



**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

**SCOPE AND INTRODUCTION**

This Chapter provides an updated 10-Year Capital Improvements Plan for the entire PSD correctional system that would need to be implemented in order to meet the goals of accommodating both the 1,400 Hawaii prisoners now in mainland prisons as well as the projected growth in prisoners for the next 10 years. This update was also requested to assess the need for a “secure treatment facility” on the Island of Hawaii within the context of the total correctional system. Also, the update is intentionally limited in focus on correctional facility capital improvement needs and does not include an equivalent update of the management and operations plan as was done in 1991 under a much longer schedule and more extensive scope of work. A limited review of the elements included in Chapters 1 and 3 of the 1991 plan is contained in Appendix B only to suggest potential changes to consider within the context of this facilities plan update.

In order to assess the need for any new facility the entire system of existing facilities must be evaluated in relation to the projected needs from Chapter 2. The Capital Improvements Plan begins by updating the status, assessing the conditions of and providing general improvement recommendations for the system’s existing facilities. In the 1991 Corrections Master Plan the Capital Improvements Plan section (Chapter 4) provided an evaluation and Action Plan Recommendations of the then existing eight correctional facilities under their official names at that time as follows:

**State Prisons**



Halawa Special Needs Correctional Facility - Oahu



Halawa Medium Security Correctional Facility - Oahu



Kulani Correctional Facility – Hawaii



Waiawa Correctional Facility – Oahu

**County-Based Jails**



Hawaii Community Correctional Center



Kauai Community Correctional Center



Maui Community Correctional Center



Oahu Community Correctional Center

In 1991 the Women’s Community Correctional Center on Oahu was the subject of litigation while the Department was in the process of negotiating a consent judgment to relocate the facility and decided that it should thus be excluded from the Master Plan at that time. The total operating capacity of the correctional system as found in the 1991 Master Plan (prisons and jails – CFs and CCCs) was 2,473 beds, whereas today the system’s official operating capacity used by the PSD as of this study in October 2003 is 3,473. This latter number is derived from each facility in the Department’s Capacity Study completed in 2001, which then included the Women’s Community Correctional Center. The Capacity Study established quantitative objective capacity ratings based



### Chapter 3 CAPITAL IMPROVEMENTS PLAN

on American Correctional Association Physical Plant Standards for each facility that are valid today and are thus an important data base used in this Master Plan Update.<sup>1</sup>

The results of the Department's Capacity Study provide a telling comparison to the actual population counts in the facilities today and confirms the degree to which the entire system is overcrowded. Compared to the PSDs rating of a 3,473-bed capacity, the average annual inmate population from end-of-month "head count" for the fiscal year 2002/03 was 3,857. This means that on average the system operated at 111% of its rated throughout FY2003. *By way of comparison professional practice standards as well as many state prison systems and local jails consider themselves to be full when they reach 95% of their rated capacity in order to allow for standard custody separations, periodic admission fluctuations and daily movements.* Moreover, as is shown later in this chapter the consultant team established a current (October 2003) operating capacity rating of 3,369 beds, which is less than the PSDs 2001 rating, primarily due to our recommendation that the Halawa Special Needs CF needs to be abandoned as soon as possible due to its inadequate conditions. This facility was recommended for replacement in the 1991 master plan and its conditions are only worse today.

To make matters worse the "head count" number does not include the total "assigned count" that includes an additional annual average of another 1,679 Hawaii sentenced inmates who are in the daily "out-count" for all facilities, meaning that they are at temporarily at another location. Today approximately 1,400 of the 1,679 "out-count" prisoners are currently housed in various prisons in mainland states due to lack of space in Hawaii facilities. *Clearly the Hawaii corrections system has reached a level of capacity need that is well beyond the combined capability of its existing facilities.*

#### **FACILITY STATUS, FUNCTIONAL AND CAPACITY CHANGES SINCE 1991**

Following is a summary overview of the major functional and capacity differences found by the consultant's facility inspections in the fall of 2003 for each existing correctional facility as compared to their status and conditions in 1991.

**Women's Prison** – Due to the pending litigation in 1991 against the State regarding conditions of confinement for women the then temporary Women's Community Correctional Center (originally a 1952 juvenile corrections facility) was remodeled and completed in 1994 as the State's primary women's all-custody facility. While the other four County-based Community Correctional Centers both then and now housed pre-trial and locally sentenced females the WCCC is the system's main facility for women and was thus included in the site visits for this update. Any female prisoner who presents a significant management, security or healthcare risk at



<sup>1</sup> Capacity Analysis Study, Hawaii Corrections Population Management Commission, 2001. Since it complies with the ACA physical plant standards for both Adult Correctional Institutions and Adult Local Detention Facilities the results of this study have been used in this master plan update as the source for the official operating capacity of all existing facilities.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

the County CCCs is usually transferred to the WCCC. With the first temporary remodeling in 1991 the facility began with 150 operational beds. In the Department's 2001 Capacity Study the WCCC has a rated capacity by housing and food service of 260 beds; 306 beds by infrastructure; and 232 beds by health care for an overall rating of 232 beds. For fiscal year 2002/03 the facility averaged 324 inmates, which exceeds total rated capacity by 40%.

**Male Prisons** – In October 2003 three male prisons (Halawa Special Needs CF, Kulani CF, and Waiawa CF) provided substantially different correctional functions than they did in 1991. Only the Halawa Medium Security CF was operating similarly to its 1991 mission as a general population medium security prison. In total the combined operating capacity of all four facilities used by the PSD had increased from 1,365 operational beds in 1991 to 1,632 operational beds in 2003. *While the Halawa Special Needs CF had 132 beds used regularly in 2003 the consultant does not consider these beds to be adequate as already noted and are recommended to be abandoned and demolished as soon as possible.*



Excluding the Halawa SNCF 132 beds leaves a rated operating capacity of 1,500 operational male beds, which held an average of 1,795 inmates for fiscal year 2002/03. This average population count is approximately 20% above the total rated capacity of the three facilities combined. Even if the Halawa SNCF 132 beds are included the male facilities still operated at 10% above their combined total capacity.

- Halawa Medium Security CF – It is still the newest and largest prison facility in the system. As was the case in 1991 it is still double-bunked although the original design plans were intended for single bunks to accommodate both medium and maximum custody inmates and allow for 23-hour lockdown. Fortunately the cells were sized at 80 square feet, which is suitable for double-bunking in addition to single bunking and 23-hour confinement. In the Department's 2001 Capacity Study the facility is rated for 992 operational beds, 14 medical beds, plus 44 temporary management cells in its housing. For fiscal year 2002/03 the facility averaged 1,124 inmates, which is more than 13% above its rated capacity.
- Halawa Special Needs CF – Although it is actually a unit under the same command on the same site as the Halawa Medium Security Facility, the Special Needs Facility provides a unique function for the total system. Whereas in 1991 it was known as the High Security Facility designated for high-security risk inmates and the reception and diagnostic function, today its mission is as a Special Needs Facility to include the mentally disordered, close custody, protective custody and parole violators. The R&D function is now contained in a 15-cell pod at Module 1 in the Medium Security Facility. The Special Needs Facility has a 132-bed operational capacity rating, plus 12 temporary management cells. It is dependent on the infrastructure built as part of the Medium Security Facility. For fiscal year 2002/03 the facility averaged 154 inmates, almost 17% above its rated capacity.
- Kulani CF – This minimum security facility remotely located on Hawaii about 20 miles up the Mauna Kea slope from Hilo is very similar to its general physical conditions in 1991 having the same capacity rating of 160 beds. In 1991 Kulani was an honor camp for inmates who were nearing a release date. Today Kulani serves as the system's primary sex offender treatment facility and has a waiting list for those who are in other prisons awaiting a



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

treatment slot opening at Kulani. For fiscal year 2002/03 the facility averaged 193 inmates for about 21% more than its rated capacity.

- Waiawa CF - This minimum security facility is located on central Oahu surrounded by large tracts of undeveloped lands that are reportedly trending towards higher economic values from nearby residential and commercial land conversion moving in this direction. Whereas its mission focus in 1991 was on extensive education and vocational training for misdemeanants the implementation of a therapeutic community that year began a change in focus to become a drug treatment facility. The KASHBOX treatment community started in 1991 has become the “heart” of the system’s drug treatment program for convicted felons. In 1998 Waiawa was expanded from its 1991 operating capacity of 134 beds to 348 beds by the addition of two 100-bed dormitories dedicated to the KASHBOX treatment program. For fiscal year 2002/03 the facility averaged 324 inmates making it the only facility to have operated below its rated capacity by about 7%.

**Community Correctional Centers** – As was the case in 1991 the four Community Correctional Centers (CCC’s) still provide the customary county jail function of managing both pre-trial detainees and locally-sentenced misdemeanor offenders and others with a sentence of one year or less. They also provide an important pre-release preparation/transition function for prison system inmates who are transferred back to their county of origin when they have less than a year until scheduled release. Most of these former prison inmates are transferred to a dedicated work furlough unit where they are able to begin working in the community either on supervised work crews or in individual placements as determined by needs and classification assessments and individualized pre-release plans.



Their concept and mission was originally defined in the 1973 Hawaii Corrections Master Plan that resulted in the construction of a CCC in each of the four counties. Consequently, all four share some common original facility design elements that were considered to be appropriate at the time. *One of those commonalities, however, unfortunately is the subdivision of the original secure housing building into very small operationally inefficient units of 3-, 4- or 6-cell clusters. Contemporary designs provide for much larger units (usually 48 to 64 beds each for general population minimum or medium security) that allow many more inmates to be supervised per officer.*

In 1991 the combined operational bed capacity of the four CCC’s was 958, whereas in the Department’s 2001 Capacity Study the same facilities have a combined rated operational capacity of 1,609. With the system’s overcrowding today’s operational capacity of 1,609 beds held an average of 1,777 inmates for fiscal year 2002/03, which is 10% above the total rated capacity of all four facilities combined.

- Hawaii CCC – The original facility opened as a 22-bed facility in 1975 is located in a neighborhood in Hilo and has been expanded substantially since then to be a 226-bed facility. Unlike other CCCs it has a Work Furlough Center remotely located on a site outside of Hilo that was conceived as a possible future location for the entire HCCC. The CCC was





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

sited next to the old County jail in a Hilo location that was not then surrounded by residences and schools as it is today. Consequently, local leadership and the Department have discussed the possibility of eventually relocating the facility to an outlying area that would not be at conflict with surround development. The Hali Nani Work Furlough Center site may be a feasible alternate location provided that enough buildable land is available. For fiscal year 2002/03 the facility averaged 286 inmates, which is more than 26% above its rated capacity.

- Kauai CCC – Like the other CCCs Kauai has been expanded substantially from its original opening capacity of 12 medium security beds in 1977 to 46 beds as of the 1991 Master Plan and as of 2003 to a rated capacity of 128 beds. While its location does not conflict with any existing land uses being in an out-of-town area the DOT has completed engineering studies for a new highway corridor that could require the relocation of the facility, depending on the final alignment selected. The facility has “inherited” a number of temporary dormitory structures that are left over from a recent hurricane recovery and are still being used for correctional housing. For fiscal year 2002/03 the facility averaged 148 inmates, almost 16% above its rated capacity.
- Maui CCC – The original 18-bed design from 1978 increased to 90 operational beds by 1991 and is rated at 301 beds as of 2003. A substantial amount of construction has been completed to expand the facility from its original 2-acre site to 5 acres and in 1996/97 another 2.5 acres at the same time that both substantial medium and minimum security housing units were added. Like the Hawaii CCC the Maui CCC was sited in a location on the edge of town but over the years the town of Wailuku has grown around and beyond the CCC. Land values in the immediate area are now undoubtedly much higher than they were 25 years ago. For fiscal year 2002/03 the facility averaged 346 inmates, or 15% above its rated capacity.
- Oahu CCC – The OCCC is still the largest County jail facility in the Hawaii system and can be expected to remain so as it serves the entire Honolulu/Oahu population. From its beginning in 1975 as a part of the county-based Community Corrections system concept called for by the 1973 Master Plan at 456 beds the facility has been expanded even beyond its 16-acre site to include a Work Furlough Center a block away. It had a total operating capacity of 747 beds in the 1991 Master Plan that has reached 954 beds at the time of this study in October 2003. The design of this CCC is substantially different from the other three although it does have design elements that attempt to integrate some “normative” environmental features into a confinement facility as was the trend at the time. Essentially, it is not comparable to the contemporary secure jail designs that are more common today, such as the new Federal Bureau of Prisons Detention Center adjacent to the Honolulu Airport. Here again, like the locations of the Maui and Hawaii CCCs it is obvious that the OCCC site would have a much higher and better economic value for private sector development today than may have been the case when it was originally sited. In all likelihood the State could probably sell the land at a price that would defray a significant amount of cost for building a replacement facility. For fiscal year 2002/03 the facility averaged 997 inmates, or almost 5% above its rated capacity.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

**Summary –** With the total system of prison and jail facilities regularly operating at 111% of its rated capacity and still not even housing another 1,400 sentenced Hawaii prisoners sent to mainland facilities, the system is in critical condition. While some facilities have higher degrees of crowding than others, the general physical plant conditions, safety and security conditions found during this update study only further exacerbate a difficult situation. The staff of the PSD should be commended for being able to “keep the lid on” under these conditions and the State should be thankful to a dedicated staff that a major problem has not occurred at any crowded facility that could lead to serious legal and financial consequences.

It is clear that the degree of crowding has worsened substantially since 1991 when the total system’s “rated” capacity was 2,473 beds and the system’s head count in June 1991 was only 2,379 inmates plus an out-count of only 294 inmates and there was no reliance on renting beds in mainland prisons. The system’s reliance on “renting beds” on the mainland started in 1995 with a contract for 300 male beds that has grown to over 1,350 male and female inmates as of October 2003 . Added prisoner capacity is clearly needed in the Hawaii correctional system.

### **EXISTING FACILITIES CAPACITIES AND IMPROVEMENT RECOMMENDATIONS**

The following section contains master plan development strategy and improvement recommendations for all nine existing correctional facilities based on conditions data and information provided by the PSD staff and the consultant’s inspection of each facility. There are five categories of master plan recommendations for each facility as follows:

1. Recommended Role and Mission
2. Recommended Capacity by Custody Levels
3. Changes and Improvements Needed (A. Still a Need Since 1991 Master Plan, and B. New Needs)
4. Expansion Potential and Continued Use
5. Updated and Space Needs and Site Plan

The updates and recommendations in this section are divided into Part A, which addresses the five existing Correctional Facilities and Part B the four existing Community Correctional Centers. Following this element of the master plan update a computation of the deficit or net number of new beds needed by future years is provided as the basis for expanding existing facilities where feasible and constructing new facilities needed to meet the 10-year projections. As will be seen new facilities are recommended as replacements for the four CCCs that could be built on new sites on each Island, especially in light of the lack of expansion grounds at all but the Kauai CCC site. Also, depending on the results of the expansion potentials assessment of the five correctional facilities (CFs) new facilities are recommended where existing facility expansion is not sufficient to meet existing and projected future needs for specific custody categories.

It should be remembered that one of the goals articulated by the PSD for this master plan update is that Hawaii should plan to eventually return the approximate 1,400 Hawaii prisoners currently held in mainland prisons due to lack of capacity in Hawaii. The projected 10-year capacity needs of Chapter 2 provide one part of the objective equation for the expansion and new facility recommendations in this section while the consultant’s findings from recent staff interviews, facility



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

inspections and data provided by PSD staff provide the other part. A recommended 10-year implementation schedule and budget estimates are provided in the final section of this Chapter.

### **Part A – Existing Correctional Facilities**

In general with the exception of the Halawa Special Needs Facility, the State's five correctional facilities that provide the traditional prison functions for higher level sentenced offenders (felons) have remaining life and important on-going roles in a comprehensive correctional system. However, there are a number of site and/or infrastructure issues at Halawa, Waiawa and Kulani that could make expansion more costly than normal. As explained in the section on the Halawa Special Needs CF it is an obsolete facility with poor security conditions and is operationally inefficient compared to contemporary designs. It should be demolished and replaced by larger and more comprehensive special needs diagnostic and treatment facility as soon as possible. On the other hand the Halawa Medium Security Facility that covers most of the Halawa site is one of the State's most valuable correctional assets that could offer some expansion capability. Doing so would require both demolishing the Special Needs CF and acquiring some adjacent private foundation land on its eastern boundary and that water and sewer capacity expansions are financially feasible.

Although it is very old the Waiawa CF in Central Oahu plays a very important function for substance abuse treatment, which is a major need common to the vast majority of prison inmates today. Waiawa alone, however, cannot meet those needs, which need to be dealt with in all facilities at all security levels. It however, is located on land that, like three of the CCCs, is in the way of higher value land development trends, which may eventually give the State the opportunity to sell or trade the site to obtain a new site for a replacement facility. Investing in a new facility would also allow the construction of a multi-security facility design with a secure perimeter that would allow placement of a larger population to include medium custody inmates who also need substance abuse treatment instead of only those who qualify for minimum custody. Those substance abuse treatment components now located only at Waiawa CF will need to grow substantially in the coming years based on projections and thus either expansion on the existing site or elsewhere will be needed in any case.

The Kulani CF on Hawaii also plays an important role as the primary facility for sex offender treatment. Its remote location and high elevation, however, present a number of operational difficulties and extra operating costs that limit its expandability. Its remoteness also makes it very difficult for involving families on a regular basis, which is a proven important component of most viable sex offender treatment program designs. That same remoteness also makes it difficult to obtain the treatment specialists needed who currently fly over from Oahu. The location of such a treatment function would be more logical on Oahu where treatment specialists would be more readily available and where family involvement in treatment would be much more feasible.

The Women's CCC is the primary women's correctional facility for the system and thus also has important on-going supportive functions for the four CCCs that are not equipped to handle the custody needs of some female offenders. Although the facility was designed and originally operated as a juvenile correctional facility it is one of the more successful adaptations for a women's prison, due in large part to the substantial amount of indoor activity spaces that are typical for juvenile facilities. Also, the sleeping units appear to function well. Like Waiawa CF and the CCCs, however, the WCCC location on a northeast coast site is adjacent to development and



### Chapter 3 CAPITAL IMPROVEMENTS PLAN

increasing land values that could probably be sold or traded to facilitate constructing a purpose-designed women's all-custody facility on another site that has room for growth. Also, while the existing site could accommodate some growth it was reported that the local community is opposed to any capacity expansion of the WCCC. This makes for a difficult situation for the State because females continue to be the fastest growing prison subpopulation and the system's female prison capacity will require substantial growth in the coming years based on the projection results in Chapter 2.





Chapter 3  
CAPITAL IMPROVEMENTS PLAN

## Halawa Medium Security Correctional Facility



### Recommended Role and Mission:

This podular indirect supervision facility is the system's most secure prison and has the capability to manage medium as well as maximum custody inmates by design. However, due to the need for system capacity and the associated double-bunking of all operational cells, its use is and should be restricted by practice to high-medium or close custody inmates eligible for double-bunking. *In that regard and in light of the obsolescence of the adjacent Special Needs Facility the HMSCF and the entire Hawaii system are in need of a more maximum security single-bunked cells.* Land adjacent to the east end beyond the existing recreation yard could be a logical expansion site. Similarly if the adjacent Halawa Special Needs Facility is demolished as recommended that site could also be used for a new unit or facility. The HMSCF should continue as a primary general population prison for medium, high medium and close custody inmates with major prison industries and expanded treatment programs.

