

JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



STATE OF HAWAII | KA MOKU'ĀINA 'O HAWAII
**DEPARTMENT OF CORRECTIONS
AND REHABILITATION**
*Ka 'Oihana Ho'omalu Kalaima
a Ho'oponopono Ola*
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No. _____

TESTIMONY ON SENATE BILL 104, SENATE DRAFT 2
RELATING TO CORRECTIONS.

by
Tommy Johnson

House Committee on Public Safety
Representative Della Au Belatti, Chair
Representative Kim Coco Iwamoto, Vice Chair

Wednesday, March 12, 2025, 10:00 a.m.
State Capitol, Conference Room 411 & via Videoconference

Chair Belatti, Vice Chair Iwamoto, and Members of the Committee:

The Department of Corrections and Rehabilitation (DCR) **strongly opposes** Senate Bill (SB) 104, Senate Draft (SD) 1, which seeks to restrict the use of solitary confinement in state-operated and state-contracted correctional facilities, with certain specific exceptions. This measure also requires DCR to use appropriate alternatives to "solitary confinement" for vulnerable inmates as defined in SB 104, SD 2, and requires a progress report on full compliance with the Act to the 2026 Legislature.

DCR strongly opposes this measure as it is unnecessary and, in many ways, duplicative in several areas of DCR's attached correctional policy (COR.11.01) Administrative Segregation and Disciplinary Segregation. DCR's policies and procedures are periodically reviewed and updated to ensure continued alignment with the guidelines of the National Institute of Corrections (NIC), and the American Correctional Association (ACA). As written, SB 104, SD 1 does not follow the guidelines of the NIC nor the ACA. The attached DCR policy was recently updated in 2024, as part of the periodic review and update procedures, and is posted on our website for anyone to access and review.

The DCR notes, that the term “solitary confinement” is no longer used; instead, there are now several levels of confinement used nationwide, that are more specifically described to ensure both the safety and well-being of inmates, and to address unacceptable, disruptive, and violent behaviors displayed by some inmates. As written, SB 104, SD 1, would restrict DCR’s ability to ensure the health and safety of inmates; placing unneeded barriers that would prevent DCR from acting promptly to address volatile situations that routinely occur in correctional facilities across the nation.

It should be noted; the Hawai’i Correctional Systems Oversight Commission (HCSOC) has had access to all DCR’s policies for some time, including the attached policy, and has never previously raised concerns. It is also noted that SB 104, the SD 2 version, and Standing Committee Report No. 87 and 984 are incorrect. In that, DCR’s attached policy is in line with the national guidelines of the NIC and ACA as stated above, and is periodically reviewed, with the most recent review and updates concluded in 2024. As written, this measure attempts to resolve a problem that does not exist.

Recently, there have been unprovoked attacks by inmates on correctional staff resulting in serious injuries. One officer suffered a serious skull fracture, another was seriously injured because of being pushed down a flight of stairs as he rushed to intervene and assist an inmate being assaulted, and yet another officer sustained facial injuries after being punched in the face by an inmate. Several nurses have been injured by inmates for no apparent reason, while attempting to provide them with treatment. If enacted, the requirements of SB 104, SD 2 would hinder, or delay DCR’s staff intervention, which would increase the levels of danger and disruption to staff, other inmates, and the good governance of facility operations.

DCR notes, that age, developmental disability, and mental illness have very little to do with the State’s requirement for the protection of others from harm, assault, and even loss of life. DCR has the responsibility to assure the safety and well-being of all

offenders. Separating and monitoring offenders exhibiting inappropriate behaviors is necessary for the greater good and the protection of these offenders.

In attempting to cover most scenarios, the measure's requirements tend toward generalities, which run counter to the updated national standards which are moving towards more specificity for administrative and disciplinary segregation. DCR's current policies and procedures regarding inmate classification, housing, and internal disciplinary processes, including the inmate's ability to avail themselves of access to legal counsel, and the complaint and grievance processes, all help to ensure that inmates are not mistreated, and are housed in locations consistent with their level of custody and security requirements. This fosters participation in the appropriate programs of need, and the overall safety, of an institution.

Thank you for the opportunity to provide testimony in **strong opposition** to SB 104, SD 2.

Encl.

	DEPARTMENT OF CORRECTIONS AND REHABILITATION CORRECTION ADMINISTRATION POLICY AND PROCEDURES	EFFECTIVE DATE: January 1, 2024	POLICY NO.: COR.11.01
		SUPERSEDES (Policy No. & Date): COR.11.01 of November 28, 2014	
	SUBJECT: ADMINISTRATIVE SEGREGATION AND DISCIPLINARY SEGREGATION		Page 1 of 13

1.0 PURPOSE

To establish a statewide policy and procedure for the segregation of inmates from the general population based on supervision requirements, offender status, medical and mental health considerations and other conditions of confinement at a Department of Corrections and Rehabilitation (DCR) Correctional Facility.

2.0 SCOPE

This policy shall apply to all Departmental Facilities of the Corrections Division, and it is applicable to all staff, contractors, volunteers, and inmates.

3.0 REFERENCES, DEFINITIONS & FORMS

.1 References:

- a. Hawaii Revised Statutes (HRS), Section 353-A, Director of Corrections and Rehabilitation, Powers and Duties.
- b. Department Directives from Director Ted Sakai dated May 7, 2013, Placement of Inmates in Segregation is hereby superseded by this policy.
- c. Department Policy and Procedure (P&P), COR 13.02, Adjustment Committee Composition.
- d. Department Policy & Procedure, COR 13.03, Adjustment Procedures Governing Serious Misconduct Violations and the Adjustment of Minor Misconduct Violations.
- e. Department Policy & Procedure, COR.10.1A.01, Health Care Section, Access to Care.
- f. Department Policy & Procedure, COR.10.1E.09, Health Care Section Segregated Inmates.

.2 Definitions:

- a. Adjustment Committee Hearing – An administrative due process hearing to determine if there is a preponderance of evidence to find an inmate guilty of a misconduct violation as defined in COR.13.03.

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- b. Administrative Segregation – Inmates may be segregated on a temporary basis from the general inmate population on the order of a watch commander or higher authority, when their continued presence in general population presents an immediate threat to the safety of self or others, jeopardizes the integrity of an investigation of alleged serious misconduct or criminal activity, or endangers institutional security. The terminology “administrative segregation” is not applicable to general population maximum custody or general population protective custody inmates housed in segregation unit.
- c. Disciplinary Segregation – Placement of an inmate in a designated segregation housing unit in a cell separated from the general population, after being found guilty of a misconduct violation and issued a sanction by a formal adjustment committee hearing. Disciplinary segregation includes the loss of certain privileges consistent with DCR policy and as authorized by the Warden or designee.
- d. Program Committee – The Warden or designee shall assign more than one staff member from the following programs/sections: case management, medical/mental health professionals, and/or security staff to conduct this hearing. The Program Committee hearing may be conducted by utilizing video technology.
- e. Segregation – Confinement of an inmate in a cell that is separated from general inmate population.
- f. Serious Misconduct – A greatest (6), high (7), or moderate category (8) misconduct, all of which are considered to pose a serious threat to the safety, security or welfare of the staff, other inmates, the community, or the institution, and subjects the inmate to the imposition of serious penalties such as segregation for longer than four hours.
- g. Serious Misconduct Adjustment – A serious misconduct shall be addressed through the formal adjustment committee hearing process.
- h. Wardens or Designees – The facility administrator or next supervisory level in chain of command at a correctional center or correctional institution (i.e. Deputy Warden or Chief of Security or Correctional Supervisor), who may be authorized temporary assignment into the Warden’s position.

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.3 Forms

- a. Administrative Segregation Form (DCR 8226), Parts A, B, C, D.
- b. Weekly Administrative Segregation Unit Log (DCR 8316).
- c. Administrative Segregation Facility Report for the Institutions Division Administrator.

4.0 POLICY

It is the policy of DCR, Corrections Division, to develop procedures to ensure that an inmate is treated fairly and receives due process, through a multi-disciplinary approach when being assessed and placed in segregation. Placement in segregation is intended to support the rehabilitative process while maintaining security, the orderly running and the good governance of the facility, and as a means to promote an environment of rehabilitation and safety.

5.0 PROCEDURES

.1 ADMINISTRATIVE SEGREGATION

- a. Inmates may be segregated from the general inmate population according to DCR policy by the Watch Commander or higher authority, when the continue presence of the inmate in the general inmate population presents an immediate threat to the safety of self or others, jeopardizes the integrity of an investigation of an alleged serious misconduct or criminal activity or endangers institutional security.
- b. This placement is subject to the review of the Warden or designee within twenty-four (24) hours or as soon as is practicable on the next business day following a weekend or holiday (i.e. If placed on Saturday and Monday is a holiday, then the Warden will review on Tuesday) of the inmate's placement at which time a decision shall be made to continue administrative segregation or to release the inmate back to the general inmate population.
- c. All inmates have the right to seek administrative review of their placement in administrative segregation through the inmate grievance process.

