and myself, I agree to hold the State of Kansas, Department of Corrections, this institution/facility/office, and their officers, employees, agents and successors in office harmless and do release them from any and all liability regarding or resulting from taking or publication of any interview and/or photograph(s), including any interviews photographs taken without the resident’s consent, contrary to the policy of the Department of Corrections.

Signature of Media Representative ____________________________ Witness ____________________________ Time/Date ____________________________

OFFICIAL USE ONLY

PART A
The institution/facility person receiving the request was ____________________________

Action taken by Superintendent/Warden: ____________________________
Superintendent’s/Warden’s Signature: ____________________________

Departmental P.I.O. notified: ____________________________

by ____________________________

Signature of Officer ____________________________

PART B
Media representative ____________________________ arrived at ____________________________ , 20____

Media representative departed the institution/facility at ____________________________

Signature of Officer ____________________________ Comments: ____________________________
INSTRUCTIONS FOR INFORMATION TO BE FILLED IN BLANK SPACES

Request may be made by submitting this form or by phone. If by phone, the officer is to fill out and the media representative is to sign upon arrival.

1. Name of correctional office, institution or facility where form is submitted.
2. Name of person requesting access.
3. Name of media firm or company.
4. Name of correctional institution or facility being accessed.
5. Name of sections or persons to whom access will be made.
6. Time of media entry desired.
7. Date of media entry desired.
8. Persons or places to be photographed or interviewed.
9. Person receiving the request.
10. Action taken by warden/superintendent.
10a. Signature of warden/superintendent.
11. Date and time Departmental PIO (Public Information Officer) notified.
12. Person notifying Departmental PIO.
13. Name of media representative.
14. Date and time of arrival.
15. Date and time of departure.
KANSAS DEPARTMENT OF CORRECTIONS

RESIDENT CONSENT AND WAIVER FOR MEDIA ACCESS/INTERVIEW

I, _______________________________________________________, understand that personnel of the Kansas Department of Corrections will not authorize media personnel to interview or photograph me while I am within a correctional facility unless I first give written consent to such action and execute a release of liability to the Department of Corrections and its employees. I further understand that if I am in a public setting, Department personnel will not authorize media interviews with me unless I first execute a consent and a release of liability form.

I hereby state that I have read and understand the above statement and do agree, consent and give permission to be (check appropriate box):

[ ] INTERVIEWED

[ ] PHOTOGRAPHED/VIDEOTAPED

by: ____________________________________________________________________.

My decision to permit this interview and/or photograph is made voluntarily, of my own free will, and is not the result of threats, duress, force or coercion on the part of officials, employees, or agents of the correctional agency.

I agree to hold the State of Kansas, Department of Corrections, __________________________________________, their officials, employees, agents and their successors in office harmless and release them from any and all liability regarding or resulting from publication of this interview and/or the taking or publication of photographs.

I understand that I may revoke this consent at any time except to the extent that action has been taken in reliance on it, and that in any event the consent expires automatically without my express revocation upon the occurrence of the following time, date, circumstances, event or condition: _________________________________.

DATE _______________________________________________________

NAME OF RESIDENT (Signed and Printed)

DATE _______________________________________________________

NAME OF LEGAL GUARDIAN (Signed and Printed) (Applicable to Youth Under 18)

WITNESS _______________________________________________________

SIGNATURE ____________________________________________________

Register No. ___________________________________________________

WITNESS ____________________________________________________________________

***********************************************************************

INSTRUCTIONS FOR INFORMATION TO BE FILLED IN BLANK SPACES

1. Name of correctional office, institution or facility.
2. Printed name and number of resident.
3. Name of media company, type of media, and name(s) of representative(s) of the media.
4. Name of correctional office, institution or facility.
5. Time period elapsed, date, circumstances, event or condition designated by the resident as being the point at which this consent and waiver ends.

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