### Recommended Capacity by Custody Levels:

(992 operational beds)

- 992 operational beds for 744 medium security and 248 high-medium security (Module A) general population inmates in 496 double-bunked cells
- 44 temporary management beds in 44 single bunked cells for short- or long-term segregation
- 14 temporary management beds in medical infirmary

### Changes and Improvements Needed:

#### B. Still a Need Since 1991 Master Plan

1. Approximately 14,000 square feet of shell space is still available under the maximum security cell block that would be suitable for correctional industries or other inmate programs.
2. Since the advent of double-bunking at this facility the support and inmate program components have remained undersized as the original design was sized for 496



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

beds rather than 992. The use of the shell space as noted above would help this situation.

3. The armory location is still vulnerable at the base of one of the towers and should be relocated either just in or outside of the secure perimeter.
4. Visual supervision from the housing control rooms remains limited due to window design and bar grill placements.

**C. New Needs**

1. Insufficient routine and preventive maintenance and deferred repairs have increased HVAC repair frequency.
2. Roof leaks are reported and repairs are needed for some housing unit roofs.
3. The permanency of double-bunking has taxed all building systems requiring more frequent repairs and short system life cycles. The undersized dining room capacity requires unusually short dining times.
4. Attempt to recruit private sector industries to establish inside industries that would pay inmates at least close to a minimum wage. This concept has proven very successful in other state prisons and jails in making free world employment much more attainable upon release and in substantially reducing recidivism.
5. Some recreation yards observed had major cracking of the concrete floor.

**Expansion Potential and Continued Use:**

Capacity expansion of this facility would only be feasible by the addition of land as noted above with the accompanying expansion of space for support services and inmate programs. If the ground space of the existing Special Needs Facility was made available probably another 250 to 300 cells, plus support and activity spaces could be designed to fit that site. A similar expansion could probably be accommodated on additional land northeast of the recreation field. One of the benefits of expansion at the Halawa site is that rather than locating a new site and building a totally new free-standing prison the expansions could be units under the HMSCF command thus gaining some efficiencies in staffing, support services and infrastructure. Given the non-conflicting surrounding land use conditions and potential land availability at this area accommodating system growth here is likely to be much less objectionable than at a new site on Oahu. The limitation of the area's sanitary sewer capacity is likely to require a major capacity expansion at least in the collection lines, lift stations and main line feeding into the system from the Halawa site. If the cost of such was extremely high then locating another site on Oahu without such infrastructure limitations may be preferable for building new capacity rather than expansion on this site.

Due to the on-going quarry operation that involves periodic blasting on the hill above the Halawa site any new investment in expansion should be properly designed for such seismic disturbances.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

Updated Space Needs and Site Plan:

<b>HALAWA MEDIUM SECURITY CORRECTIONAL FACILITY</b> Hawaii Public Safety Department					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	21,226	22	18	4	<b>3,968</b>
Program Services	122,428	124	112	12	<b>11,904</b>
Support & Operations	90,062	91	120	(29)	<b>(28,768)</b>
Inmate Housing	111,232	112	200	(88)	<b>(87,296)</b>
<b>992 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(100,192)</b>

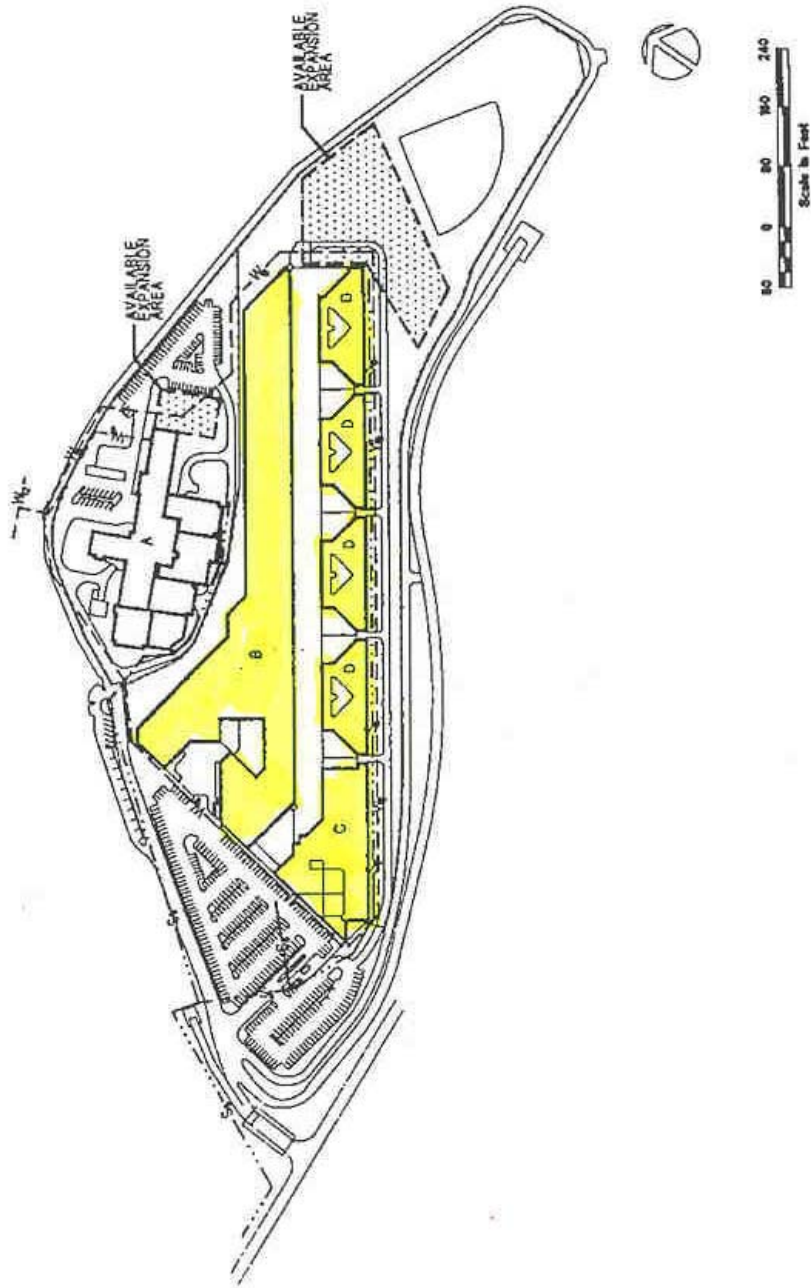
Recommendations:

- Support & Operations and Inmate Housing are both too small for the facility operating capacity. To meet recommended guidelines, Support & Operations requires an additional 28,768 GSF of area.
- Existing shell space should be considered for use by Support & Operations.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Figure 3-1  
Halawa Medium Security Correctional Facility





Chapter 3  
CAPITAL IMPROVEMENTS PLAN

### Halawa Special Needs Correctional Facility



#### Recommended Role and Mission:

This facility has exceeded its useful and cost-effective life as a correctional facility. It should be replaced by a unit or facility that is more operationally and staff efficient with some larger housing pods, plus more effective security and control conditions typical of contemporary special needs treatment facilities and maximum security facilities. This facility should be demolished once the inmates are temporarily or permanently relocated and the site should be reused for new correctional capacity if possible. As discussed under the recommendations for the HMSCF this site could either be used to either: (1) fill the support and program space needs deficits of the HMSCF and expand its capacity; or (2) build a new secure special needs treatment facility. The current functions provided by the HSNCF (mentally disordered, violent, protective custody) would be more logically split between a correctional special needs treatment facility and a maximum security unit.

#### Recommended Capacity by Custody Levels: (132 operational beds)

As demolition is recommended as soon as possible the recommended operating capacity should be used only as long as this facility must remain open as follows:

- 48 operational beds maximum custody in single-bunked cells
- 84 operational beds medium security in double-bunked cells
- 12 temporary management beds in single-bunked cells
- 0 beds temporary management medical observation/isolation

#### Changes and Improvements Needed:

This facility is recommended for closure and demolition.

##### A. Still a Need Since 1991 Master Plan:

- A. Medical area spaces are inadequate and difficult to supervise when inmates are present unless a correctional officer is immediately present.





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

- B. The cells are only large enough for single-bunking although most are double-bunked.
- C. Visual supervision capability from control rooms and cells with closed doors is totally inadequate and into dayrooms is marginal.
- D. Dayroom floor space is undersized for the number of inmates.
- E. Damaged and distorted glazing between control rooms, pedestrian sally port doors and dayrooms impairs visual supervision.
- F. Housing control room space is too small and lighting is inadequate for checking instruments/monitors and writing reports.
- G. The design of the maximum security wing and the absence of CCTV monitors does not allow control room staff to view inmates in their cells and requires officers to go to the cell to make checks, which is staff inefficient and not acceptable for high custody inmates needing continuous monitoring.
- H. The facility's vehicle entry gate lacks an interlocked sally port.
- I. The facility's parking area is not monitored from its central control room or other staff post, which should be done at any high security facility.
- J. Showers located on the lower tiers in Modules A and B cannot be visually supervised from the housing control room.

**B. New Needs:**

- 1. The cramped medical services spaces are reflective of the inability of this facility to provide a system-wide diagnostic and treatment role and capacity for special needs inmates and for any significant healthcare needs.
- 2. Reportedly the sanitary sewer system is at its maximum capacity.
- 3. Wall and floor tiles in the kitchen need repair.
- 4. The general conditions of the building and building systems are showing their age and the lack of a continuous preventive and routine maintenance program. It would appear that this facility has had a significant amount of deferred maintenance, which only increases operating cost over time.
- 5. Those cells that have an interior plumbing chase are not suitable for inmates needing a custody supervision level of high-medium or above as evidenced by a recent escape from one of those cells. From a physical security standpoint they could only be rated as medium and below due to this condition. Even then there is still an escape risk present.
- 6. Some of the cells observed lacked complete grouting in concrete joints.
- 7. The recreation yards have major cracking of the concrete floor. Reportedly this has resulted in closure of certain yards.

Expansion Potential and Continued Use:

As already discussed the HSNCF should be demolished as soon as possible and the site reused as feasible for system capacity expansion to accommodate either: (1) filling the program and support space deficits of the HMSCF and expanding its operating capacity; or (2) a new special needs treatment facility. As applicable to the Expansion Potential recommendations for the HMSCF any reuse of the Special Needs Facility site for capacity expansion would be conditioned on the area's sanitary sewer system ability to allow additional capacity in an affordable manner.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

Updated Space Needs and Site Plan:

<b>HALAWA SPECIAL NEEDS FACILITY</b> <b>Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
Component	Existing Conditions		Recommended GSF/Inmate	Surplus (Shortfall)	
	Total GSF	GSF/Bedspace		GSF/Bedspace	Total GSF
Administration	0	0	18	(18)	<b>(2376)</b>
Program Services	10,148	77	112	(35)	<b>(4,620)</b>
Support & Operations	18,948	144	120	24	<b>3,168</b>
Inmate Housing	16,272	123	200	(77)	<b>(10,164)</b>
<b>132 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(13,992)</b>

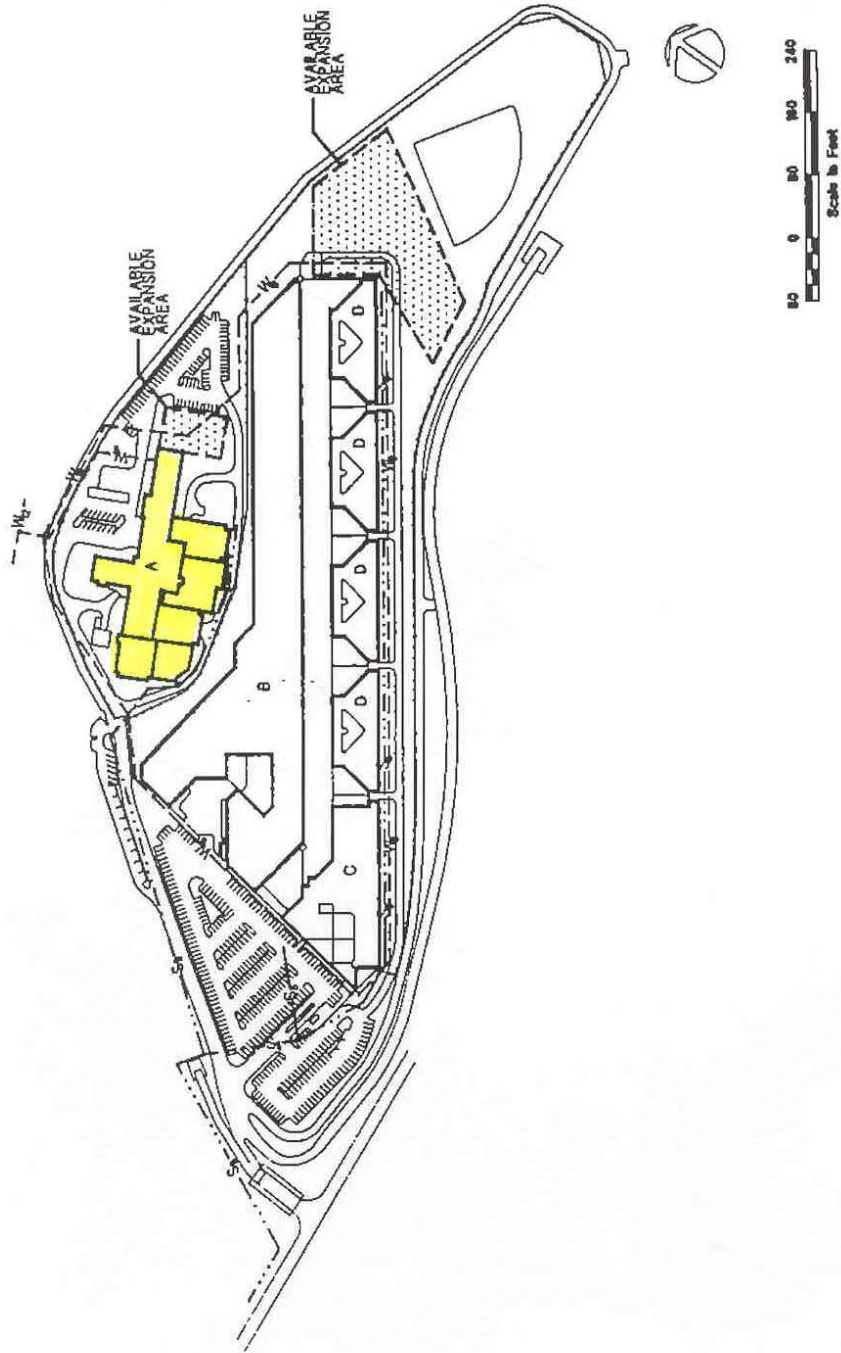
Recommendations:

- With the exception of Support & Operations, all components are undersize for the current operating capacity.
- Administration functions are centralized for this facility with those for the Halawa Medium Security Correctional Facility on contiguous property; however, at the least, a minimal satellite administrative capability should be provided locally at the SNF itself. A minimum of 2,376 GSF of space would be needed for this component.
- Because of the special needs of this inmate population, an additional 4,620 GSF of program space is required.
- The condition of this facility warrants its demolition rather than attempting to remodel and expand it for all the new spaces that would be needed to meet standards. It would be more economical to meet these needs in a new and larger special needs secure treatment facility.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Figure 3-2  
Halawa Special Needs Correctional Facility





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

### **Kulani Correctional Facility**



#### Recommended Role and Mission:

To the extent that this facility remains economical to maintain and operate it can continue to provide a viable minimum security work camp type of environment. At issue in this regard is the continuing extraordinary cost of water supply due to the facility's high elevation on the Island requiring the use of a combination of catchment reservoirs and tank trucks for hauling water during dry season. Its current function as the system's primary location for sex offender treatment is viable as long as the Department finds that appropriate treatment resources and programs can be made available at this remote location. However, reliance on this facility alone for sex offender treatment is not sufficient as it means that treatment is only provided to inmates eligible for minimum security and thus only near the end of their sentence. If sex offender treatment were also provided at another facility reducing the need at KCF it could increase its number of other general population inmates eligible for outside non-secure work assignments.

#### Recommended Capacity by Custody Levels: (160 operational beds)

- 160 operational beds minimum security in open dormitories without a secure perimeter
- 8 temporary management single-bunked holding cells
- 0 temporary management beds medical observation/isolation

#### Changes and Improvements Needed:

##### A. Still a Need Since 1991 Master Plan:

1. The medical services area remains undersized for waiting, medical supplies and pharmacy storage.
2. Inmate property storage is undersized for the population.
3. The dining hall does not have compliant access for fire escape and the surrounding locked fence is inappropriate for a minimum security facility.
4. The temporary holding cells lack a master key override.

##### B. New Needs:



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

1. The domestic water supply and sewage treatment capacities limit the expansion potential of this facility. The Department's planned replacement of existing cesspools by 2005 would allow for up to 300 inmates at this facility, but only if the equivalent of the laundry water consumption could be eliminated. Otherwise additional catchment reservoirs would be needed. Expansion could be facilitated by arranging for the HCCC to handle this facility's laundry needs.
2. The access road to Kulani is in need of resurfacing for most of its 20-mile length except for a 2-mile stretch recently repaved by inmate work crews.
3. The use of heat pumps for heating at this facility should be evaluated for the life cycle cost savings potential of conversion to another method.

Expansion Potential and Continued Use:

Due to the relative expense of providing fresh water supply to Kulani and the extra care needed for sewage treatment its expansion capability is limited. The Department should continue to monitor the extra operating cost associated with these extraordinary requirements to help determine when the benefit/cost of continued operation would suggest that a replacement facility should be constructed at another location. As noted above, if laundry could be provided remotely such as at the HCCC in Hilo expansion could be feasible for approximately 140 more beds as has been planned by the PSD. In light of the substantial growth in the system's sex offender population the addition of capacity at this facility would be helpful as long as it remains a location for sex offender treatment.

Updated Space Needs and Site Plan:

<b>KULANI CORRECTIONAL FACILITY</b> <b>Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
Component	Existing Conditions		Recommended GSF/Inmate	Surplus (Shortfall)	
	Total GSF	GSF/Bedspace		GSF/Bedspace	Total GSF
Administration	2,125	13	18	5	<b>800</b>
Program Services	26,174	164	112	52	<b>8,320</b>
Support & Operations	40,090	291	120	171	<b>27,360</b>
Inmate Housing	16,840	105	200	(95)	<b>(15,160)</b>
<b>160 Beds of Operating Capacity</b>				<b>Total:</b>	<b>21,320</b>

Recommendations:

- Facility expansion is constrained by infrastructure limitations, especially potable water supply and waste treatment capacities.
- Construction of the education building and the library has generated additional program space, which continues to be adequate for the facility.
- Even with the demolition of the old sawmill and the warehouse, sufficient support space is provided.







**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

### Waiawa Correctional Facility



#### Recommended Role and Mission:

Waiawa's current mission as the Department's primary substance abuse treatment facility is an important one especially with the growth in the variety and prevalence of substance abuse in the State. Based on the age of the buildings and infrastructure and land conversion trends nearby it would be logical to continue its status as a minimum security facility rather than considering a costly upgrading of the security level. However, at some future date it is likely that the market value for this land could make it advantageous for the State to sell the 192-acre site for private sector development and use the proceeds for funding the construction of a replacement facility. If such an opportunity emerged the Department should consider making Waiawa's replacement a medium security facility with an attached minimum unit so that more inmates could be given a treatment placement, rather than just those who are near the end of their sentence and/or qualified for minimum security.

#### Recommended Capacity by Custody Levels:

(348 operational beds, but limited to 334 until wastewater improvements made)

- 348 operational beds minimum security in open dormitories without a secure perimeter
- 2 temporary management single-bunked cells at the facility's central control
- 2 temporary management medical observation/isolation beds in one room

#### Changes and Improvements Needed:

##### A. Still a Need Since 1991 Master Plan:

1. As the original structures and some site infrastructure were built as a military reservation in the 1940s, their age and condition has deteriorated further since the 1991 study. Non-compliant fire and handicapped accessibility conditions are still widespread. Maintenance costs associated with this complex are at a relatively high level for a minimum security facility.
2. The layout of the older housing buildings makes visual supervision difficult even in a minimum security environment, which impacts overall staffing efficiency.
3. Upgrading of the sanitary sewer system would be required for any capacity expansion and to utilize the 348-bed rating instead of 334 as noted above.