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d. Placement

1. The Watch Commander or higher authority is authorized to place an inmate in administrative segregation, and is required to document that placement as described below.
2. The Warden or designee shall consider whether an inmate's continued presence in the general inmate population presents an immediate threat to the safety of self or others, jeopardizes the integrity of an investigation related to an alleged serious misconduct or criminal activity, or endangers the institutional security as determining factors for placement of an inmate in administrative segregation.
3. The Warden or designee may consider reliable sources of information, including confidential information, to substantiate that the inmate's continued presence in the general inmate population poses a threat to the community, property, self, staff, other inmates, security, or the orderly running and good government of the facility and thereby warrants placement in administrative segregation.

e. Required Documentation

1. The inmate's conduct along with any confidential or other reliable information shall be documented on an Incident Report, DCR 8214 (Attachment A) or in an Inter-Office Memorandum (IOM) to substantiate the facts that warrant administrative segregation.
2. This report must be completed and forwarded to the person who authorizes placement of the inmate in administrative segregation prior to the end of their shift.
3. The Watch Commander or higher authority who authorizes placement shall complete the Administrative Segregation Form, Part A (DCR 8226), which functions as the "written authorization" for placement in administrative segregation and is subject to the Warden's review by the next business day following a weekend or holiday.
4. A copy of "DCR 8226, Part A" shall be provided to the inmate within twenty-four (24) hours of placement in administrative segregation.

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5. The "DCR 8226, Part A" shall include the following information:
 - a) Reason for the inmate's placement in administrative segregation; and
 - b) The approximate length of segregation and/or the date of the next scheduled review.

f. Notification

1. The Watch Commander or higher authority shall immediately notify health care staff of the placement of an inmate in administrative segregation.
2. At the facility without twenty-four (24) hour on site health care, the inmate's placement in administrative segregation shall be reviewed immediately when health care staff next reports for duty. The facility shall ensure the inmate has more frequent observations (15 minute checks or constant observation) until the inmate is reviewed by health care staff and/or mental health staff.
3. The designated health care staff shall assess the inmate's placement in administrative segregation prior to admission into the segregation unit or as indicated above for facilities without twenty-four (24) hour on site health care. The health care staff shall determine whether physical health or mental health issues exist that contraindicate the inmate's placement in administrative segregation. The health care staff shall immediately notify a mental health professional if there are any indications that the inmate has mental health issues.
4. Mental health staff shall conduct a mental health review within twenty-four (24) hours of an inmate's placement in administrative segregation. This review applies to all inmates and is not limited to those inmates with known or suspected mental health issues or inmate who exhibit behaviors that impact their ability to be safely placed in administrative segregation. If an inmate is placed in administrative segregation during a weekend in a facility without seven-day mental health coverage, mental health staff shall conduct a review immediately upon next reporting to duty.
5. If there are compelling security reasons for the continued placement of an inmate in administrative segregation, despite health care

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concerns, the Warden shall be immediately notified by the Watch Commander or higher authority.

The Warden shall review the findings of the Watch Commander and health care staff. Based on these findings, the Warden shall determine the most appropriate placement for the inmate, and notify in writing the Institutions Division Administrator (IDA) of the placement and reasons for the inmate's placement.

g. Review of Inmate's Status In Administrative Segregation

1. The Warden or designee shall review the documentation related to the inmate's placement in administrative segregation within twenty-four (24) hours of placement or as soon as is practicable on the next business day following a weekend or holiday. This is when the Warden or designee shall make the initial decision as to whether the inmate is to be placed on administrative segregation or released back to the general inmate population.
2. The Warden or designee shall conduct a personal interview with the inmate no later than seventy-two (72) hours from the date of the placement in administrative segregation to determine if administrative segregation is still warranted.
3. The Warden or designee shall prepare a written record to document the interview, the decision whether to continue placement, and the justification for the recommended action. A copy of the decision and justification shall be provided to the inmate on DCR 8226, Part B.
4. By the fifteenth (15th) day after an inmate's initial placement in administering segregation, the Facility Program Committee shall hold a due process hearing to assess the need to continue an inmate's placement in administrative segregation. This shall be the inmate's formal due process opportunity to contest his/her placement in administrative placement.
5. The Facility Program Committee shall formulate a case management action plan for the inmate's "progression out" of administrative segregation and include a written record of their decision to confirm the administrative segregation placement or to release the inmate back to the general inmate population. A copy of the decision shall be provided to the inmate on DCR 8226, Part C.

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6. Thirty (30) days after an inmate's initial placement in administrative segregation and every thirty (30) days thereafter, the Warden or designee shall personally interview the inmate, reassess the case management action plan, and make a written record of his/her decision to either confirm the continued administrated segregation housing or to release the inmate back to the general inmate population. A copy of the decision shall be provided to the inmate on DCR 8226, Part D.
7. The Warden shall notify the IDA every thirty (3) days of an inmate's continued placement in administrative segregation and the status of the inmate's compliance with the case management action plan.
8. The IDA shall conduct monthly reviews of all inmates who have been in administrative segregation for thirty (30) days or more. This shall include a review of all documentation relevant to the inmate's placement including, but not limited to: Incident reports or IOMs generated as part of the initial placement; case management action plan; documentation justifying continued placement; grievance appeals; and medical/mental health assessments.
9. The IDA shall consider whether a transfer of the inmate to a facility where he/she may be placed in the general inmate population would be appropriate or if continued placement in administrative segregation is warranted.
10. The IDA shall submit a written report of the results of each thirty (30) day review to the Deputy Director of Corrections (DEP-C).
11. The DEP-C shall consider whether a transfer of the inmate to a facility where he/she may be placed in the general inmate population would be appropriate or if continued placement in administrative segregation is warranted.

.2 DISCIPLINARY SEGREGATION

- a. Inmates may be required to serve a period of disciplinary segregation as a consequence of a guilty finding for a violation of a serious misconduct. Disciplinary segregation includes the loss of certain privileges as dictated by facility policy.

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- b. All inmates have the right to seek administrative review of an adjustment committee's decision of placement in disciplinary segregation through the grievance process.
- c. Placement
 - 1. The Watch Commander or higher authority is authorized to place an inmate in disciplinary segregation based on an adjustment committee hearing and finding of guilt based on a preponderance of the evidence for violating a serious misconduct (COR.13.03).
 - 2. If an adjustment committee issues a sanction of disciplinary segregation exceeding a period of sixty (60) days, he expressed written approval of the IDA is required.
 - 3. Any disciplinary segregation sanction shall consider an inmate's medical and mental health needs, the gravity of the facts, and the severity of the serious misconduct violation.
 - 4. The Warden or his/her designee may modify any adjustment committee's sanction in accordance with COR.13.03.
- d. Required Documentation
 - 1. The Adjustment Committee shall document their findings and disposition on the Notice of Report of Misconduct and Hearing form (DCR 8210A).
 - 2. A copy of the Notice of Report of Misconduct and Hearing form (DCR 8210A) shall be signed by the inmate and a copy shall be provided to the inmate. The inmate's refusal to sign shall be documented.
 - 3. The Notice of Report of Misconduct and Hearing form shall include, but not be limited to the following information:
 - a) A listing of the misconduct violated;
 - b) Findings of the adjustment committee;
 - c) The evidence relied upon;
 - d) The denial of witnesses;
 - e) Listing of any privileges revoked and the justification;
 - f) Length of the disciplinary segregation.

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e. Notification

1. The Watch Commander/Correctional Supervisor or higher authority shall immediately notify health care staff of the placement of an inmate in disciplinary segregation.
2. At any facility without twenty-four (24) hour on site health care, the inmate's placement in disciplinary segregation shall be reviewed immediately when health care next reports for duty. The facility shall ensure that the inmate has more frequent observations (15 minute checks or constant observation), until reviewed by health care staff and/or mental health staff. It should be noted that a facility is able to schedule placement when health care staff is on duty.
3. The designated health care staff shall assess the inmate's placement in disciplinary segregation prior to his/her assignment to the segregation unit. As any facility without twenty-four (24) on site health care to assessment shall occur when health care staff next reports for duty to determine whether physical health or mental health issues exist that contraindicate the inmate's placement in disciplinary segregation. The health care staff must immediately notify a mental health professional if there are any indications that the inmate has mental health issues.
4. Mental health staff shall conduct a mental health review within twenty-four (24) hours of an inmate's placement in disciplinary segregation. This review applies to all inmates, and is not limited to those inmates with known or suspected mental health issues or inmates who exhibit behaviors that impact their ability to be safely placed in disciplinary segregation. If an inmate is placed in disciplinary segregation during a weekend in a facility without seven-day mental health coverage, mental health staff shall conduct a review immediately upon next reporting day.
5. If there are compelling security reasons for the continued placement of an inmate in disciplinary segregation despite health care concerns, the Warden shall be immediately notified by the Watch Commander or higher authority.
6. The Warden shall review the written findings of both the Watch Commander and the health care staff. Based on these findings, the Warden shall determine that most appropriate placement for the

