I. **AUTHORITY:** TCA 4-3-603; TCA 4-3-606.

II. **PURPOSE:** To establish the policy and procedures for the operation and use of a Kiosk system and services.

III. **APPLICATION:** All Tennessee Department of Correction (TDOC) staff (excluding Community Supervision staff), contract staff, volunteers, and inmates.

IV. **DEFINITIONS:**

A. **Approved Kiosk List (AKL):** A list of persons with whom the inmate may have contact via the kiosk system through email and video visitation. Persons accessing video visitation must be on the inmate's approved visitation list as per Policy #507.01.

B. **E-Mail:** An electronic transfer of messages from a sending party to a receiving party via an intermediate telecommunication system on a device approved by TDOC.

C. **Inmate E-mail Stamp:** The amount of money required to send an inmate e-mail.

D. **Kiosk:** A security-grade unit with a computer and other components that operates on an independent network to provide inmate e-mail, approved services, programs, and content.

E. **Kiosk Account:** An account established by the inmate and AKL users in order to access kiosk services.

F. **Kiosk Account Passwords:** All passwords and Personal Identification Numbers (PIN) that are associated with inmate kiosk accounts or media players.

G. **Kiosk Services:** Services available through the kiosk provider to include email, video visitation, and downloadable tablet content (i.e. program/educational materials, music and books).

H. **Kiosk Service Provider:** The company with whom the Department has contracted to provide kiosk services.

I. **Kiosk User Account Liaison:** A facility staff member designated to maintain the inmate’s user account access to his/her kiosk services.

J. **Tablet:** An approved electronic device with a variety of applications that can be used in conjunction with kiosks.

K. **Restrictive Housing:** The purposeful separation of inmates from the general inmate population in confinement or housing where measures are taken to provide maximum security and/or to control their circumstances or circumscribe their freedom. This general...
status is for either punitive or administrative reasons that subject the inmate to remain in
his/her cell at least 22 hours a day.

V. POLICY: Where kiosks are utilized, TDOC staff, inmates, and all users on AKL shall follow the
procedures specified in this policy regarding the operation and use of Kiosk services.

VI. PROCEDURES:

A. Uses: Kiosk services are designed to provide inmates with visitation access through video
visitation, enhanced communication with family and friends through email, recreational
activities through downloadable content to include books and music, and
program/educational activities. Purchasable kiosk services are paid for by inmates or family
and friends registered as customers of the kiosk service provider. The Principal/Associate
Warden of Treatment (AWT)/Deputy Superintendent (DS) at applicable prisons shall approve
educational tablet content and notify the Superintendent of Education prior to content being
uploaded.

B. Inmate Kiosk Access

1. Kiosk units shall be located in areas accessible to authorized inmates at times
designated by the facility.

2. The frequency and duration of kiosk use is limited to two 15-minute kiosk sessions per
day, not including video visitation sessions. Scheduling for each unit shall be
determined by the Warden/Superintendent.

3. All parties involved must have an email account established through the kiosk service
provider system. The email list may be restricted for the security of the institution.

4. Kiosk services are a privilege that may be suspended by the Warden/Superintendent
for violation of TDOC policy(ies). Disciplinary action will be issued in accordance
with Policy #502.01.

C. Inmate Kiosk Accounts

1. Inmates may use kiosk services once they have agreed to the program conditions by
activating their user accounts. Inmates who do not wish to participate in kiosk services
cannot create a kiosk account or have any contact with any kiosk unit.

2. Neither the kiosk service provider nor TDOC is responsible for theft, loss, nor cost
related to an inmate lending his/her kiosk accounts password or failing to provide for
its safekeeping. Inmates shall establish personal kiosk account passwords and are
encouraged to change them frequently to guard against theft.

3. Inmates shall only use their own personal kiosk accounts. Inmates shall not loan,
borrow, barter, or steal another inmate’s kiosk account password. Violators will be
subject to disciplinary action as per Policy #502.01.

D. Inmate Kiosk Use
1. There is no expectation of privacy with any type of communication when utilizing kiosk services pertaining to video visitation, email, etc. All use of kiosk services is subject to recording, monitoring, and retention.

2. Inmates shall not use kiosk services to facilitate or conduct activities in violation of federal and state law, or TDOC policy.

3. All inmate questions or concerns regarding kiosk services shall be directed to the kiosk service provider accessible through the kiosk system.

E. Video Visitation

1. Inmate eligibility: All eligible inmates may use video visitation as per the guidelines established in Policies #507.01 and #503.08.