**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

4. Internal roads need maintenance and repair.
5. Although the addition of the KASHBOX housing units included new electrical system additions making that area adequate the older area and buildings still need electrical system upgrading.

**B. New Needs:**

1. The 500 KVA generator is reportedly too small for the facility’s emergency power needs and is substantially corroded.
2. Maintaining separation of different inmate groups is a difficulty due to the layout of the facility, which further limits the classification and type of inmate suitable for placement here.

Expansion Potential and Continued Use:

Due to the combination of water and sewer infrastructure limits, facility age and condition, and the likely continued increasing land values and land conversion potential in this area, replacement at another site would be preferable to expansion. As noted above the sale or trade of this acreage could help pay for a new facility elsewhere that would also provide improved building designs, site layout and improved building operating and maintenance costs. In the event that this facility is not replaced for several years it is likely that significant capacity expansion would be essential to be able to accommodate more prisoners needing substance abuse treatment prior to release. Reliance on only one facility for treatment and only near the end of sentence is not adequate compared to a continuum of treatment throughout the prisoner’s stay as recommended in the 1991 master plan.

Updated Space Needs and Site Plan:

<b>WAIAWA CORRECTIONAL FACILITY Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	3,226	9	18	(9)	<b>(3,132)</b>
Program Services	8,683	25	112	(87)	<b>(30,276)</b>
Support & Operations	16,044	46	120	(74)	<b>(25,752)</b>
Inmate Housing	37,877	109	200	(91)	<b>(31,668)</b>
<b>348 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(90,828)</b>

Recommendations:

- All components are undersized with respect to minimum recommended GSF per inmate standards, and must be expanded to meet these standards. Specific additional areas

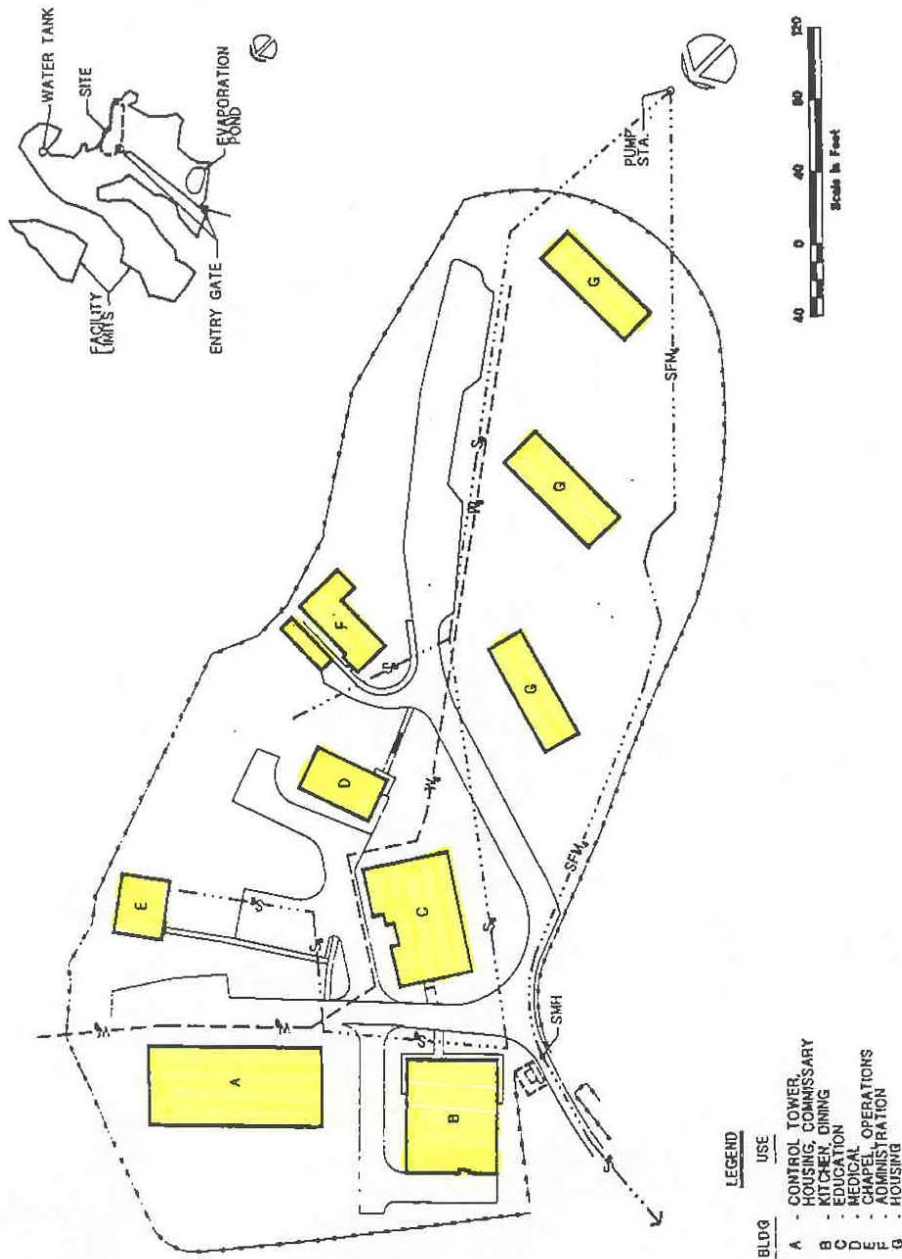


Chapter 3  
CAPITAL IMPROVEMENTS PLAN

required: Administration – 3,132 GSF; Program Services – 30,276 GSF; and Support & Operations – 25,752 GSF.

- Although there is adequate land available for expansion, infrastructure deficiencies limit growth opportunities. Infrastructure expansion/improvements would be required for any facility expansion.

Figure 3-4  
Waiawa Correctional Facility







**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

### Women's Community Correctional Center



#### Recommended Role and Mission:

As long as this site and facility are usable the WCCCs mission should essentially remain the same being the system's primary female correctional facility. Although the buildings were originally designed as a juvenile facility their adaptation as an adult female facility appears to have been relatively successful. Similar to some other PSD facilities land development and increasing land value trends in this northeast coast area could provide an opportunity for the State to sell or trade the 129-acre tract to help afford the cost of a new purpose-built women's facility on less valuable land. The design of a secure women's prison today has different requirements compared to juvenile or adult male correctional facilities and needs to include designated spaces for family-involved activities, treatment, mother/child bonding for new mothers with related daycare spaces, and a different type and level of medical clinic space. A transitional pre-release unit is also important for those who need such additional preparation prior to transfer to a CCC for community level supervision.

#### Recommended Capacity by Custody Levels:

(260 operational beds)

- 206 operational beds minimum security in seven dormitories
- 20 operational beds community/transitional security in one dormitory
- 12 operational beds maximum security in single-bunked cells for mentally disordered
- 22 operational beds maximum security in single-bunked cells (therapeutic community)
- 13 temporary management beds maximum security in single-bunked cells used for administrative and disciplinary segregation and protective custody
- 6 temporary management medical infirmary beds in 2 single cells and a 4-bed ward

#### Changes and Improvements Needed:

1. The original design as a juvenile has been adapted quite well within the structural limits of the existing buildings; however, the lack of dayroom/living room space adjacent to each sleeping dormitory is a disadvantage. If this facility is to remain as the State's principal women's correctional facility for several years to come then an indoor dayroom/living room





**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

type space should be constructed adjacent to each dorm using some of the outdoor ground space in the central courtyard of each housing building.

2. The addition of a family visitation unit with a children’s play room and an efficiency apartment type arrangement with a small kitchenette should be considered as a possible addition to this facility if it is to remain as the State’s primary women’s prison for several years. Such a unit has been shown successful in other State’s (e.g. Washington’s Gig Harbor Women’s Prison) in order to facilitate more sustained family involvement and parent/child bonding for new mothers in confinement. The placement of such a unit should be carefully located to be separated from most other housing and activity buildings. Such a unit should also be readily accessible from the front gate so that community volunteers and family members would be able to enter regularly to provide parenting counseling and babysitting assistance.

Expansion Potential and Continued Use:

Although the site appears capable of accommodating some housing expansion, the broader issue noted above regarding local land development trends and values may make the acquisition of a new site and replacement facility feasible. Also, it is reported that the local community is opposed to any capacity expansion at this site. The design of a new women’s facility would be quite different than the existing facility and would provide spaces more conducive to small group rehabilitative activities. A similar size site should be sought for a new facility.

Updated Space Needs and Site Plan:

<b>WOMEN’S COMMUNITY CORRECTIONAL CENTER (KAILUA) Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	4,104	16	20	(4)	<b>(1,040)</b>
Program Services	19,181	74	65	9	<b>2,340</b>
Support & Operations	11,830	46	70	(24)	<b>(6,240)</b>
Inmate Housing	19,682	76	165	(89)	<b>(14,685)</b>
<b>260 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(19,625)</b>

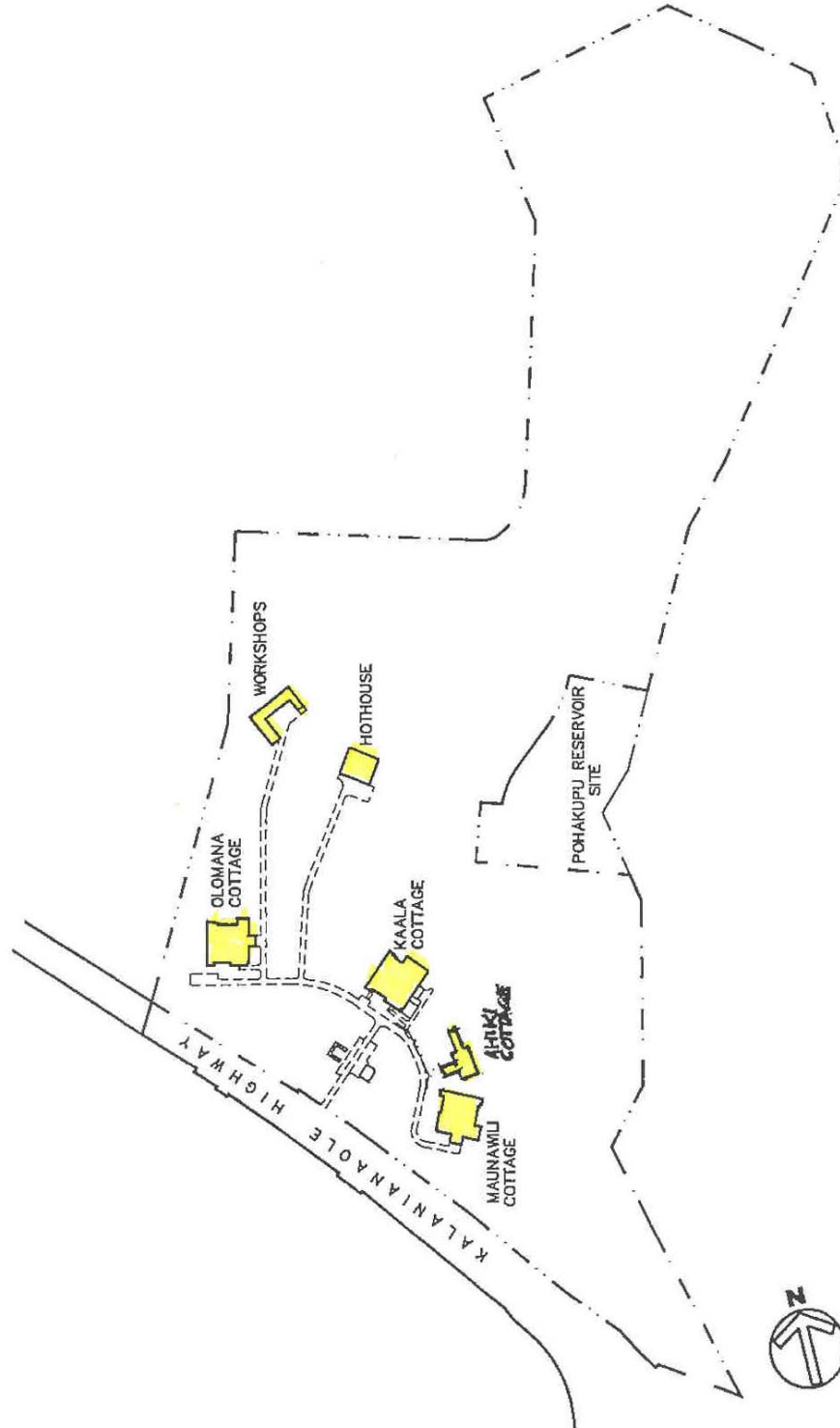
Recommendations:

- Program Services is the only component that meets recommended space standards, and Administration (1,040 GSF) is approximately 25% undersized. Support & Operations (6,240 GSF) is significantly lacking in required area.
- Addition of a family visitation unit with playroom and apartment is desirable to facilitate sustained family and parent-infant relationships.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Figure 3-5  
Women's Community Correctional Center





## **Part B – Existing Community Correctional Facilities**

### **General Findings and Long-range Outlook**

While the following sections offer recommendations on ways to improve each of the four CCCs it is the consultant's finding and general recommendation that it is time for Hawaii to embark on a phased replacement plan for all four facilities. In reviewing the findings and recommendations that follow it will be noted that the all the CCCs that were started in the mid- to late-1970s are characterized by a substantial amount of overcrowding, obsolescence, and a "patchwork" condition of various buildings of different ages and designs that collectively result in relatively high maintenance and annual building operating expense.

Staffing required in the pre-trial jail housing units is more than would be necessary with a contemporary design. The layouts have become so complicated and maze-like that safety and security is diminished as is staffing and operational efficiency, which results in more annual operating expense than needed compared to a unified multi-security detention center design. Typically, the original housing pods are very small with only 6-, 8-, or 12-beds per pod or unit. Today the design of most general population housing units in jails range from 48 to 64 beds each, which allows one housing officer to effectively supervise many more inmates. Only the maximum security and special management cells, which should be no more than 10% to 20% of the total beds needed, would tend to be in smaller units such as 24 to 32 single-bunked cells. These sizes are still far more staff efficient than the existing units that were designed to be single-bunked cells, but have been double- or triple-bunked in some cases because of overcrowding.

Another major factor to consider is the land value and adjacent conflicting land uses at three of the sites, which may result in an opportunity for the State to trade or sell the land to help reduce the cost of replacement facilities. While each CCC is somewhat different in size, shape and conditions three (Hawaii, Maui, and Oahu) are located on sites that are likely to have a much higher free market economic use value than was the case when they were first built. The Hawaii CCCs Hale Nani Work Furlough Center is located on a site separate from the main complex, which may be large enough to accommodate a new CCC campus. The fourth CCC at Kauai does not have the same adjacent urban development pressures and conflicts as the others, but is in the path of at least two or three alternate highway corridors being studied by the DOT that would require taking of at least part of the site. Also, Kauai suffers from the same state of aging, obsolescence and deterioration as the other three in addition to still having some temporary hurricane relief housing buildings that do not comply with standards. The deficiency of conditions at Kauai are very poor and although it is a much smaller facility should also be given consideration for replacement as soon as possible.

The following sections describe in more detail what the conditions, needs, potentials and recommended dispositions are for these existing facilities that must continue to carry out their county-based community corrections functions until a replacement is feasible.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

## Hawaii Community Correctional Center



### Recommended Role and Mission:

While its mission as a county-based jail, community corrections and reintegration center should be continued the conflicts with the surrounding residential neighborhood, nearby schools and churches that have grown around it will continue to be problematic. The HCCC is a “land locked” facility that needs a larger site for both current conditions and future growth. The facility should be relocated to a larger site where land use and development conflicts will not be an issue. The satellite location of the Hale Nani Work Furlough Center outside of Hilo may be feasible, but would need to be confirmed by detailed site and design studies. Also, if in the long-range a 2<sup>nd</sup> Hawaii facility in the Kona area was constructed then the future growth needs at the Hilo location would be reduced, which may make the Hale Nani site feasible in size for the main complex.

### Recommended Capacity by Custody Levels:

(226 operational beds)

- 40 operational beds minimum security in open dormitories (female unit)
- 22 operational beds maximum security in single-bunked cells
- 64 operational beds medium security in 32 double-bunked cells
- 3 temporary management beds in 2 holding cells
- 0 temporary medical observation/isolation beds
- 100 operational beds community custody in two open dormitories (Hali Nani facility)

### Changes and Improvements Needed:

#### A. Still a Need Since 1991 Master Plan:

1. The administrative offices, work stations and records storage spaces are too small for current operations.
2. The booking/intake area is too small for current operations and circulation cross traffic is still a security problem.
3. Programs, counseling, treatment and inmate activity spaces are lacking and undersized for the bed capacity.
4. The Punhele Special Needs Unit multipurpose room is now programs only and the dayroom has been converted to a sleeping area, which further detracts from daytime activity and treatment needs.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

5. The medical services storage and examination area remains undersized and waiting space is still lacking to keep those inmates separated from circulation corridors. The facility lacks temporary medical isolation/observation beds.
6. The main facility in Hilo still has no staff dining area.
7. The laundry area remains undersized for the bed capacity.
8. Storage for all needs was undersized in the original design and thus creates an even worse condition in 2003.
9. Original janitors closets are still being used for storage rather than their intended use.
10. Secure visiting for attorneys is still lacking.
11. Dayrooms continue to be used for beds to accommodate overcrowding.
12. All single-bunk cells that are not even large enough for double-bunks were double-bunked in 1991 and have been triple-bunked in 2003 making the habitual overcrowding even worse than in 1991.
13. Blind spots are still a problem fundamental to the older housing units design and layout that is an even greater security problem in 2003 due to greater overcrowding.
14. Proper custody and security separations of inmates remains impossible and is worse than in 1991 due to the degree of overcrowding.
15. The 55-bed detention unit recommended for Kona in 1991 has not been constructed.

**B. New Needs:**

1. The old Hilo Jail, storage and maintenance sheds are obsolete expensive to maintain buildings that should be demolished.
2. Handicap accessibility is extremely limited at this facility and would be expensive to bring up to full compliance.
3. Due to population growth original multi-purpose/program rooms and a recreation room have been converted to hold both dining and programs, which further detracts from the facility's programming and treatment capability.
4. The original vehicle sally port was earlier converted into a records office and now includes the transport unit, which leaves the current sally port as a very small space.
5. Some roofs and other building systems need repair or replacement.
6. In general the crowding at the main facility in Hilo is worse than was the case in 1991, which only makes the conditions for inmate management, safety, security and treatment programs effectiveness in this facility worse.

Expansion Potential and Continued Use:

The capacity needs projection for Hawaii is almost three times the facility's current operating capacity. Given the need for a substantial capacity increase the main facility of the HCCC in Hilo should be replaced at another location with a contemporary multi-security jail design. The Hale Nani Work Furlough Center just outside Hilo is a sound and effective facility that should have substantial future life and if the unused ground space at that site were found to be large enough by preliminary design studies this may be a logical location for a building a new main complex to consolidate all east County facilities.

As recommended in the 1991 master plan the idea of locating a second facility in the Kona area near the courts is even more valid today with the projected growth needs and since west Hawaii continues to be the highest growth area of the County. From a life-cycle cost standpoint the capital





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

investment in a west County facility would save the State in the long-run by eliminating the operation of daily court transport between Hilo and the courts in Kona. If this were developed as a totally new facility a turnkey design/build/finance/operate scheme could be feasible to consider, which could also serve as a test case for the concept in Hawaii.