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inmate, and notify in writing the Institutions Division Administrator of the placement and reasons for the inmate's placement. The IDA will discuss the matter or any conflict with the Deputy Director of Corrections, who will make the final decision on the inmate's placement.

f. Review of Inmate's Status In Disciplinary Segregation

1. The Warden shall review the adjustment hearing documentation (DCR 8210A) related to an inmate's placement in disciplinary segregation within twenty-four (24) hours, or on the next official business day if placement was effectuated on a weekend or holiday.
2. The IDA shall be notified in writing prior to day sixty (60) of an inmate's disciplinary segregation to seek authorization for any consecutive sanction.

g. Inmate Monitoring in Administrative Segregation and Disciplinary Segregation

1. A health care professional shall tour each segregation housing unit by observing each inmate at cell front once per day. The health care professional shall communicate with the staff on duty in the segregation unit to identify any inmate with medical or mental health concerns.
2. Each segregation unit shall have a locked inmate medical request collection box located in an area accessible to inmates during out of cell timer (i.e. showers, recreation, phone calls). Only health care staff shall have access to the contents of these boxes. Health care staff shall retrieve the contents of these boxes daily, review and address any inmate request slips located within the box or make a referral to the appropriate health care professional.
3. The health care professional shall review any inmate request slips deposited in the units' medical request collection boxes to ascertain any other health related issues or concerns. Any action taken shall be documented in the inmate's official medical record file. The health care professional's tours shall be documented in the segregation unit logbook.

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4. A mental health professional shall tour each segregation housing unit(s) not less than five (5) times per week. The mental health professional shall communicate with the staff on duty in the segregation unit to identify any inmate with mental health or well-being concerns. Any action taken shall be documented in the inmate's official medical record file. The mental health care professional's tours shall be documented in the segregation unit logbook.
5. The Adult Correctional Office (ACO) in the segregation unit shall personally observe each inmate in segregation once every thirty (3) minutes at irregular intervals, unless an inmate's behavior requires more frequent observations (15 minute checks or constant observations), based on a recommendation from a health care professional or as required by Section 4.1.f.2. The ACO shall document his/her observations in the unit logbook.
6. The ACO shall document in real time the following: meals, showers, hygiene, cell inspections, recreation, visits, telephone calls, and interaction with medical, mental health, facility administration, watch supervisors, case managers, grievance specialist, and other program staff on the Weekly Segregation Activity form (DCR 8316). The ACO shall maintain the unit logbook in accordance with COR.05.08: Post and Area Logbooks. This shall be maintained for the purpose of review and a formal record.
7. The Segregation Unit Sergeant, Security Lieutenant, and Watch Commander shall observe every inmate in the segregation unit at least once on each shift, inclusive of weekends and holidays. These individual's observations shall be documented in the unit logbook and the visit shall be documented on DCR 8316.
8. The Warden, Deputy Warde, and COS shall tour each segregation unit once each week to observe each inmate, review DCR 8316, and sign the unit logbook. This is to assure that an inmate's visits, activities, privileges, recreation, observations by staff, and reviews are being conducted as required by this policy.
9. The IDA shall tour each segregation unit once every ninety (90) days for compliance and observation of each inmate, review DCR 8316, and sign the unit logbook.

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h. Basic Living Conditions for Administrative Segregation and Disciplinary Segregation

1. Inmates in segregation shall receive privileges consistent with a facility's available resources and security consideration.
2. Disciplinary segregation is a punitive action for an inmate found guilty of serious rule misconduct. An Adjustment Committee may deny the inmate any number of privileges as set forth in the misconduct policy and disciplinary record.
3. Inmates in segregation shall have non-contact personal visits in accordance with the facility visit policy. All official visits shall be non-contact, except at the discretion of the Warden a contact official visit may be afforded. It is important to note that the presence of a security concern will always warrant non-contact official visits.
4. Inmates in segregation shall be allowed non-official telephone calls in accordance with the facility's telephone policy. All official or legal phone calls, such as attorney (if a docketed case exists), ombudsman, and other official State and Federal agencies shall not be restricted.
5. All inmates in segregation based on their status as administrative segregation or disciplinary segregation shall have the opportunity to maintain basic hygiene and shall have access to courts, health care, social workers, spiritual advisors, reading materials, and recreation.

i. Documentation for Administrative Segregation and Disciplinary Segregation

1. All completed administrative segregation documentation and adjustment hearing documentation shall be distributed as dictated on the relevant form(s).
2. The original documents for administrative segregation and disciplinary segregation shall be filed in the inmate's institutional file or jail file.
3. Each Warden shall submit the Administrative Segregation Facility Report to the IDA by Wednesday of the following week.

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4. It is important to retain all information as dictated by the State of Hawaii, Department of Accounting and General Services' (DAGS) records retention schedule.

APPROVAL RECOMMENDED:



Deputy Director for Corrections

JAN 0 1 2024

Date

APPROVED:



DIRECTOR

JAN 0 1 2024

Date

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**DEPARTMENT OF CORRECTIONS AND
REHABILITATION
ADMINISTRATIVE SEGREGATION
FORM PART A**

INMATE'S NAME:

INMATE'S SID:

HOUSING MOVEMENT FROM/TO:

REASON(S) FOR PLACEMENT IN ADMINISTRATIVE SEGREGATION (PART A)
TO BE COMPLETED BY WATCH COMMANDER OR HIGHER AUTHORITY

CHECK ALL THAT APPLY:

- INMATE PRESENTS AN IMMEDIATE THREAT TO SAFETY OF SELF OR OTHERS
- INMATE JEOPARDIZES INTEGRITY OF INVESTIGATION OF ALLEGED SERIOUS MISCONDUCT OR CRIMINAL ACTIVITY
- INMATE ENDANGERS INSTITUTIONAL SECURITY
- OTHER

DESCRIPTION OR CIRCUMSTANCES WHICH SUPPORT THE REASON(S) FOR PLACEMENT:

CONTINUED ON ATTACHED PAGE IF BASED ON CONFIDENTIAL INFORMATION, DATE INMATE NOTIFIED _____

DATE OF PLACEMENT:	PRINT NAME AND TITLE OF AUTHORIZING PERSON:	SIGNATURE OF AUTHORIZING PERSON:
DATE AND TIME NOTICE SERVED ON INMATE: _____ HOURS	PRINT NAME AND TITLE OF STAFF SERVING PLACEMENT NOTICE:	SIGNATURE OF STAFF SERVING PLACEMENT NOTICE:
	INMATE SIGNATURE AND DATE:	<input type="checkbox"/> INMATE REFUSED TO SIGN. THE STAFF MEMBER SERVING THE FORM WITNESSED THE REFUSAL AND PROVIDED THE INMATE A COPY THIS FORM.

DISTRIBUTION: INMATE, INSTITUTIONAL FILE, SEG UNIT, FACILITY HCU CLINICAL SECTION ADMINISTRATOR, COS, CS III



**DEPARTMENT OF CORRECTIONS AND
REHABILITATION
ADMINISTRATIVE SEGREGATION
FORM PART B**

INMATE'S NAME: _____

INMATE'S SID: _____

CURRENT HOUSING: _____

FACE TO FACE REVIEW (PART B)
THE FOLLOWING IS TO BE COMPLETED DURING THE 72 HOUR ADMINISTRATIVE REVIEW BY THE WARDEN OR DESIGNEE

INMATE WAIVERS: <input type="checkbox"/> INMATE WAIVES OR DECLINES INTERVIEW WITH REVIEWING PARTY <input type="checkbox"/> NO WITNESS(ES) REQUESTED BY INMATE	INMATE SIGNATURE _____	DATE/TIME: _____ / _____
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------	-----------------------------

WITNESSES REQUESTED FOR REVIEW PROCESS

WITNESS NAME AND SID: _____	WITNESS NAME & SID: _____
WITNESS NAME AND SID: _____	WITNESS NAME & SID: _____

DECISION: RELEASE TO _____ MAINTAIN SEG HOUSING PENDING PROG COMMITTEE REVIEW
 MUST BE HOUSED IN A SINGLE CELL

REASON FOR DECISION (IF NECESSARY, ATTACH ADDITIONAL PAGES):

PRINT NAME OF WARDEN OR DESIGNEE : _____	SIGNATURE OF WARDEN OR DESIGNEE: _____ DATE/TIME: _____ / _____
PRINT NAME AND TITLE OF STAFF SERVING RESULTS: _____	SIGNATURE OF STAFF SERVING RESULTS: _____ DATE/TIME: _____ / _____
INMATE SIGNATURE AND DATE/TIME: _____	<input type="checkbox"/> INMATE REFUSED TO SIGN. THE STAFF MEMBER SERVING THE FORM WITNESSED THE REFUSAL AND PROVIDED THE INMATE A COPY THIS FORM.