2. Visitors

a. Video visitation shall follow the same guidelines as stated within Policy #507.01.

b. Only persons on an inmate’s approved visitor list can participate in video visits. Visitors on restricted or suspended status shall not be able to participate in video visits.

c. Minors shall be accompanied by a parent, guardian, or other designated authorized person.

d. For new visitors, the Visitor Application, CR-2152, shall be used for applying for video visiting privileges. See Policy #507.01.

e. Visitors are responsible for their own equipment and technology to access the video visitation system. Visitors should contact the kiosk service provider regarding refunds and kiosk issues.

3. Scheduling

a. The assigned visitation staff shall be responsible for monitoring inmate participation in video visitation, scheduling, retrieval of scheduled visits, inmate notification of visit and inmate access in the visitation area. Each facility shall determine the facility’s video visitation schedule based on operational and security considerations such as inmate activity schedules, staffing levels for inmate supervision, and video visitation monitoring.

b. Each inmate in general population can receive no more than two video visits per week.

c. Video visitation is scheduled for 30 minutes during regularly scheduled visitation hours.

d. The inmate is responsible for notifying AKL users of the days and times they
Effective Date: July 1, 2021

Subject: INMATE KIOSK SERVICES

are scheduled for use of video visitation.

4. Video Visitation Attire and Conduct
   a. Inmates and visitors shall dress according to Policy #507.01.
   b. Visitors and the inmate shall be visually identifiable, and the faces cannot be covered or obscured. Religious headgear shall not interfere with the verification of a person’s identity.
   c. Any removal of clothing shall result in immediate termination of the visit and the inmate may be subject to disciplinary action. The Warden/Superintendent shall be notified by the visitation supervisor.

5. Video Visitation Violations and Suspensions
   a. Violation of visitation policy and rules may result in immediate termination of the video visit. Visitation suspension duration shall be per Policies #502.02 and #507.01. The terminating staff shall issue an incident report detailing the violation and the action taken. Any violation of video visitations shall also apply to contact and non-contact visitation.
   b. If the inmate is suspended from video visitation privileges, the Warden/Superintendent/designee shall notify the kiosk service provider within one business day.

6. Video Visitation Monitoring
   a. Video visitation shall be live-monitored and randomly reviewed from recorded files by visitation staff and other staff members as designated by the Warden/Superintendent.
   b. Video visits shall not be audio or video recorded or archived in any form by anyone except for the vendor’s recording and archiving system.
   c. Visitation officers shall monitor in-progress video visits to ensure all video visitations are in compliance with TDOC policies and procedures as outlined within this policy.
   d. Every effort shall be made by the visitation supervisor to notify visitors utilizing video visitation in a timely fashion if visitation is cancelled, but there may be instances where the notification could be delayed.

F. Downloadable content

1. A contract between the department and the kiosk service provider establishes what types of downloadable content are available to inmates. Content is subject to TDOC approval. Content that negatively impacts the safe, secure, and orderly operation of the facility or compromises public safety shall be disapproved.

2. Inmates in maximum security restrictive housing shall only have access to approved
program and educational materials.

G. Tablets

1. Tablets shall be purchased from the kiosk provider by the inmate or those authorized to place money in an inmate media account. Upon purchase, the tablet is shipped to the inmate’s facility and delivered in accordance with facility property procedures.

2. Tablets and chargers are considered electronic items governed by Policy #504.01.

3. The tablet and related content are subject to the same regulations affecting all inmate belongings, including search, confiscation and disposition. Inmates shall provide their current tablet password when directed by staff for purposes of an investigation or authorized search. Tablets will not be allowed in prisons that do not provide kiosk services.

4. Tablets shall be used in the housing unit and program areas only

H. Inmate E-mail

1. Inmates may only send and receive electronic messages to and from their AKLs and shall adhere to Policy #507.02. All users of inmate e-mail shall adhere to all departmental policies regarding mail, contraband, and inmate communication.

2. Inmate e-mail shall not be used for any purpose that would jeopardize the safe, secure and orderly operation of the facility, nor compromise public safety. Violations may result in formal disciplinary proceedings, up to and including criminal charges, as well as suspension of kiosk services.

3. Each inmate e-mail costs one inmate e-mail stamp. Inmates may purchase e-mail stamps at the kiosk using funds in their media account. AKL users purchase inmate e-mail stamps through the kiosk service provider. AKL users can purchase e-mail stamps for inmates.