Updated Space Needs and Site Plan:

<b>HAWAII COMMUNITY CORRECTIONAL CENTER</b>					
<b>Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	800	4	20	(16)	<b>(3,616)</b>
Program Services	2,386	11	65	(44)	<b>(9,944)</b>
Support & Operations	4,125	18	70	(52)	<b>(11,752)</b>
Inmate Housing	14,793	66	195	(129)	<b>(29,154)</b>
<b>226 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(54,466)</b>

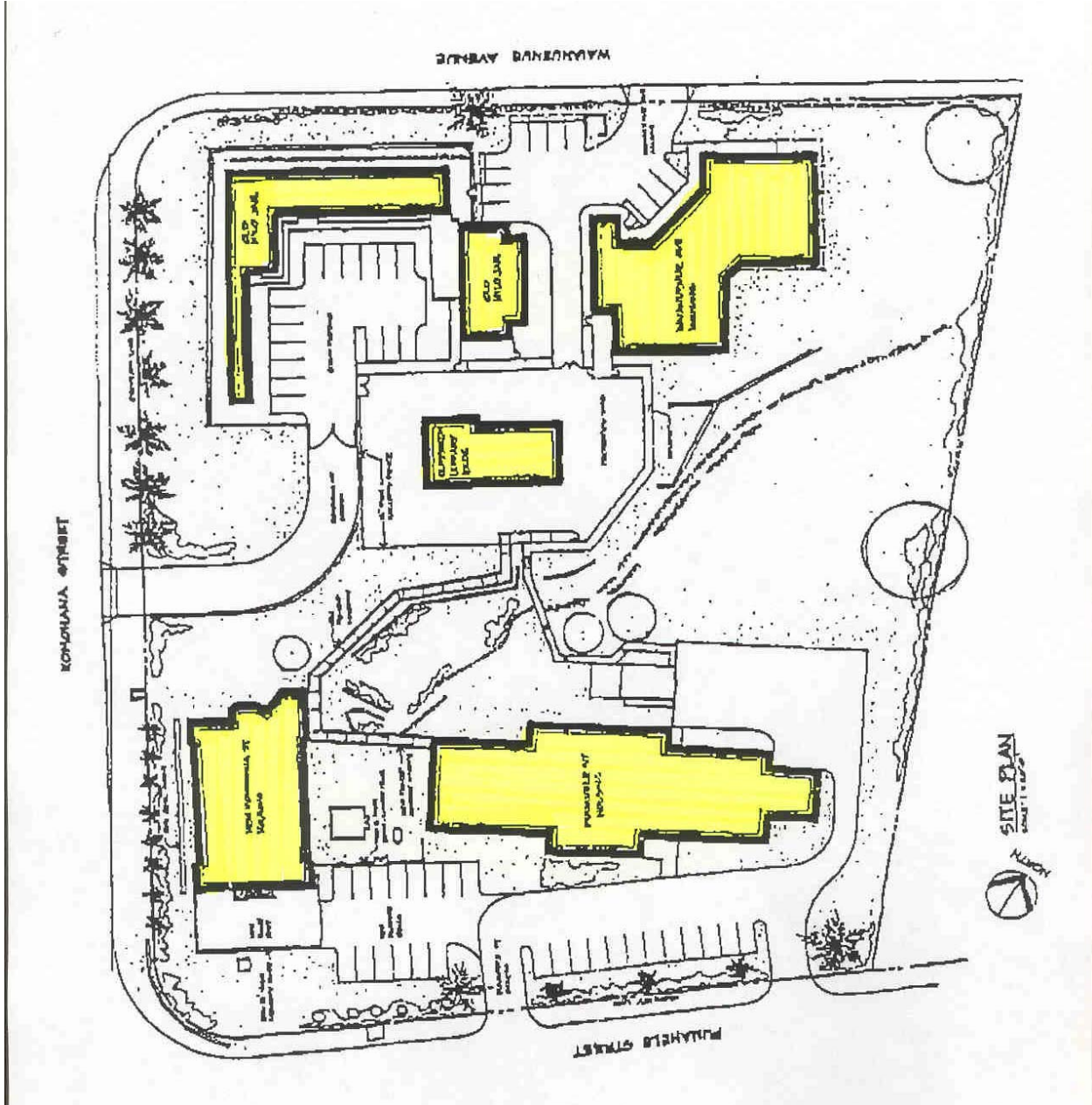
Recommendations:

- Space shortfalls for all components are even worse today than in 1991, and expansion on the present site of the main complex in Hilo is not a viable option.
- All existing components at the Hilo main complex need considerably more space to meet recommended space standards: Administration – 3,616 GSF; Program Services – 9,944 GSF; and Support & Operations – 11,752 GSF.
- Replacement of the main facility at another site would be more economical than trying to expand at the Hilo site.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Figure 3-6  
Hawaii Community Correctional Center – Hilo Main Complex







**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

### Kauai Community Correctional Center



#### Recommended Role and Mission:

The role and mission of the Kauai CCC is an important one for providing a county-based jail, community corrections and offender reintegration, which obviously needs to be continued either at its present location or in a new contemporary facility at an alternate location. Reportedly the DOT has been studying alternate highway realignment corridors that would require taking at least a part of the land currently occupied by the CCC complex. State owned land that is reportedly available adjacent to the airport would provide a convenient location that should not conflict with other land uses. More importantly much of the original design and incremental additions made over the years to cope with growth now result in a facility that is much less cost efficient to operate than a new design would be both from a staffing standpoint and from a building systems, energy management and maintenance standpoint.

#### Recommended Capacity by Custody Levels:

(128 operational beds/ average of 10 females fluctuates with no designated unit)

- 24 operational beds medium security in 12 double-bunked cells originally designed as single-bunked cells (just under ACA standard needed for unencumbered space compliance – 78 NSF instead of current 75 NSF)
- 24 operational beds low-medium security beds in six 4-bed cells
- 80 operational beds minimum security in two 40-bed dorm pods in one building
- 3 temporary management holding cells large enough to hold 8 persons total
- 0 temporary medical observation/isolation beds

#### Changes and Improvements Needed:

##### A. Still a Need Since 1991 Master Plan:

1. The facility lacks a controlled entry gate to the property.
2. Medical services and exams are still provided in a single room located between the administrative office and the intake area.
3. Holding cells originally designed for intake are now used for both segregation and temporary medical isolation.





**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

4. The reception counter at the front office is still the only physical barrier between staff and the public who enter the lobby.
5. Records and files are still overflowing into hallways and janitors closets.
6. There is no provision for non-contract visiting.
7. Proper separation by classifications is still compromised by overcrowding.

**B. New Needs:**

1. The loading dock is not secured and inmates could easily leave the facility via that area.
2. The temporary dormitories used for 1993 hurricane recovery efforts will need to be replaced with standards compliant dormitories if they are to be continued in use. These beds are not included in the recommended capacity by custody levels above.

Expansion Potential and Continued Use:

Similar to the other CCCs it is recommended that this facility be replaced with a more secure and operationally cost efficient contemporary multi-security facility. Since engineering studies by the DOT have identified part of the CCC property for a new highway corridor it is recommended that a new facility be built at another location, which also would be less complicated than trying to rebuild on the same site or even adjacent land when a new highway appears likely in any case. Although this CCC does not have the same adjacent land use conflicts from surrounding residential development as the Maui and Hawaii CCCs, the “patch-work” of buildings at this CCC are obsolete and inefficient to operate as already noted. Also, a well designed replacement facility would save the State on annual building operating and staffing costs, especially with a projected bed need that is almost twice the current operating capacity within the next 10 years.

Updated Space Needs and Site Plan:

<b>KAUAI COMMUNITY CORRECTIONAL CENTER Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
Component	Existing Conditions		Recommended GSF/Inmate	Surplus (Shortfall)	
	Total GSF	GSF/Bedspace		GSF/Bedspace	Total GSF
Administration	644	5	20	(15)	(1,920)
Program Services	3,367	26	65	(39)	(4,992)
Support & Operations	5,647	44	70	(26)	(3,328)
Inmate Housing	7,580	59	195	(136)	(17,408)
<b>128 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(27,648)</b>



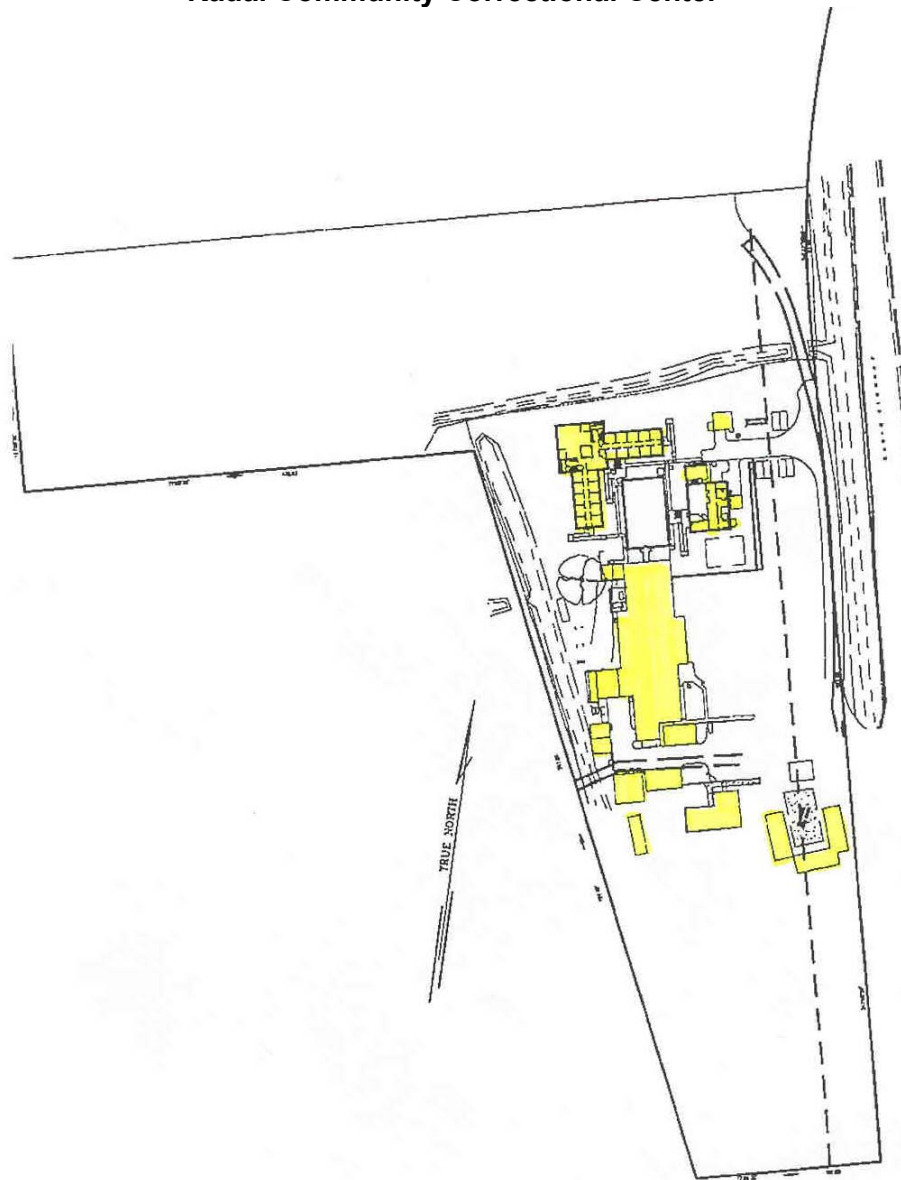


### Chapter 3 CAPITAL IMPROVEMENTS PLAN

#### Recommendations:

- The temporary hurricane housing dormitories are not code-compliant and otherwise do not meet acceptable standards. If this facility continues in operation, these modules need to be replaced. Some inmates are being triple-bunked in other housing units that are not even big enough for double-bunking.
- All non-housing components are lacking in required space as follows: Administration – 1,929 GSF; Program Services – 4,992 GSF; Support & Operations – 3,328 GSF.

Figure 3-8  
Kauai Community Correctional Center





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

### Maui Community Correctional Center



#### Recommended Role and Mission:

Like the other three CCCs the Maui CCC provides the essential jail, community corrections and prisoner reintegration functions for its county, which clearly needs to be continued. Somewhat similar to the Hawaii CCC location situation Maui is now surrounded by residential development that has created higher land conversion values than was the case when the CCC was originally located in 1978 on the grounds of the old Maui jail. Although Maui does have a useful major medium security cell housing expansion that added 102 cells in 1994 along with support spaces it appears that planning for a replacement facility at another site would be preferable when funding is available.



#### Recommended Capacity by Custody Levels: (300 operational beds)

- 14 operational beds medium security single-bunked cells (2 female units)
- 184 operational beds minimum security in seven open dormitories (32 female beds in dorms 4 and 5)
- 96 operational beds high-medium security 48 double-bunked cells
- 6 operational beds maximum security single-bunked cells
- 6 temporary management maximum security single-bunked segregation cells
- 4 temporary management holding single cells
- 0 temporary management beds medical observation/isolation

#### Changes and Improvements Needed:

##### A. Still a Need Since 1991 Master Plan:

1. The administrative offices remains crowded with overflow of materials and furniture into circulation areas.
2. Staff services areas are still lacking for dining, training and a break area. Staff toilets are available only in the public entry lobby, control room and the open air locker room, which is minimal for such this size facility with its separated buildings. The staff dining room can only accommodate 18 persons seated, which is still too small for this facility.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

3. Inmate intake processing is still done in one undersized room and an added room constructed by inmates has been used to accommodate records and property for nine years.
4. Storage space for separating clean and dirty laundry and chemicals is still undersized.
5. The control room is cramped for the various functions that it contains.
6. The same poor visual supervision condition and operating inefficiencies exists here with the prototype 1978 CCC housing unit found at all four CCCs.
7. Fire escape egress from the older housing buildings is still inadequate.

**B. New Needs:**

1. The frequency of maintenance and repair needs has reportedly increased substantially in recent years with the continued aging of the original buildings. Although the roofs had a major repair and resurfacing since 1991 several leak points were noted on the tour. As evidence of the deficient maintenance situation the facility maintenance manager submitted a list of 33 repair needs during the consultant's inspection. Some of the more notable needs included:
  - Hot water heaters inadequate and need replacement
  - Laundry capacity is undersized
  - Telephone system is overloaded
  - Either a sewage grinder or separator is needed for the lift station to prevent repeated blockages and repairs
  - Existing chillers and air handlers rust very quickly
  - Outdoor night lighting fixtures need replacement with weatherproof units
  - Sufficient plumbing shutoff valves are lacking to be able to isolate repair areas
  - PVC pipe at fire hydrants has shifted and blown off twice due to sandy soils interaction and shifting with PVC
  - The vehicle sally port gates have been damaged repeatedly due to the space being too small for garbage trucks to maneuver
  - Upstairs handicapped showers only have access by stairs
  - Storage is lacking in all departments
  - The perimeter fence mesh is severely rusted
  - Air registers too close to the ceiling are causing mold and mildew
  - Temperature control valves at showers and lavatories cannot be adjusted to deliver proper temperature
  - Shower area floors are structurally weakened in dorms 1 and 2 due to water damage.
2. The conversion of a former housing area to provide a medical services area was a drastic move that still results in very cramped spaces for this function.
3. Although the sewer and water supply systems have been improved since 1991 the fresh water supply experiences frequent periodic reductions today.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

Expansion Potential and Continued Use:

Since the 1991 master plan the Maui site has been expanded twice, first from its original two acres to 5 acres and finally to 7.5 acres with the addition of a 2.5 acre tract on its south boundary where the work furlough center was constructed. As noted above given the adjacent land development trends to higher value residential uses in conjunction with the deficiencies of this complex it is recommended that the facility be replaced at another location and that any further expansion at this site should be avoided. The facility is already operating well beyond its rated capacity, which shows in the state of recurring repair and maintenance problems. Like other counties Maui's growth projection for the next 10 years would require more than doubling its current capacity, which is not feasible at its current site.

Updated Space Needs and Site Plan:

<b>MAUI COMMUNITY CORRECTIONAL CENTER</b> Hawaii Public Safety Department					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	1,254	4	20	(16)	<b>(480)</b>
Program Services	15,186	51	65	(14)	<b>(4,200)</b>
Support & Operations	14,532	49	70	(21)	<b>(6,300)</b>
Inmate Housing	40,279	134	165	(31)	<b>(9,300)</b>
<b>300 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(20,280)</b>

Recommendations:

- All non-housing components are deficient to varying degrees: Administration – 480 GSF; Program Services – 4,200 GSF; and Support & Operations – 6,300 GSF.
- Although the space shortfall is not as great as some of the other facilities included in the study, the deteriorating condition, on-going maintenance problems and limited expansion space surrounded by residential areas makes continued use of MCCC at this location problematic.







**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

## Oahu Community Correctional Center



### Recommended Role and Mission:

Like the other three CCCs Oahu plays a key role for three critical local and State detention/ corrections functions as a county jail, community corrections center, and reintegration facility for prison inmates who will be released back on their home county. Also, like the other CCCs Oahu has a design, site layout and patch-work of additions, even on separated parcels, that make its operation relatively costly for both annual staffing and building operational costs, and is not as safe and secure as a contemporary multi-security facility design would be. While these functions obviously need to continue the long-term viability of this complex at this site is questionable in light of the likelihood of a higher and better free market economic use of the land in addition to its correctional operations shortcomings and lack of expansion space. A new site that could accommodate all three correctional functions together would be preferable and may be affordable, especially if the existing site were sold to the private sector to help offset the cost of a new facility. Alternately, a site close to the County court building would be ideal for pre-trial detention and low custody community-based housing units could be located elsewhere on lower cost land.

### Recommended Capacity by Custody Levels:

(954 operational beds)

- 516 operational beds medium security in double-bunked cells in 11 pods
- 80 operational beds minimum security in two joined 40-bed open dormitories (female unit)
- 114 operational beds minimum security in a 3-level structure of three dormitories
- 50 operational beds minimum security in one dormitory (Annex 1)
- 24 operational beds minimum security in one dormitory
- 24 operational beds minimum and community custody in a two joined open dormitories
- 50 operational beds community custody in one dormitory
- 96 operational beds community custody work furlough in three 32-bed dormitories (remote site)
- 36 temporary management holding cells
- 3 temporary management medical beds in one ward



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

Changes and Improvements Needed:

A. Still a Need Since 1991 Master Plan:

1. Records storage and the administrative office areas remain overcrowded.
2. Executive staff offices still lack enough space for small group meetings.
3. Housing unit laundry areas remain undersized.
4. Counseling rooms only accommodate individual counseling and are not large enough for small group counseling.
5. Intake and release of inmates are still managed in the same area and both functions still share the same holding cells.
6. Male and female inmates still cannot be separated in the infirmary.
7. The medical clinic waiting area remains too small.
8. The non-contact visiting booths still cannot be properly supervised by one officer remaining at a fixed post.
9. Cells designed for single bunking are either double- or triple-bunked.
10. The dining room is still undersized at half the current population.
11. The dayrooms are undersized for the current operating capacity.
12. Pre-trial inmates are still confined with sentenced inmates.
13. The intercoms in housing areas still do not work properly.
14. A recommended new administration has still not been constructed.

B. New Needs:

1. Community custody beds have been triple-bunked in dorm spaces that should only be double-bunked.
2. The areas of recent escapes were not visible from the facility's towers.
3. The room used for video arraignments is too small.
4. The five non-contact booths are not an adequate number for this size pre-trial unit.
5. The maximum capacity of 27 inmates at one time in contact visitation is undersized for a facility this size.
6. The medical records area is out of space.