**DEPARTMENT OF CORRECTIONS AND
REHABILITATION
ADMINISTRATIVE SEGREGATION
FORM PART C**

INMATE'S NAME: _____
 INMATE'S SID: _____
 CURRENT HOUSING: _____

PROGRAM COMMITTEE REVIEW (PART C)
 THE FOLLOWING IS TO BE COMPLETED DURING THE ADMINISTRATIVE REVIEW BY
 THE PROGRAM COMMITTEE ON THE FIFTEENTH (15TH) DAY FOLLOWING SEGREGATION PLACEMENT

INMATE WAIVERS: <input type="checkbox"/> INMATE WAIVES OR DECLINES TO BE PRESENT AT PROGRAM COMMITTEE REVIEW <input type="checkbox"/> NO WITNESS(ES) REQUESTED BY INMATE	INMATE SIGNATURE _____ _____	DATE/TIME: _____ / _____
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WITNESSES REQUESTED FOR PROGRAM COMMITTEE

WITNESS NAME AND SID: _____	WITNESS NAME & SID: _____
WITNESS NAME AND SID: _____	WITNESS NAME & SID: _____

PROGRAM COMMITTEE MEMBER OR MEMBERS (LIST NAME, TITLE, AND IDENTIFY THE CHAIRPERSON):

DECISION: RELEASE TO _____ MAINTAIN SEG HOUSING SUBJECT TO NEXT SCHEDULED REVIEW
 (HOUSING) MUST BE HOUSED IN A SINGLE CELL

REASON FOR DECISION (IF NECESSARY, ATTACH ADDITIONAL PAGES):

PRINT NAME OF CHAIRPERSON: _____	SIGNATURE OF CHAIRPERSON: _____ DATE/TIME: _____ / _____
PRINT NAME AND TITLE OF STAFF SERVING RESULTS: _____	SIGNATURE OF STAFF SERVING RESULTS: _____ DATE/TIME: _____ / _____
INMATE SIGNATURE AND DATE/TIME _____ DATE/TIME: _____ / _____	<input type="checkbox"/> INMATE REFUSED TO SIGN. THE STAFF MEMBER SERVING THE FORM WITNESSED THE REFUSAL AND PROVIDED THE INMATE A COPY THIS FORM.

DISTRIBUTION: INMATE, INSTITUTIONAL FILE, SEG UNIT, FACILITY HCU CLINICAL SECTION ADMINISTRATOR, COS, CS III

**DEPARTMENT OF PUBLIC CORRECTIONS AND REHABILITATION
WEEKLY ADMINISTRATIVE SEGREGATION LOG**

WEEK OF _____

INMATE NAME:	SID #:	LOC OF UNIT:
DATE AND TIME ADMITTED:	TENTATIVE RELEASE DATE:	
DATE AND TIME RELEASED:	MH CASELOAD: Y / N	MEDICATION: Y / N

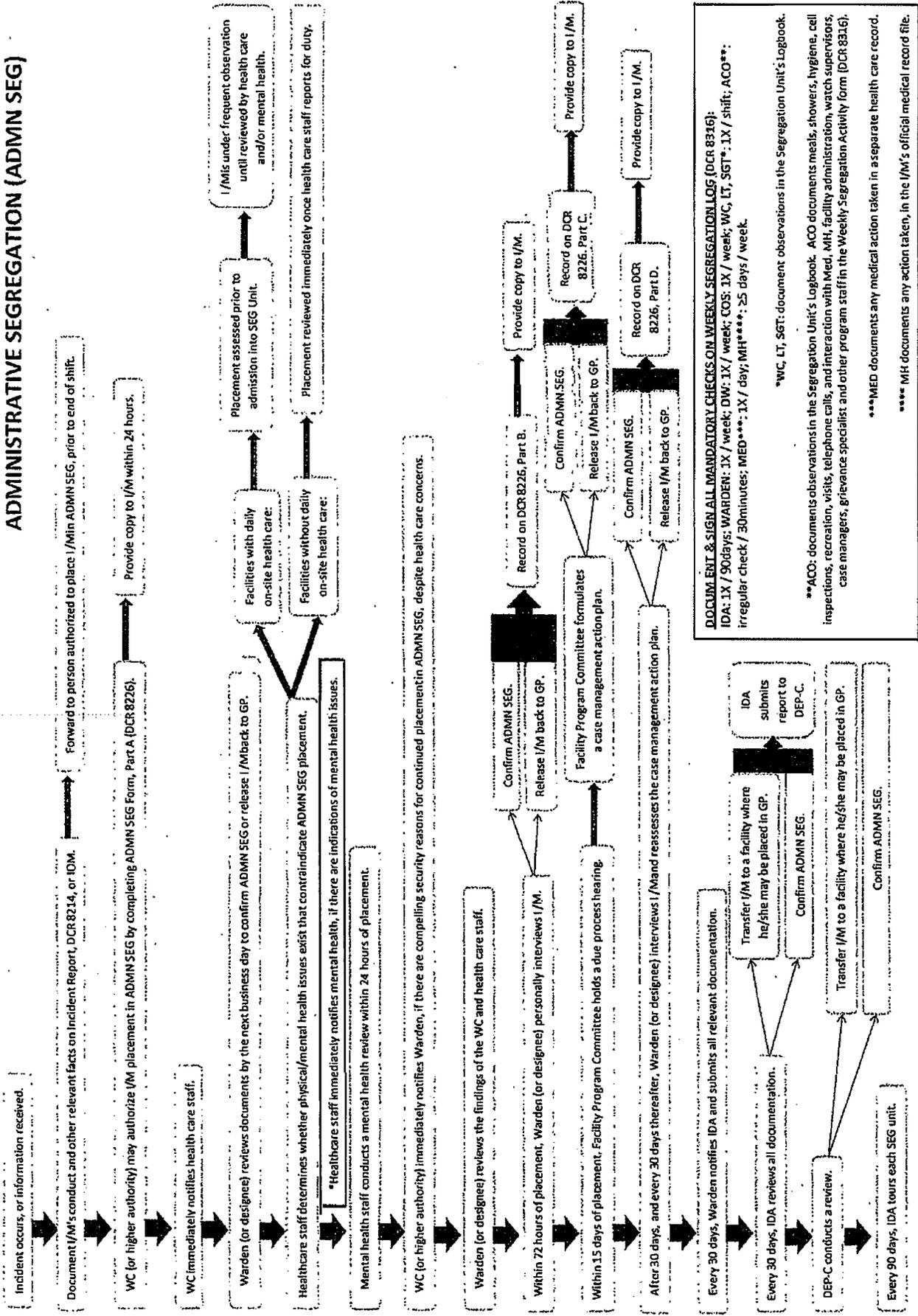
DATE	SHIFT	CHOW (P/D) (W/B/L)	SHOWER SHOWER	HYGIENE (P/T) (W/B/L)	CELL INSPECTION	RECREATION	VISITS (V) PHONE (P)	MENTAL HEALTH	MEDICAL	WARDEN/DUTY WARDEN/DUTY	WATCH COMMANDER/ SUPERVISOR	SW, IASP, GRIEV. VOL.	DAY
	1												S
	2												U
	3												N
	1												M
	2												O
	3												N
	1												T
	2												U
	3												E
	1												W
	2												E
	3												D
	1												T
	2												H
	3												U
	1												F
	2												R
	3												I
	1												S
	2												A
	3												T

CHOW, SHOWER, CELL INSPECTION, RECREATION: (Y) for YES; (N) for NO; (R) for REFUSED, PRINT INITIALS AND THE TIME. SCHEDULE OF MANDATORY CHECKS: WARDEN - 1X every week; DW - 1X every week; COS - 1X every week; WC - 1X every shift.

UNIT LOGBOOK: SEG UNIT LT/SGT - 1X every shift; SEG UNIT ACO - Irregular checks every 30 min.; MEDICAL - 1x per day; MH - 25x per week. TURN IN COMPLETED FORM TO COS AT THE END OF THIRD WATCH (SATURDAY).

REVIEWED BY ADMIN CAPT/LT/WC DATE _____

ADMINISTRATIVE SEGREGATION (ADMN SEG)



DICUM ERT & SIGN ALL MANDATORY CHECKS ON WEEKLY SEGREGATION LOG (DCR 8316):
 IDA: 1X / 90 days; WARDEN: 1X / week; DW: 1X / week; COS: 1X / week; WC, LT, SGT*: 1X / shift; ACO**:
 irregular check / 30 minutes; MED***: 1X / day; MH****: 25 days / week.

*WC, LT, SGT: document observations in the Segregation Unit's Logbook.
 **ACO: documents observations in the Segregation Unit's Logbook. ACO documents meals, showers, hygiene, cell inspections, recreation, visits, telephone calls, and interaction with Med, MH, facility administration, watch supervisors, case managers, grievance specialist and other program staff in the Weekly Segregation Activity form (DCR 8316).
 ***MED documents any medical action taken in a separate health care record.
 ****MH documents any action taken, in the I/M's official medical record file.