4. Inmate e-mail screening and monitoring shall be governed by Policy #507.02

   a. All inmate e-mail is subject to screening for contraband content by the Warden/Superintendent’s designee. Inmate e-mail can also be monitored by the Office of Investigation and Conduct (OIC).

   b. Inmate e-mail that violates departmental policy shall be rejected by the authorized staff and shall not be delivered. The sender (either the inmate or an AKL user) shall be electronically notified of an inmate e-mail’s rejection and the reason.

5. Inmates can block inmate e-mail senders from the kiosk. Neither facility staff nor the vendor shall block senders at the inmate’s request.

I. Funding the Kiosk Media Account

1. Inmates may add money to their kiosk media accounts directly from their trust fund.
Media account balances and purchase records are maintained by the kiosk service provider.

2. Any money deposited in the kiosk media account can only be spent on kiosk services and cannot be transferred to another account. Inmates shall contact the kiosk service provider for a refund.

3. AKL users may add money to an inmate’s media account through the kiosk service provider’s website. AKL users shall address any media account concerns directly to the kiosk service provider including any refunds.

4. Inmates shall use the kiosk to check media account balances and receive notice of media account deposits. Any questions concerning media account balances and transactions shall be directed to the kiosk service provider.

J. Communication of Kiosk-related Information

1. Inmates shall be provided information about kiosk services during facility orientation and inmate handbooks where applicable.

2. Authorized times and rules for kiosk use shall be posted in each unit where kiosks are located. The facility visitation lobbies shall contain information regarding kiosk services.

K. Staff Use of the Inmate Kiosk Service Web-hosted Application

1. The Warden/Superintendent shall designate a staff member to function as the kiosk user account liaison for the facility.

2. Only authorized staff may access the kiosk service provider’s web-hosted applications. Staff who have been approved to use the kiosk service applications shall be given access necessary for them to perform their job responsibilities.

3. To be assigned a kiosk application user ID, a staff member or the staff member’s supervisor shall complete a Kiosk Web User Access Request, CR-4051. The request shall be reviewed and approved by the staff member’s supervisor and Warden/Superintendent. The completed form is then sent to the facility kiosk user account liaison.

4. Supervisors are responsible for ensuring that user rights for the kiosk service provider’s web-hosted applications are updated appropriately depending on changes in a staff member’s duties or employment status.

5. Designated staff shall perform the following duties:

   a. Communicates with the kiosk service provider regarding staff user account activations/deactivations and application user privileges.

   b. Ensures user access request have the appropriate approvals before forwarding to the kiosk service provider.
L. **Kiosk System Maintenance:** The kiosk service provider is solely responsible for maintaining and repairing the kiosks and any associated infrastructure.

M. **Internal controls**

1. All records concerning inmate kiosk service purchases are retained by the kiosk service provider for a time period that is in accordance with the service provider’s retention policy.

2. Rejected inmate e-mail is retained by the kiosk service provider indefinitely. It will also be retained by the institution in accordance with Policy #507.02.

3. Rejected e-mail that becomes part of an investigation will be retained as part of the investigative file for 10 years in accordance with RDA 11197.

4. Documentation of an inmate’s kiosk suspension(s) that arises out of the formal sanctions process is retained in the inmate’s unit file, and subsequently the software application, in accordance with Policy #512.01.

4. Documentation relating to an inmate’s appeal of kiosk suspensions is maintained in written or electronic form by the kiosk suspension appeal authority for a minimum of five years.

5. Documentation relating to staff user rights for the kiosk service provider’s web-hosted applications is maintained by the kiosk user account liaison for the duration of the staff’s employment.

VII. **ACA STANDARDS:** 5-ACI-7D-01, 5-ACI-7D-04, 5-ACI-7D-05, 5-ACI-7D-08, 5-ACI-7D-14, 2-CO-5D-01.

VIII. **EXPIRATION DATE:** July 1, 2024
**READ CAREFULLY:** All questions must be answered. Any omissions or falsifications, including relationship and prior convictions, will be considered sufficient reason to deny approval or to withdraw approval of the visitor. Please attach recent photograph in lower left-hand corner or application will not be processed. Return this form to the warden of the above noted institution. This application will become part of the inmate’s institutional record under the provision of T.C.A. 4-3-606 and 4-6-140. It will be considered a public record available for review by the general public, subject to the procedures established in the above cited statutes. All visitor applicants are subject to a NCIC background check. Applications must be updated every two years (24 months).