Expansion Potential and Continued Use:

As already noted this facility should not be expanded and its fair market value may provide a significant contribution towards the cost of a new facility. Over the next 10 years Oahu is projected to need twice the capacity that this facility can currently provide. It is recommended to be replaced at a new Honolulu area site, ideally close to the County court building. If such a central area site is not financially feasible to accommodate the entire system the location of all pre-trial, special needs and high security housing should be prioritized for a location close to the court building. The other community-based housing units could be developed on a lower cost site elsewhere.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

Updated Space Needs and Site Plan:

<b>OAHU COMMUNITY CORRECTIONAL CENTER Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	6,910	7	20	(13)	<b>(12,402)</b>
Program Services	50,270	53	65	(12)	<b>(11,448)</b>
Support & Operations	61,870	65	70	(5)	<b>(4,770)</b>
Inmate Housing	71,384	75	165	(90)	<b>(85,860)</b>
<b>954 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(114,480)</b>

Recommendations:

- All components are deficient in meeting the recommended space standards. Support & Operations is the least deficient (4,770 GSF), but Program Services (11,448 GSF) and Administration (12,402 GSF) require additional space to meet standards.
- The original design of the facility, as well as subsequent additions, created a site layout that inhibits visual surveillance from the towers as well as on the ground, which compromises security.
- The facility is landlocked, making it unsuitable for necessary support space additions as well as meeting future growth needs.
- A centralized health care unit to provide direct support of Oahu facilities is a useful idea that has been proposed in the past. Since the Honolulu and Oahu County will continue to need the largest correctional capacity in the Hawaii system its sheer size warrants more substantial support, treatment and program spaces than any single facility.





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

## RECOMMENDED CAPACITY PLANNING GUIDELINES

### Net Projected Bed Capacity Needs

Table 3-1 summarizes the net shortfall in bed spaces in the Hawaii system by gender and general facility categories projected for 2004 through 2013. The projections used are from the recommended model in Chapter 2 of this master plan update and the 2003 Operational Capacities used are from the recommended capacity for each of the State's nine existing facilities as specified in the previous section of this Chapter.

Table 3-1  
**Projected Operational Bed Capacity Shortfall**

Category of Beds	2003 Existing Facilities Operational Capacities	Operational Bed Shortfall by Existing Capacity & Bed Projection									
		2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Males</b>											
Correctional Facilities	1,500	1,969	2,125	2,281	2,437	2,593	2,749	2,905	3,062	3,218	3,374
Community Correctional Facilities	1,432	858	916	973	1,031	1,089	1,147	1,205	1,267	1,330	1,393
<b>Females</b>											
Correctional Facilities	260	163	191	219	247	275	304	332	361	391	420
Community Correctional Facilities	177	224	242	261	280	299	317	336	356	375	395
<b>All Inmates</b>											
Correctional Facilities	1,760	2,132	2,316	2,500	2,685	2,869	3,053	3,237	3,423	3,608	3,794
Community Correctional Facilities	1,609	1,082	1,158	1,234	1,311	1,387	1,464	1,541	1,623	1,705	1,787
<b>Total All Facilities</b>	<b>3,369</b>	<b>3,214</b>	<b>3,474</b>	<b>3,735</b>	<b>3,995</b>	<b>4,256</b>	<b>4,517</b>	<b>4,779</b>	<b>5,046</b>	<b>5,313</b>	<b>5,582</b>

Note: The above shortfall computations are based on Operational Bed Projections, which add a 5% classification separation factor to the population projections for correctional facilities and the same plus an actual peaking factor average found for community correctional facilities.

Source: Projections and capacity ratings by Carter Goble Associates, Inc., October 2003.

It should be noted that the 2003 operational capacities recommended in this chapter and used in Table 3-1 are taken from the PSDs Capacity Study with some limited modifications by CGA for strict compliance with ACA sleeping area sizes. Clearly the State has a substantial need for correctional bed capacity. While the approximate 1,400 Hawaii Prisoners held in mainland facilities represent the largest amount of need there were another 745 prisoners held in-state in 2003 in overcrowded conditions. This computation is based on a PSD "End of Month Population Report" for September 30, 2003, which gave a current system "head count" of 4,114 inmates.

As suggested near the end of Chapter 2 a two-part planning horizon is proposed that uses the years 2008 and 2013 for the phasing of the expansions needed for the entire 10-year projection period. The total bed needs projection from Chapter 2 yields a net need by 2008 for 4,256 more beds than current operating capacity and 5,582 beds more than the 2003 operating capacity by 2013 by deducting the existing capacities shown in the 2<sup>nd</sup> column of Table 3-1. As noted at the bottom of the table the difference between the Chapter 2 Population Projection and the Operational





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

Bed Projection focused on for planning purposes is in the addition of a 5% classification separation factor for all facilities, plus the addition of an average peaking factor for all four CCCs.<sup>2</sup>

### Prisons

The Bed Projections will be used for the 10-year master plan update, but the Chapter 2 population projections may also be useful for comparisons with actual head count results in future years. The next step is to apply a custody/security level breakdown by gender and general facility type. To do so a 3-year sample of the PSD "assigned count" by security level for males and females in prison was obtained for 2001, 2002 and 2003. The consultant used this data in conjunction with recent samples of 11 other mainland systems and recommends the custody ratios as noted in Table 3-2 for use in this master plan.

Table 3-2  
**Recommended Prison Planning Security Distribution Ratios**  
(percentage of classified population)

<b>Prison Custody Group</b>	<b>6-State Average – Sm.</b>	<b>5-State Average – Med.</b>	<b>Hawaii 2001-03 Average</b>	<b>Recommended for Master Plan</b>
<b>Males</b>				
▪ Super Max	.9	2.3	0	0
▪ Maximum	6.8	6.2	1	2
▪ Close	21.1	11.3	5	5
▪ Medium	48.4	30.7	44	40
▪ Minimum	22.8	49.5	43	43
▪ Community	0	0	7	10
<b>Females</b>				
▪ Super Max	5	.3	0	0
▪ Maximum	5.2	3.8	1	1
▪ Close	10.2	5	1	1
▪ Medium	45.3	28	44	36
▪ Minimum	34.3	62.9	26	32
▪ Community	0	0	28	30

Source: Hawaii PSD and Directory Adult and Juvenile, American Correctional Association, 2002 issue for five medium systems and 2003 issue for five small systems, February 2002 and February 2003 respectively. The six small systems included Alaska, Maine, Minnesota, Nebraska, Utah and West Virginia and the five medium systems included Georgia, Missouri, Oklahoma, South Carolina and Tennessee.

In addition to the 5- and 6-state comparative distributions in Table 3-2 the consultant also examined 2000 data for the six smaller systems as provided in the 2001 Corrections Yearbook. In this

<sup>2</sup> The classification factor allows for adequate extra beds needed for custody separations within each gender for both prisons and jails. The peaking factor is applied only to the CCCs due to their jail function which typically has peaks each month and sometimes weekly as born out by historic monthly headcount data analyzed for each CCC.



**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

tabulation community corrections allocations were reported that ranged from 2% to 11%. Also, the medium and minimum custody distributions averaged 47% and 24% respectively. This data base was not used any further, however, as it did not provide breakdowns by gender.

**Community Corrections Centers**

Table 3-3 provides recommended custody distribution ratios for the four CCCs, and the jail component of the WCCC which are quite different from the prisons since they provide: (1) pre-trial detention; (2) confinement for misdemeanor offenders sentenced to “local time” instead of prison; (3) outside work crew assignments for eligible inmates; and (4) community-based work furlough for prison inmates near the end of their sentence. *While this reflects current practice and historic data it is recommended that a shift should be made eventually to keep all jail/detention functions in the CCCs and retain all prison functions in the CFs. This would primarily affect the WCCC since it currently has some mixed functions with some inmates performing daytime work in community (from one 20-bed dorm). In this 10-year plan the future growth recommendations will provide for all community custody functions to be located at the CCCs, just as all male felons are currently transferred to CCC work furlough units when they have a year or less prior to release. In the consultant’s experience this is an important and effective pre-release/transitional component of a correctional system and has been proven to reduce failure rates compared to inmates being released directly from high security facilities. Achieving this goal will require enhancing the capacity and capabilities of the CCCs and at the same time free up valuable CF beds.*

**Table 3-3  
Recommended CCC Planning Security Distribution Ratios**  
(percent of classified population)

CCC Custody Group	Oct. 2003 Average All CCCs		Recommended for Master Plan	
	Male	Female	Male	Female
<b>Four CCCs</b>				
▪ Maximum	.6	0	5	4
▪ Close	.2	0	5	4
▪ Medium	36.5 - 48	23 - 27	40	25
▪ Minimum	27 - 40	23 - 56	25	27
▪ Community	22.7 – 25	17 - 54	25	40

Note: In addition to the single-bunked cells for operating capacity a 5% addition of single-bunked cells for special management is also recommended.  
Source: PSD database October 2003 with recommended allocations by CGA, Inc., October 2003.

Currently the PSD classifies all pre-trial detainees as medium custody. This, however, usually results in an over-classification and the use of higher cost medium security space that is not needed for all pre-trial detainees. The recent system averages shown in the table are taken from the PSD database of monthly population reports both by custody levels and offender category (i.e. sentenced felon-probation, pre-trial misdemeanor, pre-trial felon, etc.). Table 3-3 recommends a



new custody group breakdown for jails (CCCs) that would be applied to help determine the amount of new beds needed in different security construction levels.

### **Security and Custody Level Ratios**

The American Correctional Association 3<sup>rd</sup> Edition Standards for Adult Local Detention Facilities recommend that 1/3 of all beds in a detention facility should be in single-bunked cells and that medium custody inmates housed in multiple occupancy cells or rooms require “direct supervision.” Some states have adopted the ACA standards verbatim like New Jersey and others have something similar like Virginia, which is even stricter with a 50% single-bunk cell requirement. In the consultant’s experience the use of such standards need to be applied with care on a case-by-case basis in light of the actual custody and security conditions that are somewhat unique in each environment. As Hawaii has managed its populations for some time without a substantial number of single bunked cells a smaller ratio would be suitable, especially if a provision is added at all facilities for a 5% ratio of special management single-bunked cells in addition to a limited number for the general populations as suggested in Tables 3-2 for the CFs and 3-3 for the CCCs

In the case of Hawaii’s CCCs the historical data bears this out and consequently a lower ratio of single-bunked cells and double-bunked cells should be feasible along with a significant amount of minimum security dormitories. As a rule in most jails approximately 90% of all pre-trial misdemeanants are non-violent and usually qualify for a minimum custody dormitory. The other 10% will need either a single-bunked or double-bunked cell, either permanently or temporarily (in a special management cell) depending on their ability to adjust their behavior for congregate living.

For pre-trial felons, approximately 90% should be given a double-bunked medium security cell and the remaining 10% will require a single-bunked maximum security cell. Part of this need would be handled by a recommended 5% additive of single-bunked cells included to provide a sufficient number of temporary management beds (not part of the operational bed count) for administrative segregation, disciplinary segregation, protective custody, temporary special observation and medical observation/recuperation. These general guidelines for CCCs along with the previously described prison security ratios will be used in developing recommendations for both facility expansions and new facilities.

### **Special Needs Offenders and Treatment Needs**

In addition to a general population of males and females correctional and detention facilities also need to accommodate a variety of “special needs” inmates who require special custody, diagnostic and treatment services either temporarily or throughout their prison term. Special needs populations include those with a substance abuse dependency, the mentally disordered, developmentally disabled, sex offenders, and those with co-occurring substance abuse and mental disorders. Based on prevalence studies elsewhere and data from the Hawaii system it can be expected that up to 10% of the corrections population at any one time could have severe and/or chronic mental disorders. Statistically a majority of these individuals are also likely to have co-occurring substance abuse disorders. Another 15% to 20% will be likely to require some form of psychiatric intervention during their confinement. Probably one of the most troublesome statistics is that criminal offenders who have mental disorders tend to have recidivism rates that exceed 70%.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

Substance abuse and dependency alone has become commonplace among most jail and prison populations today. In Hawaii for fiscal year 2003 the PSD reports that by operational assignment it has 230 "level III" substance abuse treatment beds for males and 50 for females and another 106 "level II" treatment beds for males and 38 for females. During FY 2003 alone a total of 591 males and 103 females were assessed as needing "Level III" treatment and another 136 males and 10 females needing "Level II" treatment. Understandably due to capacity limits the PSD provides treatment only near the end of an inmate's sentence. While end-of-stay transitional treatment is critical in any case it does not provide the comprehensive level of sustained treatment throughout and inmates prison term that has been proven to be more effective than either end of stay or periodic treatment. Greater treatment capacity is clearly needed.

As previously discussed the Halawa Special Needs CF is totally inadequate and obsolete as a special needs treatment facility or as a high security facility. Moreover, the facility does not provide adequate space for meeting healthcare needs of any type of prisoner. Also, the Kulani CF, which is the system's only sex offender treatment facility is an open minimum custody work camp environment, which is not acceptable for those needing a higher level of security confinement. Also, Kulani's capacity is currently limited to 160 inmates until planned water and sewer capacity expansions are made. With a sex offender population that grew from 275 males in April 1992 to 671 by 2001 and 677 as of October 2003 the need for a higher security level treatment facility is obvious.

In light of these realities it is important that today's correctional facilities be designed and equipped to handle such offenders who unfortunately have become commonplace in detention and correctional facilities. To do so it is recommended that approximately 10% of each CCCs operational housing capacity be planned as a special needs pod or unit and that the same ratio of prison system operational capacity be provided in a dedicated special needs facility. In addition to those needing temporary or long-term assignment in a special needs or high security facility, the majority of offenders with substance abuse treatment needs should still be able to receive treatment while they live in a general population unit at any CF or CCC.

A true dedicated treatment facility must provide treatment designs that are intended to help the vast majority of inmates to become capable of living in a general population prison rather than expecting that they should remain in a special needs facility for their entire stay. Experience has proven that even those offenders with a significant mental disorder can be treated with a combination of medications and behavioral management education and training that will enable them to successfully co-exist in a general population facility. Only in this way will the dedicated special needs treatment facility be able to continually make bed space available for both relapse cases and for new arrivals who need specialized treatment before they are ready for a general population CF or CCC.

### **Two-Phase 10-Year Planning Term and Capacity Targets**

As already noted a 10-year planning term was requested by the PSD for this update. Also, as suggested earlier the consultant has recommended that the 10-year term be broken into two 5-year planning, design and construction phases. The specific end years of each phase at 2008 and 2013 thus allow up to approximately five years for all adopted projects to be completed within each phase. For completely new facilities each 5-year term is intended to allow for up to two years to



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

complete site selection studies/acquisition if needed, detailed facility planning and design and the subsequent three years for construction completion and move-in. In the case of expansion for existing facilities a shorter term of up to three years should be feasible allowing one year to complete planning and design and up to two years for construction completion.

Using the Net Bed Need Projections from Table 3-1 and the *existing system* security allocation ratios provides the resulting computations for added new beds by security level that would be needed for each of the two proposed development phases of 2008 and 2013. The calculated number of new added beds needed assume the existing rated operational capacities as found in October 2003 and used in the previous tables. *It is important to remember that these numbers are not yet the numbers of recommended beds rather what would be under current security level allocations.. The eventual recommendations for new beds and facilities must be a rational plan that accounts for the additional variables of existing facility conditions, obsolescence, overcrowding, land economics, and the totality of needs and opportunities for a comprehensive correctional system. The recommended security level ratios of Tables 3-2 and 3-3 will be used for the recommended plans*

The security level ratios used in Table 3-4, which follows are based on PSD historic records. Since the same data was not available for the CCCs as for the CFs an estimate was developed based on the system's current practice. To do so for the CCCs the following correlations were used with PSD historic data for the annual average head counts found for fiscal year 2002-2003. In all cases it is also assumed that all CCCs have or will have a secure perimeter building wall and/or fence system that will deter escape, irrespective of an inmate's type of housing and location inside the facility.

- Medium security = pre-trial felons, inmates from other jurisdictions and ½ of all probation and parole violators
- Minimum security = sentenced felon-probation, ½ of all sentenced misdemeanants, pre-trial misdemeanants, and ½ of all parole and probation violators
- Community Custody = sentenced felons (presumed to have completed incarceration in a CF and are in a transitional status preparing for release), and ½ of all sentenced misdemeanants

The new added target number of beds needed are distributed by general facility type and gender for the recommended Phase 1 planning horizon of 2008 and Phase 2 by 2013. As noted at the bottom of the table a major shift in the allocation of community custody beds is made by the formulas used which deletes community custody as a category from CFs and allocates that entire custody level to the CCCs. This reflects the reality that State prison inmates who are transferred to the CCC in their county of release approximately one year before their scheduled release are in fact in the custody and full-time supervision of the CCCs not the CFs. PSD data records currently count those inmates as prison system inmates even though they are assigned to community level housing at a CCC. While this may be a legal requirement, it does not relate to the actual location where capacity needs to be planned and thus at least for this master plan update those needs must be accurate with respect to the county location.

The Table 3-4 projections do not represent a "recommended or planned allocation" but rather simply a simulation of what would happen if allocations were made by the existing capacity constrained placements. In other words the results will reflect total need under the current system conditions, but not what would be a more ideal allocation by security level in line with the ratio guidelines recommended in Tables 3-2 and 3-3.





**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

**Table 3-4  
Projected Total Beds Needed by Phase and Security Level  
(Using Existing Security Levels NOT Recommended Ratios)**

Type Facility	Phase 1 - 2008 Total Beds Needed							
	Operational Beds						Special Mgt. Beds @ 5%	Totals
	Maximum	Close	Medium	Minimum	Community	Totals		
<b>Correctional Facilities</b>								
Males	205	82	1637	1760	0	3,684	184	3,868
Females	5	5	193	171	0	375	19	394
<b>CF Totals</b>	<b>210</b>	<b>87</b>	<b>1,830</b>	<b>1,931</b>	<b>0</b>	<b>4,059</b>	<b>203</b>	<b>4,262</b>
<b>Community Corr. Facilities</b>								
Hawaii - male	4	4	196	111	161	476	24	500
Hawaii - female	0	0	27	27	76	130	6	136
Kauai - male	2	2	87	49	70	210	10	220
Kauai - female	0	0	14	14	39	68	3	72
Maui - male	5	5	243	137	181	572	29	601
Maui - female	0	0	29	29	81	140	7	147
Oahu - male	14	14	634	358	653	1,672	84	1,755
Oahu - female	0	0	50	51	197	298	15	313
<b>Male Totals</b>	<b>25</b>	<b>25</b>	<b>1,160</b>	<b>655</b>	<b>1,065</b>	<b>2,930</b>	<b>147</b>	<b>3,077</b>
<b>Female Totals</b>	<b>1</b>	<b>1</b>	<b>121</b>	<b>122</b>	<b>393</b>	<b>636</b>	<b>32</b>	<b>668</b>
<b>CCC Totals</b>	<b>26</b>	<b>26</b>	<b>1,280</b>	<b>777</b>	<b>1,458</b>	<b>3,566</b>	<b>178</b>	<b>3,745</b>
<b>GRAND TOTALS</b>	<b>236</b>	<b>113</b>	<b>3,110</b>	<b>2,709</b>	<b>1,458</b>	<b>7,625</b>	<b>381</b>	<b>8,006</b>
Type Facility	Phase 2 - 2013 Additional Beds Needed							
	Operational Beds						Special Mgt. Beds @ 5%	Totals
	Maximum	Close	Medium	Minimum	Community	Totals		
<b>Correctional Facilities</b>								
Males	39	16	312	336	0	702	35	738
Females	1	1	52	46	0	101	5	106
<b>CF Totals</b>	<b>40</b>	<b>17</b>	<b>364</b>	<b>382</b>	<b>0</b>	<b>804</b>	<b>40</b>	<b>844</b>
<b>Community Corr. Facilities</b>								
Hawaii - male	1	1	43	24	34	104	5	109
Hawaii - female	0	0	5	5	18	28	1	30
Kauai - male	0	0	13	7	12	32	2	34
Kauai - female	0	0	4	4	11	18	1	19
Maui - male	1	1	38	21	30	91	5	96
Maui - female	0	0	8	8	23	40	2	42
Oahu - male	1	1	46	26	81	155	8	163
Oahu - female	0	0	5	5	42	53	3	56
<b>Male Totals</b>	<b>3</b>	<b>3</b>	<b>140</b>	<b>79</b>	<b>157</b>	<b>382</b>	<b>19</b>	<b>401</b>
<b>Female Totals</b>	<b>0</b>	<b>0</b>	<b>23</b>	<b>23</b>	<b>94</b>	<b>140</b>	<b>7</b>	<b>147</b>
<b>CCC Totals</b>	<b>3</b>	<b>3</b>	<b>162</b>	<b>102</b>	<b>252</b>	<b>521</b>	<b>26</b>	<b>548</b>
<b>GRAND TOTALS</b>	<b>44</b>	<b>20</b>	<b>527</b>	<b>484</b>	<b>252</b>	<b>1,325</b>	<b>66</b>	<b>1,392</b>

Note: A shift of all projected CF community custody beds shown in Table 2-18 was made here to instead allocate them to the CCCs since those transitional pre-release inmates should all be housed and managed at the CCCs, except for a small retained unit at the WCCC..