**STATE OF HAWAII
DEPARTMENT OF CORRECTIONS AND REHABILITATION**

INCIDENT REPORT

Facility: _____
Prepared on: _____

TO: _____ THRU: _____
(Administrator/Section Supervisor) (Watch Supervisor)

DATE	TIME	NARRATIVE (Specify inmate name & ID and location if related to misconduct)

By: _____
Reporting Officer/Employee Title

ORIG - FACILITY ADMINISTRATOR
CANARY - CONTROL OFFICER
PINK - ATTACH TO MISCONDUCT REPORT

JOSH GREEN, M.D.
GOVERNOR



MARK PATTERSON
CHAIR

CHRISTIN M. JOHNSON
OVERSIGHT COORDINATOR

COMMISSIONERS
HON. R. MARK BROWNING (ret.)

HON. RONALD IBARRA (ret.)

MARTHA TORNEY

HON. MICHAEL A. TOWN (ret.)

STATE OF HAWAII
HAWAII CORRECTIONAL SYSTEM OVERSIGHT COMMISSION
E HUIKALA A MA'EMA'E NŌ
235 S. Beretania Street, 16th Floor
HONOLULU, HAWAII 96813
(808) 587-4160

TO: The Honorable Della Au Belatti, Chair
The Honorable Kim Coco Iwamoto, Vice Chair
House Committee on Public Safety

FROM: Mark Patterson, Chair
Hawaii Correctional System Oversight Commission

SUBJECT: Senate Bill 104, Senate Draft 2, Relating to Corrections
Hearing: Wednesday, March 12, 2025; 10:00 a.m.
State Capitol, Room 411

Chair Belatti, Vice Chair Iwamoto, and Members of the Committees:

The Hawaii Correctional System Oversight Commission (HCSOC) **supports** Senate Bill 104, Senate Draft 2, Relating to Corrections, which restricts the use of restrictive housing in state-operated and state-contracted correctional facilities.

The Commission has been concerned regarding the use of restrictive housing throughout the state and state contracted correctional facilities. A small example of this is the Commission's July 2022 reporting on the usage of a program called, Special Housing Incentive Program (SHIP) utilized by the contracted CoreCivic Saguaro facility in Arizona. Regarding SHIP, the July 2022 monthly Oversight Coordinator report states:

The Commission has serious concerns regarding the Special Housing Incentive Program (SHIP). Although SHIP is noted to be a programming house, **the reality is that it is 12-plus months in a segregated housing setting**. SHIP placement occurs after the violation of specific institutional rules. SHIP is broken down into three Phases, each four months long, with more out-of-cell time introduced in each phase. Phase one has one hour of outdoor recreation time per day (**23 hours in cell**), phase two has one hour of outdoor recreation and one hour of dayroom recreation per day (**22 hours in cell**), and phase three has three hours of combined outdoor and dayroom recreation time per day (**21 hours in cell**).

During the visit, more than 80 people from Hawaii were in the three phases of SHIP. Saguaro also houses people in custody from Idaho, and SHIP is not an option for or offered to those from Idaho. None of the facilities operated by Hawaii PSD offer SHIP either. For example, if an institutional rule violation occurs at Halawa Correctional Facility, the person

in custody usually faces up to 60 days in disciplinary segregation if found guilty, not 12 months in SHIP.

The Commission is extremely concerned about the long-term physical and psychological effects of 12-plus months in a segregated housing setting, which are now well-documented and studied. The trend nationally is to decrease the amount of time in segregated housing settings. With the state of Hawaii's transition to a therapeutic model of corrections, SHIP should be reevaluated and potentially eliminated in totality as it does not align with a rehabilitative framework.

To this day, SHIP is still utilized daily and again, this is only one example. The Commission believes there are various examples of segregated and restrictive housing utilized throughout the corrections system and appreciates the legislature's foresight to include required quarterly reporting from the Commission on the usage of restrictive housing through the corrections system.

Should you have additional questions, the Oversight Coordinator, Christin Johnson, can be reached at 808-900-2200 or at christin.m.johnson@hawaii.gov. Thank you for the opportunity to testify.

PUBLIC DEFENDER

ASSISTANT PUBLIC DEFENDER

DEFENDER COUNCIL
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SUITE A-254
HONOLULU, HAWAII 96817

HONOLULU OFFICE
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FAMILY COURT DIVISION
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STATE OF HAWAII
OFFICE OF THE PUBLIC DEFENDER

March 11, 2025

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SB104 SD2: RELATING TO CORRECTIONS

Chair Belatti, Vice-Chair Iwamoto, and Members of the Committee on Corrections:

The Office of the Public Defender (OPD) **supports SB104 SD2**. This bill restricts the use of solitary confinement in both state-operated and state-contracted correctional facilities to certain limited situations, imposes important safeguards, including procedural due process protections, and subjects the use of solitary confinement to independent oversight.

Section 1 of the bill clearly sets out the numerous issues associated with the use of solitary confinement as a disciplinary or management tool in correctional facilities. There are no significant positive benefits associated with solitary confinement. By contrast, solitary confinement can often causes severe and permanent damages that persist even after individuals are released from incarceration.

Prisons and jails are already inherently harmful, and placing people in solitary confinement adds an extra burden of stress that has been shown to cause permanent changes to people's brains and personalities. In fact, the part of the brain that plays a major role in memory has been shown to physically shrink after long periods without human interaction. And since humans are naturally social beings, depriving people of the ability to socialize can cause "social pain," which researchers define as "the feelings of hurt and distress that come from negative social experiences such as social deprivation, exclusion, rejection, or loss." Social pain affects the brain in the same way as physical pain, and can actually cause more suffering because of humans' ability to relive social pain months or even years later.

The irreparable damages caused by solitary confinement are unjustifiable, and have led the Union Nations to consider solitary torture when used for longer than 15 consecutive days. But this overwhelming research is often

ignored in jails and prisons, where solitary confinement is frequently used as a “solution” to nearly every problem that arises, including disobedience, perceived threats, alleged gang affiliation, and even supposedly for individuals’ own protection.^[1]

While the OPD generally opposes the use of solitary confinement for any purpose, this bill addresses some of the major concerns that are raised when solitary confinement is utilized. Safeguards such as restrictions keeping individuals from “vulnerable populations” from being placed in solitary confinement, pre-confinement medical and mental health examinations and independent review of the cases of persons placed in solitary confinement are all critical.²

Thank you for the opportunity to comment on this measure.

¹ Herring, Tiana, “The research is clear: Solitary confinement causes long-lasting harm,” Dec. 8, 2020, Prison Policy Initiative
(https://www.prisonpolicy.org/blog/2020/12/08/solitary_symposium/)

² Subsection (a)(4)(C) of the bill at p.7, guarantees that the committed person be given representation at the hearing to contest the solitary confinement decision. The OPD suggests that the representation be by an independent person or agency who is not employed by the Department of Corrections and Rehabilitation.



OFFICE OF HAWAIIAN AFFAIRS

**TESTIMONY IN SUPPORT OF SENATE BILL 104 SD 2
RELATING TO CORRECTIONS**

House Committee on Public Safety
Hawai'i State Capitol

March 13, 2025

10:00AM

Room 411

Dear Chair Belatti, Vice Chair Iwamoto, and Members of the House Committee on Public Safety:

The Office of Hawaiian Affairs (OHA) **SUPPORTS SB 104 SD 2**, which restricts the use of restrictive housing in state-operated and state-contracted correctional facilities, with certain specified exceptions, requires the Department of Corrections and Rehabilitation to develop written policies and procedures regarding restrictive housing by 7/1/2026, requires the Hawai'i Correctional System Oversight Commission to review certain housing placements, requires the Department to develop policies and procedures to review committed persons placed in restrictive housing and develop a plan for committed persons currently in restrictive housing by 4/1/2026, and requires a report to the Legislature and Hawai'i Correctional System Oversight Commission.