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<th>Inmate Name</th>
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Last Name: ___________________________  First Name: ___________________________  Middle Name: ___________________________

Address: ___________________________  City: ___________________________  State & Zip: ___________________________

Male or Female (circle one) __________________________________________

Marital Status (circle one) __________________________________________

Married  Single  Divorced  Widowed

Telephone Number: ___________________________

Height: _______  Weight: _______  Date of Birth: _______

Driver's License #: ___________________________  State of Issue: ___________________________

Race (circle one)  Hair Color (circle one)  Eye Color (circle one)  Complexion (circle one)

A (Asian or Pacific Islander)  BLN (Blonde/Strawberry)  BLK (Black)  ALB (Albino)
B (Black)  GRY (Gray/Partially Gray)  BRO (Brown)  BLK (Black)
H (Hispanic)  RED (Red/Auburn)  GRN (Green)  HAZ (Hazel)
I (American Indian/Alaskan Native)  SDY (Sandy)  WHI (White)  BLY (Blue)
W (White)  BAL (Bald)  GRY (Gray)  BRO (Brown)

Relationship to Inmate (circle one)

AP (Adoptive Parent)  DA (Daughter)  FR (Friend)  HS (Half Sister)  NI (Niece)  SM (Step Mother)  WI (Wife)
AU (Aunt)  DI (Daughter-in-Law)  GD (Granddaughter)  HU (Husband)  SB (Step Brother)  SN (Son)
BL (Brother-in-Law)  FA (Father)  GF (Grandfather)  LG (Legal Guardian)  SD (Step Daughter)  SO (Son-in-Law)
BR (Brother)  FC (Foster Child)  GM (Grandmother)  ML (Mother-in-Law)  SF (Step Father)  SR (Step Sister)
CL (Clergy)  FL (Father-in-Law)  GS (Grandson)  MO (Mother)  SI (Sister)  SS (Step Son)
CO (Cousin)  FP (Foster Parent)  HB (Half Brother)  NE (Nephew)  SL (Sister-in-Law)  UN (Uncle)

Are you currently on the visiting list of an inmate confined in the Tennessee Department of Correction?  _____ Yes  _____ No

If yes, what is his/her name: ___________________________  TDOC ID: ___________________________  Relationship: ___________________________

Are you now, or have you ever been an employee or contract employee of the TDOC?  _____ Yes  _____ No.  If yes, when? ___________________________

Have you ever been suspended from visitation?  _____ Yes  _____ No.  If yes, list reason below: ___________________________

Have you ever been convicted of a felony?  _____ Yes  _____ No.  If yes, please list offense(s), date, location disposition/sentence and TDOC ID if applicable: ___________________________

If you have a prosthetic device, pacemaker or defibrillator, you may be required to submit a copy of a physician statement.

**Attach a recent photo of yourself only here. Photo must be of quality that can be used for identification purposes. No black & white photographs or pictures copied from copy machine.**

**YOUR SIGNATURE: ___________________________ DATE: ___________________________**

If you are under 18 years of age, your parent or legal guardian’s approval must be indicated by notarized signature. If signed by legal guardian, a copy of certified court order granting guardianship must be attached.

Visitors’ handbooks are available upon receipt of a self-addressed stamped envelope with this application.

_____ Approved  _____ Disapproved  Warden/ Superintendent/Designee

_____ Approved  _____ Disapproved  Warden/ Superintendent Signature

(required only if disapproved by designee)
PARENTAL CONSENT/RELEASE FOR MINOR’S VISITATION (For children under 18 years of age, please fill out completely, have notarized by a notary public, lawyer, or local postal official)

Inmate Name ___________________________  TDOC ID ___________________________  Institution ___________________________

This form must be completed by the custodial parent/legal guardian and properly notarized for minor children (under 18 years of age) to visit an inmate when the custodial parent/legal guardian is unable, or unwilling to visit and accompany the minor child. The child may visit only with the authorized person named below, who is over 18 years of age and who must also be on the approved visitation list of the inmate they wish to visit. Permission is granted for the child to be searched.

Minor’s Name ___________________________  Date of Birth ___________________________  Relationship of Child to Inmate ___________________________

Approved Escort/Guardian ___________________________  Guardian’s Date of Birth ___________________________

Signature of Custodial Parent/Legal Guardian ___________________________  Date ___________________________

STATEMENT OF NOTARY PUBLIC

Subscribed to, and sworn before me on this ___________________________ day of ___________________________ 20 __________.

My commission expires on ___________________________.

Notary Public

xc: Visitation File
   Inmate
# TENNESSEE DEPARTMENT OF CORRECTION

**KIOSK WEB USER ACCESS REQUEST FORM**

## PART I. REQUESTING OFFICIAL

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## PART II. USER / EMPLOYEE INFORMATION

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