Source: Carter Goble Associates, Inc., October 2003

*As noted in the text just before the table, it is important to remember that the above 5- and 10-year projection results should be viewed as a "what if" scenario to see what recent historic security levels would yield if continued. That outcome, however, is very much a function of the overcrowding condition of the entire system and thus should not be considered as an ideal to be continued. It*



### Chapter 3 CAPITAL IMPROVEMENTS PLAN

*does suggest though that the Hawaii system and obviously dedicated professional staff have shown an ability to manage inmates safely with far fewer maximum security cells than many systems.*

For this master plan the actual number of recommended beds to be added will differ from the Table 3-4 scenario based on logical facility and housing unit sizing schemes and recommended improved security ratio allocations. The new recommended distribution to create a higher number of single-bunked cells, especially for CCCs, will be in line with the recommended security level ratios as shown in Tables 3-2 for CFs and 3-3 for CCCs. The following section will recommend expansions for selected existing facilities and the construction of new facilities over the 10-year planning and implementation period using the total projected new bed needs for each phase as general targets.

## RECOMMENDED 10-YEAR CAPITAL IMPROVEMENTS GROWTH PLAN

### Overall Strategy

From the Chapter 2 capacity needs projections and the preceding existing facilities assessments and improvement recommendations it is clear that the Hawaii correctional system is in need of a major expansion just to meet existing needs let alone projected future growth. Furthermore, the return the 1,400+ Hawaii inmates currently housed in mainland prisons was given as a master plan goal by the PSD at the start of this planning effort. Compounding the situation at the same time for the various reasons and conditions as previously described several of the facilities need to be replaced and several are either not physically capable of or are not financially infeasible for expansion. Thus a combination of major facility expansions and replacements with totally new correctional facilities (CFs) and community correctional centers (CCCs) will be needed. The recommended expansions and new facilities will be phased over the 10-year term to correspond to the timing of need so that new capacity is on-line when needed but not so early as to incur significant vacancies and so that the multiple projects could be financed over several years rather than all at once.

The most prevalent deficiencies found were: (1) lack of sufficient preventive and routine maintenance and timely repairs leading to added building and infrastructure deterioration and higher operating costs; (2) surrounding land development with higher value land conversions and in several cases blocking CF or CCC site expansions; (3) obsolete and operationally inefficient correctional space designs and layouts; and (4) inadequate spatial conditions that limit staffing efficiency and effective security and inmate supervision. Resolving these needs will require a combination of expanding those existing facilities worth retaining, making some interim or short-term capacity additions, and building some entirely new facilities. A capacity growth plan scheduled to meet the projected 10-year bed needs should include the following expansion components:

#### 1. Expand Existing Facilities for Long-range Use

- Halawa Medium Security CF
- Kulani CF



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

2. Expand Existing Facilities in Phase 1 2004-2008 for Short-term or Temporary Use (unless recommended total replacements can be made before the end of Phase 2)
  - Waiawa CF
  - Women's CCC
  
3. Build New Facilities in Phases 1 and 2 Over 10 years – 2004-2013
  - Build a new Secure Special Needs Treatment CF – Phase 1
  - Demolish Halawa Special Needs CF – Phase 1
  - Replace Kauai, Maui and Oahu CCCs – Phase 1
  - Build new West Hawaii CC in Kona – Phase 1
  - Replace Hawaii CCC (except Hale Nani WFC) – Phase 2
  - Replace Waiawa CF – Phase 2
  - Replace Women's CCC – Phase 2
  - Build a new medium security CF – Phase 2
  - Build two new minimum security CFs – Phase 2
  
4. Development Option of CF Correctional Complex on One Site on Oahu (instead of six sites)
  - To contain: New Special Needs Treatment CF; WCF replacement; WCCC replacement; new medium security CF; 2 new minimum security CFs; central production kitchen, RAD/Intake unit, medical clinic and warehousing.

Implementing this strategy plan will obviously require major capital investment, which if scheduled in two phases over 10 years would be less demanding financially than attempting to fix everything at once or continuously.

**Scheduling** – A 10-year incremental expansion plan is recommended using the two 5-year completion horizons of 2008 and 2013 as previously discussed for the general capacity needs targets to be on-line by the end years of those two terms. As explained earlier each 5-year term would allow as much as two years for completing planning, site selection and design and up to the following three years for completing construction. While some elements of the plan, especially expansions, would certainly be able to be completed more quickly (two to three years), these two terms should allow sufficient time for both site and environmental studies and acquisition where needed and a conventional design/bid/build delivery method for any large expansions or entirely new facilities on new sites.

Some methods such as a turnkey design/build/finance procurement or design-build/construction manage at-risk could possibly speed up the time, but in the consultant's experience it is best to at least plan for a conventional approach, which would likely be the most time consuming. Also, if a privatization scheme was considered for any new facility that approach could also result in a quicker delivery time in addition to a shift of the State's cost burden from capital project funding to annual operating expense via contracted per diem payments per prisoner housed.

**Master Planning Concept Guidelines** – For a system-level master plan, as compared to individual facility planning and architectural programming broad general estimators must be used such as those that were used in the 1991 master plan. For this master plan update the gross square foot



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

per bed estimators used in 1991 are also used herein along with others as shown in Appendix A in detail and summarized as follows:

- Housing Expansions = 200 SF/single cell, 130 SF/double bunk cell, 200 SF/dorm bed
- New Correctional Facilities = 450 SF/single cell, 350 SF/double bunk cell, 300 SF/dorm bed
- New CCCs = 350 SF/single cell, 250 SF/double bunk cell, 250 SF/dorm bed
- Bed security level conditions:
  1. Maximum security – single-bunked cells (needed for both general population capacity and for non operating capacity special management cells)
  2. Close custody – single- or double-bunked cells depending on custody needs and physical security conditions available. Such cells should be a minimum of 80 NSF so that both double-bunking and/or 23-hour single-bunk confinement is suitable when needed within ACA space standards.
  3. Medium security – double-bunked cells
  4. Low-medium security – multiple occupancy dormitories with fixed privacy partitions for every four inmates with the same medium security outer wall construction as a medium security cell unit, but with no cell fronts.
  5. Minimum to low-medium security – multi-occupancy dormitories with privacy partitions (with or without a security perimeter fence or building envelope)
  6. Community security – multi-occupancy dormitories with or without privacy partitions and less heavy construction than a minimum security dormitory (usually without a confining security perimeter) that could be at a CCC site or located separately in the community.
  7. Community residential – non-secure residential small group housing that by design could be close to or in a residential or other area that would fit with the character of its surrounds and also serve as a day reporting and counseling center.
- Housing pod or unit recommended sizes:
  1. Multiples of 8, 16, 32, and 64 beds for cell housing either single- or double-bunked. The smallest cell units are used for higher security and special management units and the larger sizes for general populations usually of medium or minimum security. The smallest size units of 8 and 16 beds should be minimized due to their relatively low operational staff ratio. Also, a select number of general population maximum security 64-bed single-bunked cells can also be safe and efficient for general population maximum custody groups and have even proven so in special needs treatment facilities for mentally disordered inmates and substance abuse treatment. While variations exist at the high end such as 48- and 56-bed cell units a 64-bed cell unit is recommended due to its greater construction and operating efficiency and proven success elsewhere.
  2. Open dormitories should have a maximum of 50 beds. The American Correctional Association Physical Plant Standards for both prisons and jails recommend that open dormitories should not exceed 50 inmates and should have privacy partitions. The consultant has found this to be a sound guideline from both a security and operating efficiency standpoint.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

- Approximately 10% of the operating bed capacity should be provided as a dedicated special needs treatment unit in each CCC and at the same ratio for the entire prison system as a dedicated special needs facility supporting the entire system.
- All correctional facilities should have the equivalent of approximately 5% of their operating bed capacity as additional non-operational capacity beds for use as temporary special management single-bunked cells, holding rooms and medical observation/recuperation beds.

**Facility Staffing Guidelines** – The Hawaii system currently has one of the lowest ratios of the number of total institutional staff to inmates of any system in the U.S. For example in the 2001 Corrections Yearbook, which has the latest available computations of the ratio of inmates to institutional staff where Hawaii and most all states reported data, Hawaii had a ratio of 1:1.9 compared to a Nation-wide average of 1:3.1. For correctional officers only the ratio was 1:3.7 for Hawaii versus 1:5.4 Nationally. Minnesota recognized as being one of the Nation’s model corrections systems having one of the lowest incarceration rates of any state had ratios of 1:2.1 for all staff and 1:3.9 for correctional officers. The Federal Bureau of Prisons reported a 1:4.1 ratio for all staff and 1:9.7 for correctional officers.<sup>3</sup>

From the standpoint of inmate supervision and the ability to provide corrective, rehabilitative and treatment services by staff Hawaii would appear to be in an enviable position. For example, Hawaii reported in the same Yearbook a ratio of 1:17 mental health staff, whereas the National average was 1:73. When, however, the some 1,400 Hawaii inmates currently held in mainland prisons are returned to Hawaii prisons the question will be can the annual operating expense to the State for such a level of staffing be sustainable.

Jail Versus Prison Staffing – If and when the PSD reaches a point when funding for facility staffing becomes more constrained there are two guidelines that may be useful to consider or at least reference as benchmarks. In the ACAs 2002 – 2004 National Jail and Adult Detention Directory of 44 states reporting that did not have combined jail and prison systems like Hawaii the average ratio of staff to inmates was 1:5.3.<sup>4</sup> However, in light of the system’s existing low ratio the PSD may want to consider an initial staff to inmate target ratio of 1:3, which is found frequently to be prevalent in successful jails that provide programs, some degree of treatment and work opportunities.

For the correctional facilities the variations will be substantial from the recommended “Special Needs Correctional Treatment Facility,” which can be expected to have a ratio that approaches 1:1 to minimum security facilities that should be closer to 1:5. It is recommended that given the system’s current relatively low staffing ratio that a reasonable target ratio goal for all prisons combined may be 1:2.1 similar to Minnesota as compared to Hawaii’s current 1:1.9.

Ultimately, as some of the new minimum and medium security prisons are activated, which should have a much higher ratio of staff to inmates than the existing facilities, the ratio should be able to reach 1:2.5 for all prisons combined, which would still be significantly below the reported national average of 1:3.1. Accordingly, initial target benchmarks for planning purposes are recommended for any new CF or CCC as follows, but are varied for special custody facilities. For recommended expansions variations on these ratios are used depending on the size and scope of the addition.

<sup>3</sup> The 2001 Corrections Yearbook, Criminal Justice Institute, Inc., Middletown, Connecticut.

<sup>4</sup> National Jail and Adult Detention Directory 2002 – 2004, American Correctional Association.





**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

For example, where a small addition of one or a few housing pods are added the ratio will be relatively high since the need will be primarily for housing officers. For large additions, on the other hand, which sometimes are as large as a facility the ratios will be smaller due to the need for adding support services and programs staff.

<b>New CFs Staffing Target Ratios</b>	<b>New CCCs Staffing Target Ratios</b>
<ul style="list-style-type: none"> <li>▪ Correctional Treatment Facility = 1:1.2</li> <li>▪ Medium Security Facilities = 1:3</li> <li>▪ Minimum Security Facilities = 1:4</li> </ul>	<ul style="list-style-type: none"> <li>▪ CCC = 1:3 (initial target be improved as new facilities prove successful)</li> </ul>

**Plan Description**

**Existing Facilities Continued Use at 2003 Rated Capacities** – Table 3-5 presents a recommended use plan for the system’s existing facilities and beds as rated for ACA standards-compliant capacity by the PSDs 2001 Capacity Analysis Study and by the consultant’s review during this master plan update study. Obviously the current facilities and their recommended rated operational bed capacities should be used as long as needed and cost/beneficial to do so for their combined 3,369 operational capacity. As can be seen in Table 3-5 the existing facilities (excluding the Halawa Special Needs Facility recommended for demolition in Phase 1) provide an operational and special management bed capacity as rated in October 2003 and summarized as follows:

<b>Beds Available in 2003</b>	<b>Correctional Facilities</b>	<b>Community Correctional Facilities</b>	<b>Total Beds</b>
Male Ops. Beds	1,500	1,432	2,932
Female Ops. Beds	260	177	437
<b>Ops. Totals</b>	<b>1,760</b>	<b>1,609</b>	<b>3,369</b>
Special Mgt. Beds	89	52	141

**Expansions and New Facilities** – The 10-year development plan recommends: (1) permanent expansions to existing prisons where feasible (Halawa MSCF and Kulani CF), (2) short-term interim expansions at WCF and WCCC; and (3) replacement where desirable (Halawa SNCF in Phase 1, Waiawa CF and WCCC in Phase 2). As noted above the Halawa Special Needs CF is recommended for demolition in Phase 1. A new much larger “Special Needs Secure Treatment Facility” is recommended as a top priority in Phase 1. Also it is recommended that all four CCCs eventually be replaced as funding availability permits (recommend Kauai, Oahu, and Maui in Phase 1, plus a new west Hawaii CC in Kona; and the existing Hawaii CCC in Hilo during Phase 2) due to the combination of their overcrowding and lack of sufficient adjacent land for expansion; poor



### Chapter 3 CAPITAL IMPROVEMENTS PLAN

security conditions, operational efficiency and effectiveness; declining state of repair and building operating cost efficiency; and increasing adjacent land and private sector development values.

Table 3-6 summarizes the recommended growth plan for the additional new CF beds needed by gender, security level and by phase. For the new CCC beds needed the recommendations are also given by county in addition to gender, security level and phase. However, the operational bed counts shown for the four counties are for their total CCC bed needs, rather than just the additional beds, since their total replacement is recommended. Thus, with this recommended 2-phase 10-year plan all new correctional beds will be added by a combination of permanent expansions at Kulani CF and Halawa MSCF with demolition of the Halawa SNCF; short-term interim expansions for the Waiawa CF and WCCC assuming that they cannot be replaced in Phase 1; and three CCCs in Phase 1 and one in Phase 2. Both the Waiawa CF and WCCC are recommended for total replacement at new locations in Phase 2 unless sufficient funding was available in Phase 1. Table 3-7 and Figures 3-11 and 3-12 summarize the recommended 10-year growth plan by phase.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Table 3-5  
Existing Facilities Recommended Bed Allocations

Existing Facility	Existing Beds by Security Level Classification									
	Operational Beds						Special Management Beds			
	Maximum	Close	Medium	Minimum	Community	Totals	Seg./Spc. Mgt.	Temp. Holding	Medical	Totals
<b>Correctional Facilities</b>										
Halawa Medium Security		248	744			992	44		14	58
Kulani				160		160		8		8
Waiawa				348		348		2	2	4
Womens CCC	34			206	20	260	13		6	19
<b>Totals Male</b>	0	248	744	508	0	1,500	44	10	16	70
<b>Totals Female</b>	34	0	0	206	20	260	13	0	6	19
<b>TOTALS</b>	<b>34</b>	<b>248</b>	<b>744</b>	<b>714</b>	<b>20</b>	<b>1,760</b>	<b>57</b>	<b>10</b>	<b>22</b>	<b>89</b>
<b>Community Corr. Facilities</b>										
Hawaii - male	22		64		100	186		3		3
Hawaii - female				40		40				
Kauai - male			38	80		118		8		8
Kauai - female			10			10				
Maui - male	6		96	52	100	254	6	4		10
Maui - female	15			32		47				
Oahu - male			516	188	170	874		36	3	39
Oahu - female				80		80				
<b>Totals Male</b>	28	0	714	320	370	1,432	6	51	3	60
<b>Totals Female</b>	15	0	10	152	0	177	0	0	0	0
<b>TOTALS</b>	<b>43</b>	<b>0</b>	<b>724</b>	<b>472</b>	<b>370</b>	<b>1609</b>	<b>6</b>	<b>51</b>	<b>3</b>	<b>60</b>
<b>GRAND TOTALS</b>	<b>77</b>	<b>248</b>	<b>1468</b>	<b>1186</b>	<b>390</b>	<b>3,369</b>	<b>63</b>	<b>61</b>	<b>25</b>	<b>149</b>

Source: Carter Goble Associates, Inc., October 2003.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Table 3-6  
Recommended New Beds by Phase and Security Level

Security Level	(Prisons) Correctional Facilities			(Jails) Community Correctional Centers										
	Male	Female	Total CF	Hawaii		Kauai		Maui		Oahu		Total		Total CCC
				Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
<b>Phase 1 - 2004 - 2008</b>														
Maximum	128	8	136	16	4	16	4	32	8	64	16	128	32	160
Close	128	8	136	16	4	16	4	32	8	64	16	128	32	160
Medium	896	192	1,088	128	16	96	32	224	32	640	64	1,088	144	1,232
Minimum	500		500	75	25	50	25	150	50	450	50	725	150	875
Community			0	25	50	75	25	150	75	450	150	700	300	1,000
<b>Operational Total</b>	<b>1,652</b>	<b>208</b>	<b>1,860</b>	<b>260</b>	<b>99</b>	<b>253</b>	<b>90</b>	<b>588</b>	<b>173</b>	<b>1,668</b>	<b>296</b>	<b>2,769</b>	<b>658</b>	<b>3,427</b>
Special Management	96	10	106	12	4	12	4	32	8	88	16	144	32	176
<b>Phase 2 - 2009 - 2013</b>														
Maximum		8	8	16	4							16	4	20
Close		8	8	16	4							16	4	20
Medium	544	256	800	128	16			32		96		256	16	272
Minimum	1450	240	1690	75	25			25		25		125	25	150
Community			0	25	25			25		25	50	75	75	150
<b>Operational Total</b>	<b>1994</b>	<b>512</b>	<b>2,506</b>	<b>260</b>	<b>74</b>	<b>0</b>	<b>0</b>	<b>82</b>	<b>0</b>	<b>146</b>	<b>50</b>	<b>488</b>	<b>124</b>	<b>612</b>
Special Management	100	24	124	12	4			0	0	0	0	12	4	16
<b>Operational Grand Total</b>	<b>3,646</b>	<b>720</b>	<b>4,366</b>	<b>520</b>	<b>173</b>	<b>253</b>	<b>90</b>	<b>670</b>	<b>173</b>	<b>1,814</b>	<b>346</b>	<b>3,257</b>	<b>782</b>	<b>4,039</b>

Note: The recommended new beds for Correctional Facilities are to be added to the 2003 stock of 1,760 operational beds and 89 special management beds. However, in the case of the Community Correctional Centers the recommended new beds are the total needed (except for the retention of the 100-bed Hale Nani WFC on Hawaii) to replace the existing four centers currently rated at 1,609 operational beds and 52 special management beds.