OHA strongly supports policies which reduce harmful psychological, social, cultural, and economic impacts on pa'ahao, their 'ohana, and the greater Hawaiian community. Native Hawaiians continue to be disproportionately impacted by Hawai'i's criminal justice system, comprising approximately 37% of the state's correctional facilities, while representing only 21% of the total state population.¹ In 2021, 5.1% of Hawai'i's total prison population was held in solitary confinement.² 245 people were held in solitary confinement

¹ "Creating Better Outcomes, Safer Communities – Final Report of the House Concurrent Resolution 85 Task Force on Prison Reform to the Hawai'i Legislature – 2019 Regular Session," HCR 85 Task Force; Legislative Reference Bureau (December 2018) at p. xiii, https://www.courts.state.hi.us/wp-content/uploads/2018/12/HCR-85_task_force_final_report.pdf

² "Time-In-Cell: A 2021 Snapshot of Restrictive Housing based on a Nationwide Survey of U.S. Prison Systems," The Correctional Leaders Association & The Arthur Liman Center for Public Interest Law at Yale Law School (August 2022) at p. 8, [time in cell 2021.pdf](#)

for 15 or more days, and 103 people in men’s prisons were held in solitary confinement for one year or more.³

The Revised United Nations Standard Minimum Rules for the Treatment of Prisoners, as referenced in SB 104 SD 2, prohibit the use of solitary confinement for a time exceeding fifteen consecutive days and characterize this disciplinary sanction as a form of "torture or other cruel, inhuman or degrading treatment or punishment".⁴ It is also worth highlighting that nationally it has been estimated that a year in solitary averages \$75,000 per prisoner – about three times the average annual cost of incarceration in the United States.⁵ Despite the significant cost, both to the prisoners and the public, solitary confinement does not actually reduce violence or prison problems.⁶

In addition to being overrepresented in prisons, the NHPI community experiences higher rates of depression, suicide, and anxiety compared to other ethnic groups in Hawai‘i.⁷ Although the risk of serious harm exists for all prisoners, it is intensified for those who suffer from a pre-existing mental illness or other vulnerabilities.⁸ Solitary confinement often has catastrophic consequences for those who are subjected, including worsening symptoms such as depression, anxiety, and hallucinations, the impediment of

³ “Time-In-Cell: A 2021 Snapshot of Restrictive Housing based on a Nationwide Survey of U.S. Prison Systems,” The Correctional Leaders Association & The Arthur Liman Center for Public Interest Law at Yale Law School (August 2022) at p. 8; p. 11, [time in cell 2021.pdf](#)

⁴ “The United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules,” United Nations Office on Drugs and Crime (2015) at p. 14, https://www.unodc.org/documents/justice-and-prison-reform/Nelson_Mandela_Rules-E-book.pdf

⁵ “Solitary Confinement in the United States: The Facts,” Solitary Watch (2023), <https://solitarywatch.org/facts/faq/#:~:text=How%20much%20does%20solitary%20confinement,a%20regular%20maximum%20security%20prison.>

⁶ Keramet Reiter “The Root of America’s Over-Use of Solitary Confinements in Prison – And How Reform Can Happen,” Scholars Strategy Network (November 2, 2018), [The Root of America's Over-Use of Solitary Confinements in Prison — and How Reform Can Happen | Scholars Strategy Network](#)

⁷ Catherine Jara, Ngoc Phan, “Understanding Hawaiian Identity and Well-being to Improve Mental Health Outcomes for Hawaiian Young Adults,” PMC PubMed Central (May 2024), [https://pmc.ncbi.nlm.nih.gov/articles/PMC11070781/#:~:text=Mental%20health%20is%20a%20serious,Pacific%20Islander%20\(NHPI\)%20community.&text=The%20NHPI%20community%20experience%20higher,ethnic%20groups%20in%20Hawai'i](https://pmc.ncbi.nlm.nih.gov/articles/PMC11070781/#:~:text=Mental%20health%20is%20a%20serious,Pacific%20Islander%20(NHPI)%20community.&text=The%20NHPI%20community%20experience%20higher,ethnic%20groups%20in%20Hawai'i)

⁸ Craig Haney, “Restricting the Use of Solitary Confinement,” Annual Reviews (January 2018), <https://www.annualreviews.org/content/journals/10.1146/annurev-criminol-032317-092326>

rehabilitation, recovery, and community re-integration and adverse long-term consequences for cognitive and adaptive functioning.⁹

The impacts of restrictive housing on the mental and psychological health of incarcerated persons are extensive and well documented. Since 2009, 42 states have established laws restricting or eliminating solitary confinement.¹⁰ In 2018, Congress adopted the bipartisan First Step Act, which eliminated solitary confinement in federal prisons for young people except for those posing immediate, physical risks. Such an extreme form of punishment should accordingly be upheld to scrupulous standards of conduct, with frequent evaluations of inmates before, throughout, and following.

The Office of Hawaiian Affairs appreciates recent amendments which required that a committed person held in restrictive housing not be denied access to their legal counsel. For these reasons, OHA urges this committee to **PASS SB104 SD 2**. Mahalo nui for the opportunity to testify on this critical issue.

⁹ “Solitary Confinement,” NAMI (2025), <https://www.nami.org/advocacy/policy-priorities/stopping-harmful-practices/solitary-confinement/>

¹⁰ Hernandez D. Stroud, “Reforming Solitary Confinement Without the High Court,” Brennan Center for Justice (February 21, 2024), <https://www.brennancenter.org/our-work/analysis-opinion/reforming-solitary-confinement-without-high-court>



Committee: Public Safety
Hearing Date/Time: Wednesday, March 12, 2025 at 10:00am
Place: Conference Room 225 & via Videoconference
Re: **Testimony of the ACLU of Hawai'i in support of S.B. 104 S.D. 2
Relating to Corrections**

Dear Chair Belatti, Vice Chair Iwamoto and Committee Members:

The American Civil Liberties Union of Hawai'i ("ACLU of Hawai'i") writes in **support of S.B. 104 S.D. 2** that limits the use of restrictive housing in state-operated and state-contracted correctional facilities, with certain specified exceptions and requires the Department of Corrections and Rehabilitation to develop written policies and procedures regarding restrictive housing by 7/1/2026. In addition, the proposed measure requires the Hawai'i Correctional System Oversight Commission to review certain housing placements and for DCR to submit a report to the Legislature and Hawaii Correctional System Oversight Commission.

Over the past few decades, Hawai'i, and its contractor, CoreCivic, has increasingly used solitary confinement to hold incarcerated people in isolation. Although the Department of Corrections and Rehabilitation ("DCR") uses the label "restrictive housing," "administrative segregation," or "disciplinary segregation" rather than solitary confinement, this is merely a difference in terminology that amounts to the same practice.

Solitary confinement that lasts more than 15 consecutive days is recognized by the National Commission on Correctional Health¹, the United Nations and various human rights organizations as torture. The practice of placing incarcerated persons alone in cells for 22-24 hours per day with little or no human interaction or outside stimulus, often causes negative psychological reactions in all persons subjected to it. Solitary confinement is known to be especially devastating for people with mental illness who are disproportionately represented in solitary confinement.² It can also bring on mental illness where it did not exist before. Some people are confined in solitary for months, years, and even decades.

¹ In 2016, the National Commission on Correctional Health Care issued guidance to correctional health officials explaining that this type of confinement beyond 15 consecutive days is "inhumane, degrading treatment, and harmful to an individual's health." <https://www.ncchc.org/wp-content/uploads/Solitary-Confinement-Isolation.pdf>

² Roy King, The Rise and Rise of Supermax: An American Solution in Search of a Problem? 1 PUNISHMENT & SOC. 163, 177 (1999). See also, <https://news.un.org/en/story/2011/10/392012>

*Solitary confinement is extremely costly, and studies show that it neither deters violent behavior in jails and prisons nor prevents recidivism.*³ Research also shows that incarcerated people deprived of normal human contact cannot properly reintegrate into society, resulting in higher recidivism rates.⁴

As long as jails and prisons exist, we must limit the use of solitary confinement. **At minimum, Hawai'i's practices must meet the American Bar Association Standards for Criminal Justice, Treatment of Prisoners.**⁵ This requires appropriate procedures prior to placing a person in solitary; decreasing extreme isolation, close mental health monitoring for people in solitary and ending the solitary confinement of persons with mental illness.

In addition, **better alternatives exist to placing people in solitary confinement. Here are a few examples of successful federal and state measures:**

- Colorado Department of Corrections had an external review conducted of its administrative segregation policies and practices. As a result of reforms implemented, Colorado reduced its administrative segregation by 36.9%.
- Michigan reformed its administrative segregation practices through incentive programs. As a result, the number of violent incidents and misconduct dropped.
- Maine reduced its special management population by over 50% and expanded access to programming and social stimulation.
- Mississippi changed its use of solitary confinement and reduced the segregated population of one institution from 1000 to 150 and eventually closed the entire unit.

DCR Has Failed to Provide Solitary Confinement Data for Consideration by Lawmakers

In the past, and even now, DCR has opposed this bill, in part, because it “has many similarities with DCR’s established policies and procedures which are periodically reviewed and updated as appropriate.”

Rather than citing system-wide data to support their opposition in the past, DCR cited anecdotal data. **While anecdotal data should be considered in shaping public policy, it is not a substitute for system-wide data.** DCR, like all governmental agencies, have a responsibility to provide agency wide data to assist Hawai'i lawmakers while deliberating on proposed bills that may become public policies.

To assist with meaningful discussion on this measure, the following questions are offered for consideration by lawmakers:

³ DANIEL P. MEARS, URBAN INST., EVALUATING THE EFFECTIVENESS OF SUPERMAX PRISONS 4 (2006).

⁴ See, e.g., KERAMET REITER, PAROLE, SNITCH, OR DIE: CALIFORNIA’S SUPERMAX PRISONS AND PRISONERS 50 (2006).

⁵ ABA Standards for Criminal Justice, Treatment of Prisoners, 23-1, et. Seq (2010).