Source: Carter Goble Associates, Inc., October 2003.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Table 3-7  
10-Year Capital Improvement Growth Plan Summary

<p><b>PHASE 1 – 2003 – 2008</b> (build 1,860 CF ops. beds &amp; 3,427 CCC ops. beds)</p>	<p><b>PHASE 2 – 2009 – 2013</b> (build 2,570 CF ops. beds &amp; 612 CCC ops. beds)</p>
<p><b>Facility Expansions</b> 1,362 CF ops. beds</p> <ol style="list-style-type: none"> <li>1. Unless affordable to replace in Phase 1, add a 256-bed medium unit, 150-bed minimum unit, 32 spc. mgt. cells at Waiawa CF with needed support improvements (<i>short-term</i>).</li> <li>2. Unless affordable to replace in Phase 1, add 8 maximum, 8 close, 192 medium beds, 10 spc. mgt. cells at WCCC with needed support improvements (<i>short-term</i>).</li> <li>3. Add 150 minimum security beds, 8 spc. mgt. cells at Kulani CF with needed support improvements.</li> <li>4. After new treatment facility available demolish HSNCF and reuse site for HMSCF expansion for 448 medium security beds, 150-bed minimum security unit, 32 spc. mgt. cells.</li> </ol>	<p><b>Facility Expansions</b> 64 CF ops. beds <i>contingency</i>, 278 CCC ops. beds</p> <ol style="list-style-type: none"> <li>1. Add ONLY if recommended new Women’s CF is not funded: a 64-bed medium unit at the WCCC.</li> <li>2. Add 82 male ops. beds at the Maui CCC.</li> <li>3. Add 146 male ops. beds and 50 female ops. beds at the Oahu CCC.</li> </ol>
<p><b>New Facilities</b> 498 CF ops. beds, 3,427 CCC ops. beds</p> <ol style="list-style-type: none"> <li>1. 498-bed correctional special needs treatment facility, 24 spc. mgt. cells, either at a new Oahu site or at Halawa complex.</li> <li>2. 1,964 ops. bed CCC on Oahu, 104 spc. mgt. cells (1,364 ops. beds jail near court and 600 community custody ops. beds other locations)</li> <li>3. 761-bed CCC on Maui, 40 spc. mgt. cells</li> <li>4. 343-bed CCC on Kauai, 16 spc. mgt. cells</li> <li>5. 359-bed West Hawaii correctional center near Kona courts, 16 spc. mgt. cells</li> </ol>	<p><b>New Facilities</b> 2,506 CF ops. beds; 334 CCC ops. beds</p> <ol style="list-style-type: none"> <li>1. 334-bed Hawaii CCC on new site near Hilo, plus 16 spc. mgt. cells and retention of the 100-bed Hale Nani Work Furlough Center.</li> <li>2. 613-bed medium security CF with 288 medium and 325 minimum security beds, 32 spc. mgt. cells.</li> <li>3. 350-bed minimum security CF with 16 spc. mgt. cells.</li> <li>4. Replace WCCC @ 512 ops./24 spc. mgt. cells.</li> <li>5. Replace WCF @ 756 ops./36 spc. mgt. cells.</li> <li>6. 275-bed minimum security CF, 16 spc. mgt. cells</li> </ol>

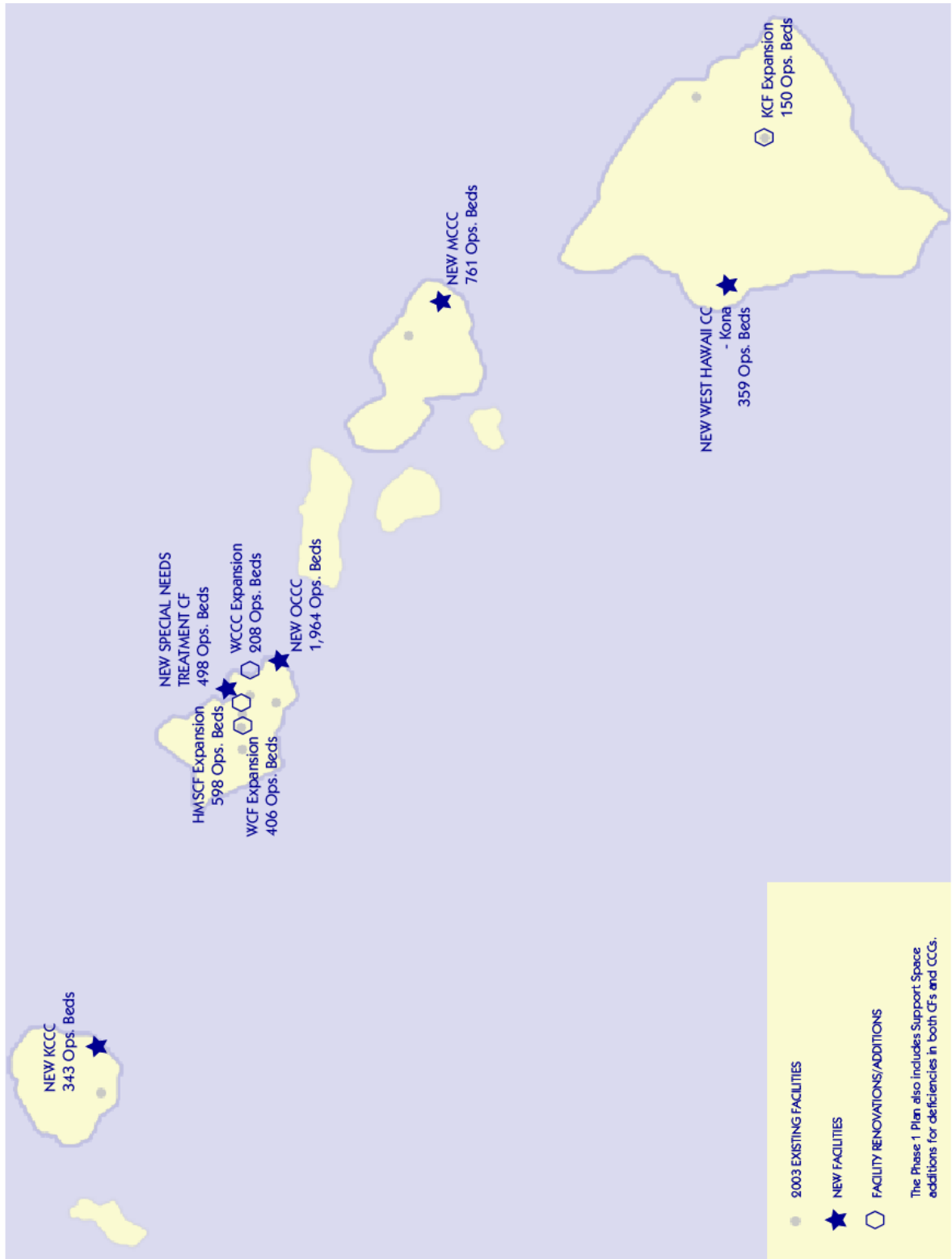
Note: “Short-term” temporary additions are due to entire facility replacement being needed by 2013. Also, 144 HMSCF close custody double-bunked cells are recommended to be reclassified as 144 maximum security single-bunked cells. Source: Carter Goble Associates, Inc., October 2003.





Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Figure 3-11  
10-Year Capital Improvement Plan - Phase 1





Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Figure 3-12  
10-Year Capital Improvement Plan - Phase 2





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

**PHASE 1 – 2004 - 2008** (build 1,860 CF operational beds and 3,427 CCC operational beds)

1. **Reduce Operating Counts** – As recommended new beds are added and new facilities completed and activated during Phase 1 the 2003 actual operational bed counts should be reduced at all existing facilities to correspond to the rated capacities as recommended by in Table 3-5. This should include reclassifying 144 close custody cells at the HMSCF to 144 single-bunked maximum security general population cells once new space is available to relocate 144 close custody inmates.
  
2. **Fund and Implement a Preventive and Routine Maintenance Program** – A preventive and routine maintenance plan for all facilities should be designed, fully funded, staffed and implemented in 2004. At a minimum all “Changes and Improvements Needed” as recommended for each existing facility in the “Existing Facilities Capacities and Improvement Recommendations” section of this chapter should be corrected or in process within 12 months. This program should include the provision of adequate maintenance staffing at each facility and a Department Maintenance Director with one technical assistant at the headquarters level. The Maintenance Director should assist local maintenance supervisors to develop annual maintenance plans and budgets; carry out independent periodic monitoring and evaluation checks on maintenance and repair status at each facility; and make recommendations to each local Maintenance Supervisor and Warden and when needed to the PSD Director in regard to sustaining an adequate preventive and routine maintenance program at all facilities.

**Phase 1 – Expansion of Existing Facilities**

3. **Waiawa CF Short-term Expansion** – Unless the replacement of the WCF could be accelerated to Phase 1 instead of waiting until Phase 2 at a new site, there is still need for some significant capacity expansions for substance abuse treatment to accommodate both current needs and projected growth. Given the immediacy of the need the option of using lower cost temporary structures could be considered until complete replacement is financially feasible. The WCF plays a critical role in the system as the primary location for male substance abuse treatment, which must be continued and expanded as soon as possible, not just at the WCF but at all correctional facilities. The expansion of substance abuse treatment will require both expansions at the WCF and other existing facilities as well as the addition of new facilities in order to implement a “continuum of treatment” as was originally recommended in 1991. As noted previously providing treatment to inmates with a substance abuse dependency throughout their stay is much more effective than providing it only near the end of sentence or just periodically.

Some infrastructure improvements (water and sewer) and support services expansions will also be needed at the WCF as noted in the “Existing Facilities Capacities and Improvements Recommendations” section. The WCF expansions should include operational capacity additions of 256 low-medium security dorm beds and 150 new minimum security dorm beds as follows:



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

- Construct a 256-bed low-medium security unit of four 64-bed two-tiered dorm pods with a secure perimeter. This is intended to enable additional prisoners besides minimum custody inmates needing substance abuse treatment to be transferred to the WCF.
- Add a 150-bed minimum security dormitory subdivided into three 50-bed dorm wings to accommodate additional minimum security inmates needing substance abuse treatment.
- Add 32 single-bunked cells non-operational count special management beds to include a 24-cell segregation unit as part of the new medium security unit construction inside its secure perimeter and 8 new medical observation/ recuperation cells.

Preliminary Added Staffing Estimate @ 1:4 = 110

**4. WCCC Short-term Expansion** – Similar to the WCF the WCCC is recommended for eventual replacement in Phase 2, but will need to have some short-term temporary expansions in order to accommodate growth projections unless replacement by a larger women’s prison could be made immediately. In the existing facility the primary need is for medium security beds with a small number of maximum and close custody cells as follows:

- A 16-bed high security unit consisting of 8 maximum security single-bunked cells and 4 double-bunked close custody cells to serve as a transitional unit both for inmates prior to returning to the general population and for assessment and observation prior to placement in the maximum unit if needed. This pod may also be useful as an initial intake unit for those new arrivals who need further assessment and testing prior to making a housing assignment.
- 192 medium security beds in double-bunked cells that would be organized in two separate units of three 32-bed housing pods. Three of the 32-bed pods should be designated as the “female special needs unit” for those with mental disorders and co-occurring substance abuse and mental disorders who would be disruptive in general population without treatment. This unit would serve a comparable function as the recommended new Special Needs Secure Treatment CF for male inmates. The other 3-pod unit would be for general population inmates who need a cell assignment, but not to the extent of a maximum or close custody cell. The 3<sup>rd</sup> pod could serve as a more normative intake unit as needed in conjunction with the few cells in the maximum/close unit, plus handle occasional overflow.
- 10 single-bunked cells as a non-operational count special management pod for special observation, protective custody, administrative and disciplinary segregation.

Preliminary Added Staffing Estimate @ 1:3 = 73

**5. Kulani CF Expansion** – Kulani CF plays an important role in providing sex offenders the treatment and behavior management training that is critically needed prior to their release and especially reinforced near the end of a long-term sentence. Like the WCF it also provides an important pre-release/transitional environment for other non-sex offender inmates as well after completing a long-term sentence in a higher security facility, but before they move to community custody or a work furlough assignment at a CCC. Assuming that the 2005 planned upgrades to the sewer system are implemented and that an economical



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

solution for increasing water supply is possible, a 150-bed expansion should be made in order to expand the system's sex offender treatment capacity due to the substantial growth in the number of sex offenders since 1991 with a treatment waiting list that continues to grow. The Kulani expansion should include:

- 150-bed minimum security dormitory of three 50-bed wings.
- 8 non-operational count special management single-bunked cells for temporary holding and segregation to replace existing temporary holding cells.

Preliminary Added Staffing Estimate @ 1:4 = 40

In the event that the annual operational cost of assuring an adequate fresh water supply and sanitary sewage treatment at Kulani begins to exceed an affordable benefit/cost ratio the PSD should consider the construction of a new facility at another location. The role played by Kulani is important for the treatment of sex offenders who will be released some day, as well as other non-sex offender inmates who also need a transitional environment toward the end of a long-term sentence. However, the same functions could be provided at a lower annual facility operating cost at another location. *In the long-run the sex offender treatment program could also be included as a separate unit in a medium security prison, which would allow many more inmates not eligible for minimum security to participate in treatment.*

**6. Halawa MSCF Expansion** – After the Halawa SNCF is demolished that site adjacent to the HMSCF should be used for the expansion of the HMSCF with a new medium security unit and a new minimum security unit along with any support and program services spaces needed for the entire facility at the expanded capacity. The new units should be joined to the existing facility in a manner that inmate movement to services, industries and other program spaces is readily facilitated. An architectural program should be completed during Phase 1 to confirm the exact distribution of housing units needed as soon as the demolition of the Halawa SNCF is begun, which should follow the opening of the recommended new 498-bed Special Needs Treatment CF either at a new site or at the Halawa complex.(new land due east of the current recreation yard). The total Halawa MSCF expansion should add approximately 448 medium security beds, 150 minimum security beds and 32 special management cells as follows:

- 448-bed medium security double-bunked cells consisting of six 32-cell 64-bed pods and two 16-cell 32-bed pods with one serving as an intake unit and the other for protective custody.
- 150-bed minimum security dormitory with three 50-bed wings to serve as a transitional unit for HMSCF inmates prior to transfer to a lower security or community assignment. Some of these minimum security inmates would be assigned from other facilities if needed to provide a sufficient number of work crews for both inside and outside facility maintenance and support service operations.





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

- 32 non-operational count special management single-bunked cells to include: one 24-cell pod for administrative and disciplinary segregation and one medical observation/recuperation pod of 8 cells.

Preliminary Added Staffing Estimate @ 1:4 = 158

It is important to note that according to Chief of the Wastewater Branch of the State Department of Health's Environmental Management Division the addition of sanitary sewer collection capacity is likely to be needed for any expansion of bed capacity at the Halawa site. If the cost of expansion is found to be extremely high the option of locating a new large site on Oahu that could hold several new facilities as a correctional complex could be a more economical development strategy compared to acquiring separate sites for each new facility.

### Phase 1 – New Facilities

- 7. New Correctional Special Needs Treatment Facility** – The new Special Needs Treatment CF could either be located at another site on Oahu or on available land at the Halawa complex. If located at Halawa the land due east of the MSCF recreation yard should be acquired to facilitate construction of a new Special Needs Treatment Facility that would replace the existing Halawa Special Needs Facility. This new special needs treatment facility should provide the special inmate management and a continuum of treatment design needed for inmates with acute, moderate and chronic mental disorders who would either be disruptive and/or not capable of living in a general population facility without treatment. The facility would also serve other special needs inmates including the developmentally disabled, inmates with co-occurring substance abuse dependencies and mental disorders and those needing substance abuse treatment or sex offender treatment who also need a higher level of security with treatment than is possible at the Kulani CF, Waiawa CF or any other facility. This facility should provide evaluations, diagnosis, stabilization and treatment that would include medication coupled with a treatment design that teaches behavioral and medication compliance as well as activity and treatment program compliance. Any inmate in the Hawaii system found to at least temporarily not be safely manageable in their current facility could be transferred to this facility for diagnosis, treatment and development of an individualized long-range treatment plan that to enable them to eventually return to a lower security facility and eventually a community assignment prior to release.

The overall mission of this facility should be as a transitional one to equip inmates with the treatment, education, and behavior management skills needed to allow them to be non-disruptive and successful in a general population prison and to help equip them for a successful transition and eventual release. In this way the facility should have a constant turnover of inmates with those who are successfully transferred to another general population facility being continually replaced by inmates in need of assessment, diagnosis and treatment, which would include some inmates who will relapse in other facilities or the community. All inmates of this facility should have individualized treatment plans in which they participate in formulating with professional treatment staff.



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

The facility should have a maximum security perimeter due to the nature and classification of some of the inmates assigned. However, the internal housing design and construction would be multi-custody in order to provide for a continuum of housing units commensurate with the continuum of care and treatment design that should be typical of a special needs treatment facility. Architectural programming for this specialty type of design should commence in early 2004 for an approximate 498-bed correctional special needs treatment facility to confirm the specific size, custody breakdowns and various spaces needed for the operation of the treatment designs to be developed by the PSD. The proposed size is equivalent to approximately 11% of the 2013 projected number of male CF beds needed, but should have ground space reserved for long-term future expansion as well. Based on the consultant's and other treatment specialists experience with planning special needs treatment facilities an initial housing security group breakdown is suggested as follows for planning and budgeting purposes:

- 128 single-bunked maximum security cells consisting of four 32-cell pods (one for RAD intake and a classification).
- 128 close custody double-bunked cells consisting of four 16-cell 32-bed pods (three pods serving as step-down/ step-up units between maximum and medium security and one as a RAD intake/diagnostic unit).
- 192 medium security double-bunked cells consisting of three 32-cell pods with two serving as this facility's general population transitional units prior to transfer to a general population facility and one serving as part of the RAD intake/diagnostic unit.
- 24 non-operational count special management cells to include one 12-cell pod for administrative and disciplinary temporary segregation and one 12-cell medical infirmary observation/recuperation single cells.
- One 50-bed minimum security dormitory for inmates capable of assignment to a work crew to support the operation of this facility for both inside and outside facility operational and maintenance needs. This could either be used as a minimum step-down transitional unit or for a separate assigned work crew of non-special needs inmates, depending on the availability of enough minimum security inmates.

Preliminary Staffing Target @ 1:1.75 = 298

As noted elsewhere according to State staff the addition of sanitary sewer collection capacity is likely to be needed for any expansion of bed capacity at the Halawa site. If the cost of expansion is found to be extremely high the option of locating a new large site on Oahu that could hold several new facilities as a correctional complex could be a more economical development strategy compared to acquiring separate sites for each new facility.

**8.-10. Three New CCCs and One New Regional Correctional Center** – Based on the combination of the severity of existing conditions and the projected volume of need three new replacement CCCs should be built on Kauai, Maui and Oahu as soon as possible. Also, on Hawaii due to its geographic size and the high growth trend on the western side at Kona a new 2<sup>nd</sup> correctional center is recommended (this was also recommended in the 1991 master plan). The design of these facilities should provide a contemporary flexible



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

design concept for a multi-security jail (maximum, medium and minimum security housing units) with an adjacent community custody unit and a day reporting center. The latter two units could be on separate sites from the secure detention facilities if preferred, but would be more economical to operate if co-located with their respective jails.

Table 3-3 is used as a general guide to develop the distribution of beds by a security levels. The exact numbers to be designed and built would be determined during the development of the architectural program for guiding the design of each facility. Accordingly, the four new facilities by county should have the following approximate total number of beds by security levels:

The preliminary recommendation for apportioning the new West Hawaii County Regional CC capacity between it and the County CCC in Hilo is based on recent arrest data supplied by the HCCC Warden that showed approximately 50% of the County's arrestees come from west Hawaii and 50% from the Hilo and east Hawaii area.