1. **Is it a goal or objective of DCR to reduce the number of people placed under administrative and disciplinary segregation?**⁶
2. What is the **current total number and percentage** of people in **administrative segregation** compared to the general population in Hawai‘i’s jails and prisons and out-of state private for profit prisons? How does the current total number and percentage of people placed in administrative segregation compared to 5 years ago?
3. What is the **current total number and percentage of people in disciplinary segregation** compared to the general population in Hawai‘i’s jails and prisons and out-of state private for profit prisons? How does the current total number and percentage of people placed in disciplinary segregation compared to 5 and 10 years ago?
4. What **reforms** have DCR implemented in the past five years to reduce the number of people placed under administrative and disciplinary segregation?
5. How are DCR’s current policies and practices relating to administrative and disciplinary segregation **similar** to the proposed bill?
6. How are DCR’s current policies and practices relating to administrative and disciplinary segregation **different** from the proposed bill?
7. How **many people** are placed under **administrative segregation** in Hawai‘i’s jails and prisons, as well as Saguaro prison in Arizona?
8. How **many people** are placed under **disciplinary segregation** in Hawai‘i’s jails and prisons, as well as Saguaro prison in Arizona under the SHIP Program⁷?
9. What is the **duration** under **administrative segregation (shortest to longest length)**?
10. What is the **duration** under **disciplinary segregation (shortest to longest length)**?
11. How many people in our jails and prisons in Hawai‘i and out of state private for profit prisons have **committed suicide** while under administrative segregation or disciplinary segregation, or upon release from administrative segregation or disciplinary segregation in the past five years?
12. Has the Department of Public Safety **consulted with experts to conduct a third party external review of its administrative and administrative segregation policies and**

⁶ <https://www.civilbeat.org/2016/12/do-hawaii-prisons-overuse-solitary-confinement/>

⁷ The Hawai‘i Correctional System Oversight Commission has repeatedly expressed serious concerns regarding the Special Housing Incentive Program (SHIP) at Saguaro prison operated by CoreCivic in Saguaro. Although SHIP is noted to be a programming house, the reality is that it is 12-plus months in a segregated housing setting. Regardless of CoreCivic and DCR’s characterization of SHIP as a “program,” this restrictive housing amounts to torture.

practices similar to Colorado that reduced its administrative segregation population by 30%?

Since the vast majority of people in solitary confinement are eventually released back into the community, it is essential that we invest our limited public dollars in proven alternatives that lead to greater rehabilitation and pave the way for successful re-entry and reintegration.

In closing, we request that you pass **S.B. 104 S.D. 2** and restrict DCR and its contractors from torturing people through long-term solitary while incarcerated under the custody of Hawai'i.

Sincerely,

Carrie Ann Shirota
Policy Director
ACLU of Hawai'i
cshirota@acluhawaii.org

The mission of the ACLU of Hawai'i is to protect the fundamental freedoms enshrined in the U.S. and State Constitutions. The ACLU of Hawai'i fulfills this through legislative, litigation, and public education programs statewide. The ACLU of Hawai'i is a non-partisan and private non-profit organization that provides its services at no cost to the public and does not accept government funds. Since 1965, the ACLU of Hawai'i has been serving Hawai'i.

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Today's Inmate; Tomorrow's Neighbor



COMMITTEE ON PUBLIC SAFETY

Rep. Della Au Belatti, Chair

Rep. Kim Coco Iwamoto, Vice Chair

Wednesday, March 12, 2025

Room 411 & VIDEOCONFERENCE

10:00 AM

STRONG SUPPORT FOR SB 104 SD2- RESTRICTIVE HOUSING/SEGREGATION

Aloha Chair Belatti, Vice Chair Iwamoto and Members of the Committee!

My name is Kat Brady and I am the Coordinator of Community Alliance on Prisons, a community initiative promoting smart justice policies in Hawai'i for more than two decades. This testimony is respectfully offered on behalf of the 3,723 Hawai'i individuals living behind bars¹ and under the "care and custody" of the Department of Corrections and Rehabilitation as of March 3, 2025. We are always mindful that 938 - 49.5% - of Hawai'i's male prison population are serving their sentences abroad -- thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Kanaka Maoli, far, far from their ancestral lands.

Community Alliance on Prisons appreciates this opportunity to share our strong support for SB 104 SD2. This bill moves restrictive housing/segregation out of the darkest corners of public policy and into the light of transparency and accountability.

The United Nations and many national and international organizations describe restrictive housing as 'torture', regardless of the many euphemisms states use to disguise this state-sponsored violence.

This bill recognizes that incarcerated persons are human beings. And humans are social beings. Segregated from the general population with no programs, no books, nothing to keep one's mind active *IS* torture.

Hawai'i is experiencing a high number of deaths and suicides since 2020...four in 2024. This must be a clarion call that something is not working in our 'correctional' system.

¹ DCR Weekly Population Report, March 3, 2025

<https://dcr.hawaii.gov/wp-content/uploads/2025/02/Pop-Reports-Weekly-2025-03-03-2.pdf>

A Civil Beat article² entitled, *The Mental Health Crisis in Hawai`i's Prisons: 'The Suicides Keep Coming,'* reported that:

"Two more Hawai`i inmates have died in prison this fall in what corrections officials believe were suicides, bringing the number of confirmed or suspected suicides in the system this year to four.

...Three of the four deaths have been confirmed as suicides, and each of the three involved inmates with a history of mental illness."

Another Civil Beat article³ entitled, **Hawaii's Prison System Confronts 'A Huge Mental Health Crisis'** reported that:

The state also is the target of a federal class-action lawsuit over mental health services in the correctional system in a case that is scheduled to go to trial next summer.

That [lawsuit filed by Honolulu lawyer Eric Seitz](#) claims that "at least 26 inmates have committed suicide in Hawaii prisons and jails since 2010." The state Attorney General's Office denied those claims in its reply to the lawsuit.

...

A settlement reached in that case required reforms in some 40 areas, from increasing staffing levels to mandating programs for the mentally ill and improving screening at intake, according to Mark Mitchell, a psychologist hired by the state to implement the settlement.

Mitchell said his contract with the state was not renewed after the DOJ ended its supervision of OCCC in 2015, and by 2020 half of the mental health positions at the facility were vacant. He said lack of staffing made it impossible for the facility to comply with the terms of the DOJ settlement."

This is a clarion call for reforming how we address mental health issues across Hawai`i nei. Jail and Prison are the absolute wrong places for people contending with a myriad of mental and other health issues.

SB 104 SD2 requires: training by professionals, documentation of all decisions, procedures, and reviews, monitoring of compliance, posting of quarterly reports on the DCR website (dcr.hawaii.gov) and lots of other information that has been unavailable to the public.

The bill protects vulnerable populations including those under 21 years of age, those over 60 years of age, those with mental and developmental disabilities, those with serious medical conditions, those who are pregnant or post-partum, those with auditory or visual impairments, and those perceived to be lesbian, gay, bisexual, transgender, or intersex.

Mahalo!

² **The Mental Health Crisis in Hawai`i's Prisons: 'The Suicides Keep Coming,'** The latest deaths would make the number of suicides the highest in a single year since 2020, By Kevin Dayton, November 29, 2024. [The Mental Health Crisis in Hawai`i's Prisons: 'The Suicides Keep Coming' – Honolulu Civil Beat](#)

³ **Hawaii's Prison System Confronts 'A Huge Mental Health Crisis'**, Licensed psychologists have been leaving correctional facilities in the state at an alarming rate, which is creating gaps in care, By [Kevin Dayton](#) / October 9, 2024. <https://www.civilbeat.org/2024/10/hawaiis-prison-system-confronts-a-huge-mental-health-crisis/>

SB-104-SD-2

Submitted on: 3/10/2025 5:31:48 PM

Testimony for PBS on 3/12/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Lorenn Walker	Hawaii Friends of Restorative Justice	Support	Remotely Via Zoom

Comments:

The Hawai'i Friends of Restorative Justice (HFRJ) strongly supports this measure. HFRJ has worked with and conducted research on Hawai'i state prisons for over twenty years.

HFRJ has direct experiences with the consequences of restricted housing also known as: [solitary confinement](#). Changing words to "restricted housing" or "segregated housing" from "solitary confinement" does not change what the practice is. The practice is segregating people and keeping them away from others and alone. This practice, whatever it is called, negatively affects the lives of incarcerated people and prison staff too.

One young, wonderful mother who had great promise, that we worked with about 5 years ago, died in solitary confinement. We believe her segregation and confinement without others is responsible for her death. Other incarcerated people we have worked with have also suffered serious emotional harm from solitary confinement/restricted housing. And while some prison staff may believe solitary confinement is effective, others have been disturbed by the harmful effects that this barbaric punishment causes.

The research is clear that solitary confinement is [detrimental](#) and should be abolished, and if used, it must be strictly regulated. Research shows that [managing incarcerated people in humane ways is more effective](#) than extreme emotional deprivations, which are not only ineffective. but are harmful and dangerous. For the state to use this practice is a disservice to our community.

Additionally, it seems totally contrary to the editorial that [Mr. Johnson wrote for the Star Advertiser December 29, 2024](#) claiming that Hawai'i's correctional system is "no longer based on a punitive model of justice." Segregating people alone from others is punishment and even in the department's own material it says the practice can be used for "punitive" reasons. See: ADMINISTRATIVE SEGREGATION AND DISCIPLINARY SEGREGATION policies, Policy No: Cor.11.01, January 1, 2024, page 12, and included as attachment to Mr. Johnson's testimony submitted February. 19, 2025.

Hawai'i's corrections system needs to end unrestricted solitary confinement. Please support this measure.

Please contact Lorenn Walker at lorenn@hawaiiifriends.org if you need more information about our strong support for this bill. Mahalo for your public service.



Committee on Public Safety
Chair Dell Au Belatti, Vice Chair Kim Coco Iwamoto

Date, Time and Location of Hearing
SB 104 – Relating to Corrections

TESTIMONY

Stephen Munkelt, Legislative Committee, League of Women Voters of Hawaii

Chair Belatti, Vice Chair Iwamoto, and Committee Members:

The League of Women Voters of Hawaii supports BILL NUMBER SB 104

This bill will place new and necessary restrictions on the use of “restrictive housing” in correctional facilities, colloquially known as solitary confinement. The League of Women Voters supports the humane treatment of prisoners, with a focus on rehabilitation and successful re-entry into the community. The League also supports the elimination of bias, including the disproportionate treatment of marginalized individuals based on gender identity, sex, race, ethnicity, or other individual characteristics. This bill aligns with each of those goals.

Sadly, over the last several decades the United States has become the nation leading the world in a high rate of incarcerating our residents. We are also the world leader in the use of solitary confinement and particularly long-term solitary confinement. Evidence-based research here and internationally has made it clear that solitary carries a high risk of mental and physical harm to inmates. Mental breakdowns with psychosis, physical injuries from self-harm, suicide, long term increases in the risk of heart attack, stroke, and mental illness are common consequences of even short terms in restrictive housing.

SB 104 represents a measured approach to management of correctional facilities and the welfare of the people entrusted to the care of corrections personnel. For these reasons the League of Women Voters of Hawaii **supports SB 104.**

Thank you for the opportunity to submit testimony.

Stephen Munkelt
Legislative Committee



March 7, 2025

House Committee on Public Safety
Representative Della Au Belatti, Chair
Representative Kim Coco Iwamoto, Vice Chair
Representatives Mark J. Hashem, Linda Ichiyama, Rachele F. Lamosao, Dee Morikawa, Mahina Poepoe, Justin H. Woodson, Garner M. Shimizu, and Kanani Souza, Committee Members

RE: SB 104 RELATING TO CORRECTIONS – SUPPORT

Dear Chair Au Belatti, Vice Chair Iwamoto, and Committee Members,

I am submitting this letter in support of SB 104 on behalf of Easterseals Hawaii. Easterseals Hawaii served 2,025 Hawaii community members with intellectual and developmental disabilities (I/DD) in 2024. Our purpose is to create a more equitable world where people with I/DD can choose their own path.

SB 104 would protect vulnerable populations by establishing limitations on restrictive housing, especially for individuals with I/DD as well as LGBTQIA+ individuals. Easterseals Hawaii recognizes the importance of intersectional identities and the implications of this bill for LGBTQIA+/MVPFAFF+ people with disabilities. Research demonstrates that the disabled and LGBTQIA+ populations are disproportionately affected by restrictive housing.¹ Restrictive housing significantly deteriorates one's mental health and has many long-term negative effects such as a 78% higher likelihood of suicide as compared to inmates who were not placed in restrictive housing.² Such punitive measures should only be taken if necessary and should not be used for non-disciplinary reasons. This bill is an essential step in protecting vulnerable populations from being unjustly punished through such cruel, isolating means as restrictive housing.

Easterseals Hawaii supports SB 104 and respectfully requests your "aye" vote. Mahalo for the opportunity to submit this letter.

A handwritten signature in black ink, appearing to read "Rachel Liebert Lewis".

Rachel Liebert Lewis
Director, Public Policy and Advocacy
Easterseals Hawaii
PublicPolicyAndAdvocacy@eshawaii.org

¹ <https://vera-institute.files.svdcn.com/production/downloads/publications/the-impacts-of-solitary-confinement.pdf>

² <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2752350>

SB-104-SD-2

Submitted on: 3/9/2025 9:14:34 AM

Testimony for PBS on 3/12/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Thaddeus Pham	Individual	Support	Written Testimony Only

Comments:

Aloha Chair Belatti, Vice Chair Iwamoto, and PBS Committe,

As a public health professional and concerned citizen, I write in strong support of SB104 SD2, which would restrict the use of solitary confinement.

Please support a more humane path forward for people already serving their time.

Mahalo,

Thaddeus Pham

SB-104-SD-2

Submitted on: 3/9/2025 2:00:12 PM

Testimony for PBS on 3/12/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Colleen Rost-Banik	Individual	Support	Written Testimony Only

Comments:

Dear Committee on Public Safety,

My name is Colleen Rost-Banik. I am a resident of Honolulu, and Instructor of Sociology at University of Hawaii, Manoa. I also facilitate a Create Writing class at the Women's Community Correctional Center.

I urge you to support SB104, which would create restrictions on solitary confinement within that State's correctional facilities. I have heard numerous stories from people who have been placed in solitary confinement, and the isolation that solitary confinement imposes is quite dehumanizing. Rather than facilitating "rehabilitation" (a major goal of the DCR), it generates violence and leads to serious mental health issues.

Please support SB104 to restrict the use of solitary confinement.

Mahalo for your time.
Colleen Rost-Banik, Ph.D.

SB-104-SD-2

Submitted on: 3/10/2025 12:26:28 PM

Testimony for PBS on 3/12/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Michael Olderr	Individual	Support	Written Testimony Only

Comments:

I suppose this bill is better than nothing, but seriously stop the practice of solitary confinement. Its damage and effects are well documented for decades at this point. It's done more harm than good; the only thing it's good for is prison guards who go on a power trip.

SB-104-SD-2

Submitted on: 3/10/2025 2:25:06 PM

Testimony for PBS on 3/12/2025 10:00:00 AM

Submitted By	Organization	Testifier Position	Testify
Carla Allison	Individual	Support	Written Testimony Only

Comments:

I strongly support SB104. It's past time to bring transparency and accountability to, plus restrict. the use of, solitary/segregation/restrictive housing.in Hawaii's state-operated and state-contracted correctional facilities,

TESTIMONY IN SUPPORT OF [SB104](#) SD2

House Committee on Public Safety
March 12, 2025

Aloha Chair Belatti, Vice Chair Iwamoto, and Members of the Committee,

My name is Isis Osborne, I am a member of Lambda Law Hawai'i, a Law Student Association at the William S. Richardson School of Law, and **I strongly support SB104**.

I support this bill to limit the cruel use of solitary confinement in prisons and jails, for one because this is a practice that is too often used to separate trans prisoners from the rest of the population, not just as punishment for any actual wrongdoing. We should be preventing such inhumane practices and instructing our prisons & jails to respect incarcerated peoples identities instead of giving people more trauma to deal with.

This bill moves solitary/segregation/restrictive housing out of the darkest corners of public policy and into the light of transparency and accountability. The UN and many national and international organizations describe this sanction as ‘torture.’ **Humans are social beings, and to be segregated and deprived of programs, books, and other things to keep one’s mind active IS torture.**

This bill would add **procedural safeguards to protect the rights of incarcerated peoples**: an initial hearing is held within 24 hours of placement in restrictive housing, the sanctioned person appears and can be represented, the hearing officer is independent, and there is a written statement of reasons for the decision.

I am concerned that **in 2024, we saw the largest number (4) of known suicides in our correctional system since 2020. Several of these have happened in restrictive housing/segregation.** SB104 SD2 calls for reporting and tracking the number of people in restrictive housing/segregation and involves the HI Correctional System Oversight Commission in the placement of people there.

Overall, **the practice of solitary confinement disproportionately impacts individuals from vulnerable populations**, such as persons under 21 years of age, persons over 60 years old, persons with mental disabilities, persons with developmental disabilities, persons with serious medical conditions, persons who are pregnant or postpartum. persons with auditory or visual impairments, and as mentioned previously, persons who are or perceived to be lesbian, gay, bisexual, transgender, or intersex.

Please support SB104 SD2. Mahalo nui for the opportunity to testify.

Isis “Izzy” Osborne (they/them)

Kapahulu Ave resident (96815)

2026 JD Candidate at William S. Richardson School of Law

Member of Lambda Law Hawai'i, a Law Student Association at the William S. Richardson School of Law, at UH Mānoa

Mission: To advance equal rights for LGBTQIA+ individuals at WSRSL and beyond.