### **West Hawaii County Regional CC at Kona**

#### Males (260 operational beds)

- 16 beds maximum security in single-bunked cells
- 16 beds close custody in single-bunked cells
- 128 beds medium security double-bunked in two 32-cell pods
- 75 beds minimum security in one 50-bed and one 25-bed dormitory wing
- 25 beds community custody in one dormitory
- 8 beds non-ops. capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 4 beds non-ops. capacity for medical observation/ recuperation

#### Females (99 operational beds)

- 4 beds maximum security in single-bunked cells
- 4 beds close custody in single-bunked cells
- 16 beds medium security double-bunked in one 16-bed pod
- 25 beds minimum security in one dormitory
- 50 beds community custody in one 50-bed dormitory
- 2 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 126

### **Kauai County CCC**

#### Males (253 operational beds)

- 16 beds maximum security in single-bunked cells
- 16 beds close custody in single-bunked cells
- 96 beds medium security double-bunked in one 32-cell pod and one 16-cell pod



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

- 50 beds minimum security in one dormitory
- 75 beds community custody in one 50-bed dormitory and one 25-bed dormitory
- 8 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 4 beds medical observation/ recuperation

Females (90 operational beds)

- 4 beds maximum security in single-bunked cells
- 4 beds close custody in single-bunked cells
- 32 beds medium security double-bunked in one 16-cell pod
- 25 beds minimum security in one dormitory
- 25 beds community custody in one dormitory
- 2 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 120

**Maui County CCC** (Phase 1 totals only except all sp. mgt. cells in Phase 1 – some operating bed expansion needed in Phase 2)

Males (588 operational beds)

- 32 beds maximum security in single-bunked cells
- 32 beds close custody in single-bunked cells
- 224 beds medium security double-bunked in three 32-cell pods and one 16-cell pod
- 150 beds minimum security in three 50-bed open dormitory wings
- 150 beds community custody in three 50-bed open dormitory wings
- 24 beds non-ops. capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 8 beds non-ops. capacity for medical observation/ recuperation

Females (173 operational beds)

- 8 beds maximum security in single-bunked cells
- 8 beds close custody in single-bunked cells
- 32 beds medium security double-bunked in one 16-cell pod
- 50 beds minimum security in one open dormitory
- 75 beds community custody in one 50-bed and one 25-bed dormitory
- 6 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 267



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

**Oahu County CCC** (Phase 1 totals only except all sp. mgt. cells in Phase 1 – some operating bed expansion needed in Phase 2)

Males (1,668 operational beds)

- 64 beds maximum security in single-bunked cells
- 64 beds close custody in single-bunked cells
- 640 beds medium security double-bunked in ten 32-cell pods
- 450 beds minimum security in nine 50-bed open dormitory wings
- 450 beds community custody in nine 50-bed open dormitory wings
- 72 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 16 beds medical observation/ recuperation

Females (296 operational beds)

- 16 beds maximum security in single-bunked cells
- 16 close custody in single-bunked cells
- 64 beds medium security double-bunked in two 16-cell pods
- 50 beds minimum security in one open dormitory
- 150 beds community custody in three 50-bed dormitories
- 8 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 8 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 690

**PHASE 2 – 2009 - 2013** (build 2,506 CF operational beds and 612 CCC operational beds)

**Phase 2 – Expansion of Existing Facilities**

1. **WCCC Housing Addition** (*Contingency Option*) – This addition would only be needed if the recommended new women's CF was not funded for design and construction during Phase 2. This addition to the old WCCC would then be needed after 2009 in order to meet the female beds projected by the end of Phase 2. As an addition to the WCCC this unit should include:

- 64 female beds medium security double-bunked in one 32-cell pod

Preliminary Added Staffing Estimate @ 5 FTE/Pod = 5

2. **MCCC Housing Addition** – Assuming that the new Maui CCC was completed and opened during Phase 1 at its initial size there would be a need to add 82 operational beds by 2013. Provided that the new facility's site master plan that would have been completed in Phase 1





**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

as part of the facility's original design documents included expansion ground space the following additions may be a feasible breakdown:

- 32 male beds medium security double-bunked in one 16-cell pod
- 25 male minimum security beds on one dormitory
- 25 male community custody beds in one dormitory

Preliminary Added Staffing Estimate @ 1:5 = 16

- 3. OCCC Housing Additions** – Based on the 10-year projected bed need the new Oahu CCC built and opened in Phase 1 would need to have a Phase 2 196-bed housing expansion completed by 2013. Similar to the MCCC this housing expansion should be provided for in the facility's site master plan that would have been completed in Phase 1 as part of the facility's original design documents. If current trends continue the new beds could include:

- 96 male beds medium security double-bunked in one 32-cell pod and one 16-cell pod
- 25 male beds minimum security in one dormitory
- 25 male beds community custody in one 25-bed dormitory
- 50 female beds community custody in one 50-bed dormitory

Preliminary Added Staffing Estimate @ 1:5 = 40

## Phase 2 – New Facilities

- 4. New Hawaii County CCC** – Construction of a new CCC to replace the original complex at Hilo on a new site in east Hawaii is recommended as explained in the individual facility assessments and improvement recommendations section. The new Hawaii CCC would still include the existing Hale Nani Work Furlough Center located outside Hilo. This site is an optional location for building the new HCCC since the west County CC in Kona as recommended in Phase 1 would reduce the capacity requirements for the new CCC by just over 50%. The preliminary recommendation for apportioning the County's capacity needs between an east County CCC in the Hilo area and the recommended west County CC in Kona is based on recent arrest data supplied by the HCCC Warden that showed approximately 50% of the arrestees coming from west Hawaii and 50% from the Hilo and east Hawaii area. The HCCC will retain its original functions and the new west county facility could either be administratively subordinate to the HCCC or developed as a separate privatized operation as may be preferred. As a general guide Table 3-3 is used to develop the distribution of beds by a security levels. Accordingly, the new HCCC should have the following approximate total number of beds by security levels, assuming that the west County facility was developed in Phase 1:

Males (260 operational beds + Hale Nani WFC retained at 100 beds)

- 16 beds maximum security in single-bunked cells
- 16 beds close custody in single-bunked cells
- 128 beds medium security double-bunked in two 32-cell pods



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

- 75 beds minimum security in on 50-bed and one 25-bed dormitory
- 25 beds community custody in one dormitory (plus 100 beds retained at the Hale Nani WFC)
- 8 beds non-ops. capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 4 beds non-ops. capacity for medical observation/ recuperation

Females (74 operational beds)

- 4 beds maximum security in single-bunked cells
- 4 beds close custody in single-bunked cells
- 16 beds medium security double-bunked in one 8-cell pod
- 25 beds minimum security in one dormitory
- 25 beds community custody in one dormitory
- 2 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 118 (new sections only – excludes Hale Nani)

- 5. Build New Medium Security CF** – A new medium security facility with 613 medium and minimum security beds is recommended based on the projected capacity needs for 2013 for both security levels. While the facility's perimeter system should be a medium security dual fence system, the facility would be a multi-custody facility, which based on projections by security level should include 288 medium security beds and a 325-bed minimum security unit.

*This facility could also be designed and expanded to become an eventual replacement for the Kulani CF. If so, the sex offender population and treatment programs should be included as a separate unit within the compound due to the need for a focused dedicated treatment program for those inmates, without interruption from non-participants. One of the benefits of this option is that a greater number of sex offenders could be admitted to treatment than currently with Kulani's minimum security status since a medium security perimeter would exist allowing for both minimum and medium custody inmates to be involved in the treatment program.*

As a general population medium security facility the initial recommended allocation of beds is:

- 288 beds medium security double-bunked cells in four 64-bed pods and one 32-bed pod
- 325 beds minimum security in six 50-bed dormitory pods and one 25-bed dormitory pod
- 24 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 8 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 215



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

While Oahu is the most logical location for concentrating correctional facilities based on population size, resource availability and minimizing operating costs, either Hawaii or Maui could be alternate locations if desired for other reasons and location factors. Also, this is one of the facilities that would be a candidate for a new large site on Oahu that would be a correctional complex of up to five facilities as discussed previously, thus eliminating the need for acquiring multiple sites.

- 6. Build New Minimum Security CF** – One additional 350-bed minimum security facility will be needed by 2013 based on the projection results. If the new 613-bed medium security facility was built on Oahu consideration should be given to locating this facility on Maui or Hawaii depending on site availability and local acceptance. Otherwise Oahu would remain a logical location from the standpoint of minimizing operating expense assuming that a suitable expandable site could be located. This facility would have the following approximate bed allocations:

- 350 beds minimum security in seven 50-bed dormitory pods
- 10 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 6 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:4 = 92

While Oahu is the most logical location for concentrating correctional facilities based on population size, resource availability and minimizing operating costs, either Hawaii or Maui could be alternate locations if desired for other reasons and location factors. Also, this is one of the facilities that would be a candidate for a new large site on Oahu that would be a correctional complex of up to five facilities as discussed previously, thus eliminating the need for acquiring multiple sites.

- 7. & 8. Replace the WCCC and the WCF** – As recommended in the facility assessments and the beginning of this capital improvements plan both the WCCC and the WCF should be replaced as soon as funding is available. Thus if sufficient funds are available during Phase 2 then the 64-bed expansion option for the WCCC included in the first part of the Phase 2 plan would not be implemented. Similarly, if it were possible to replace the WCF some of the capacity expansions needed in Phase 1 could possibly be delayed depending on system growth trends for minimum custody males and those needing substance abuse treatment for which the WCF is the system's primary resource in 2003.

If funded during Phase 2 both would need to be completed by 2013 at the following sizes to enable the system to accommodate the projected growth and fully replace the existing WCCC and WCF as follows:

**New Female CF @ 512 Operational Beds**

- 8 beds maximum security in single-bunked cells
- 8 beds close custody in single-bunked cells



**Chapter 3**  
**CAPITAL IMPROVEMENTS PLAN**

- 256 beds medium security double-bunked in eight 16-cell pods
- 240 beds minimum security in eight 30-bed dormitory pods
- 8 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 16 beds medical observation/ recuperation

Preliminary Staffing Target @ 1:2 = 268

**New Substance Abuse Treatment CF @ 756 Operational Beds**

- 256 beds medium security double-bunked in four 32-cell pods
- 500 beds minimum security in ten 50-bed dormitory pods
- 24 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 12 beds medical observation/ recuperation

Preliminary Staffing Target @ 1:2 = 396

Due to their special nature and system-wide importance both the WCCC and WCF replacement facilities should remain on Oahu and would be candidate facilities to co-locate on one large site for a correctional complex rather than having to acquire separate sites for each facility. In addition to the ease of acquiring one site versus several there would also be construction cost savings since site infrastructure and certain support services could be shared such as having one large production kitchen instead of several separate ones and the same for laundry, healthcare and warehousing. Some annual building operating cost savings would also result by such a consolidation.

**9. New Minimum Security Correctional Facility** – The projections show a substantial growth need for minimum security capacity within the next 10 years. While the plan proposes the addition of a significant number of minimum security beds at existing facilities that number will not be enough to meet the total projected need. These expansion units are likely to be close to the maximum number of such inmates to be needed and feasible for accommodating either such confined general populations or a number that would likely be the highest number of “work crew” inmates needed for helping maintain and operate kitchens and laundries and perform maintenance duties at those facilities. This new facility would be logically located on Oahu as the highest source of inmates, although Maui or Hawaii could be possible alternate locations. It should provide for a work-oriented population and a general mission as a short-term or transitional facility for inmates near the end of sentence and sentenced parole and probation violators who do not need a medium or higher security environment. It should consist of:

- 275 beds minimum security in five 50-bed dormitories and one 25-bed transitional honor dormitory.
- 10 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 6 beds non-ops. capacity for medical observation/ recuperation



Preliminary Staffing Target @ 1:4 = 73

In regard to location this is a facility that could be co-located on a large new site with several other new facilities on Oahu rather than having to acquire separate sites. Also, as a minimum security facility it could also be the source of labor for a large production kitchen as well as other work crew duties to help operate and maintain a complex of facilities at one location.

**Resulting Bed Allocations Summary and Comparisons** – Table 3-8 presents a summary of the bed allocations that result from the recommended 10-Year Master Plan as described for each facility expansion and proposed new facilities by Phase. The table gives a male/female breakdown and shows both the recommended operational bed capacities and the non-operational capacity special management beds that will be needed by each Phase from the both facility expansions and proposed new facilities.

At the bottom of Table 3-8 a comparison of the plan is made to projected bed needs by using the final adjusted bed needs projection results from Table 3-4 and the Table 3-5 2003 existing facilities rated capacities.<sup>5</sup> Phase 1 of the recommended plan would make a significant jump in “catching up” the system’s capacity with the projected bed need by 2008. Since the current 1,400 Hawaii prisoners in mainland facilities are included in the CF bed needs projections going forward the Phase 1 plan would make a major reduction in the need for renting mainland beds. For the end of Phase 1 by 2008 the total of new and retained CF and CCC operational beds available would be 7,129 compared to the projected ideal standard of 7,625 beds needed by 2008. *However, the total projected inmate ADP for 2008 is 7,083 which means that the Phase 1 plan for 7,129 beds should be sufficient for 2008 and beyond without any substantial trend changes.*

By the end of Phase 2 in 2013 the plan would reach a combined total of 8,899 CF and CCC operational beds available compared to the projected bed need of 8,950, or just 51 beds short of the projected ideal capacity. Since both the projected bed needs and planned beds include additional beds for jail peaks (4% to 21%) and a uniform 5% classification additive for all facilities the projected 51-bed shortage by 2013 is only .6% short of the ideal projected need. *The 8,899-bed operating capacity should be sufficient for the 2013 average daily population projection of 8,320 inmates with significant room for future growth unless incarceration trends change substantially.*

**Site Development Options** – Since several new correctional facilities are recommended for construction on Oahu in Phases 1 and 2 the option of acquiring a large site that could be used for each of five separate facilities instead of five separate sites could be economically advantageous. As already noted in the preceding plan narratives cost advantages would result for both for construction savings with shared site infrastructure and certain support components such as kitchen, medical, laundry and warehousing and for the associated annual operating expenses. Also, the logistics, environmental and community impacts for selecting one large site should be much less complicated than for five sites. Figure 3-13 depicts the facilities that would be included.

<sup>5</sup> It must be remembered that the Table 3-4 projected bed needs by security levels included a shift from the Chapter 2 Table 2-21 projected operational bed needs for all community custody beds, except an existing 20-bed unit at the WCCC, to the CCCs where those beds should be located and counted since they are transitional end-of-sentence pre-release beds under the command of the CCCs.





Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Table 3-8  
Master Plan Bed Allocations Summary and Comparisons

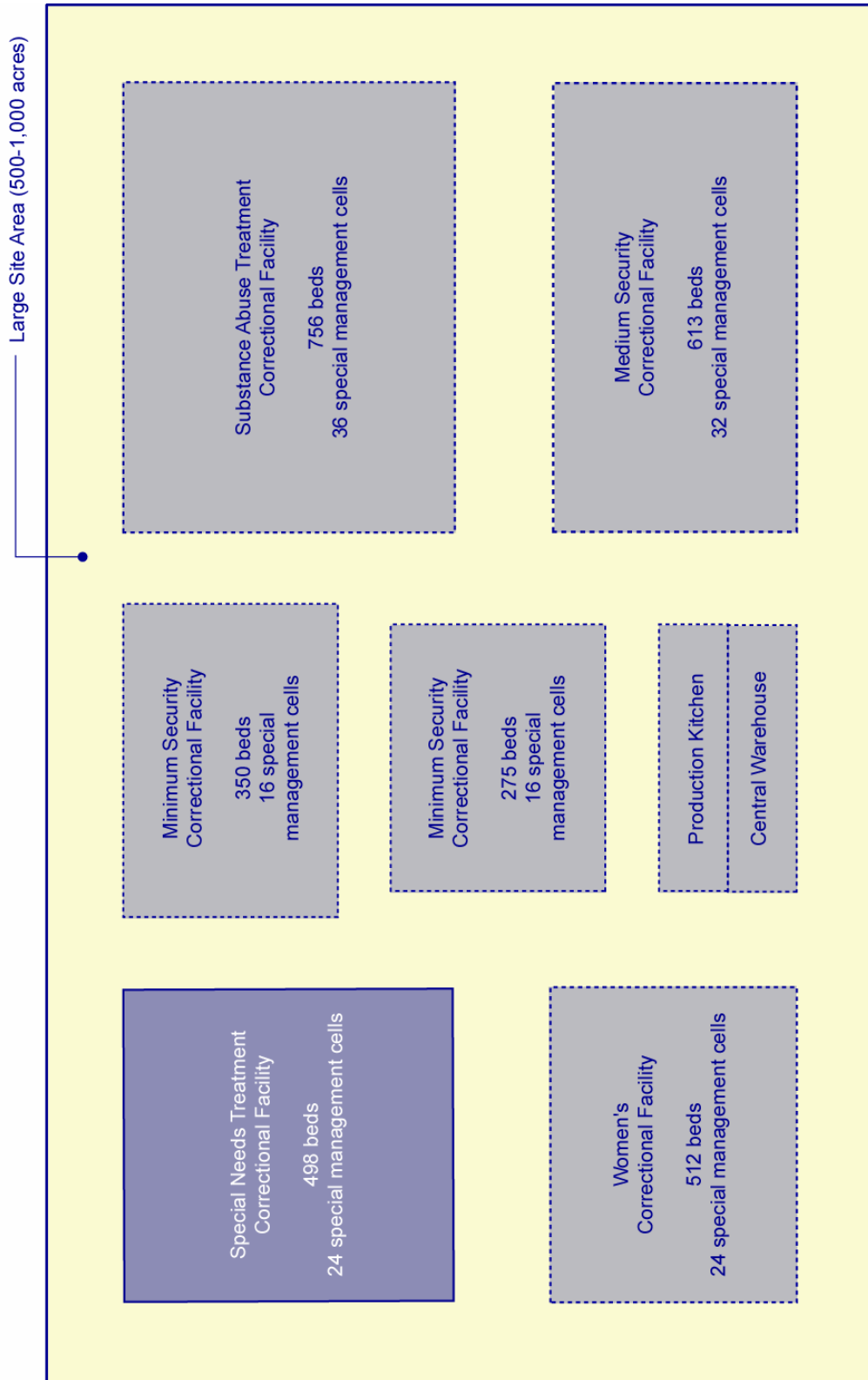
Phase and Category	Male		Female		Totals		Grand Total All Beds	
	CF	CCC	CF	CCC	CF	CCC		
<b>PHASE 1 - 2004 - 2008</b>								
<b>Facility Expansions</b>								
Operational Beds	1,154		208		1,362	-	1,362	
Special Management Beds	72		10		82	-	82	
Total Beds	1,226	-	218	-	1,444	-	1,444	
<b>New Facilities</b>								
Operational Beds	498	2,769		658	498	3,427	3,925	
Special Management Beds	24	144		32	24	176	200	
Total Beds	522	2,913	-	690	522	3,603	4,125	
<b>Phase 1 Totals</b>								
Operational Beds	1,652	2,769	208	658	1,860	3,427	5,287	
Special Management Beds	96	144	10	32	106	176	282	
<b>PHASE 1 Totals</b>	<b>1,748</b>	<b>2,913</b>	<b>218</b>	<b>690</b>	<b>1,966</b>	<b>3,603</b>	<b>5,569</b>	
<b>PHASE 2 - 2009 - 2013</b>								
<b>Facility Expansions</b>								
Operational Beds		228		50	-	278	278	
Special Management Beds					-	-	-	
Total Beds	-	228	-	50	-	278	278	
<b>New Facilities</b>								
Operational Beds	1,994	260	512	74	2,506	334	2,840	
Special Management Beds	100	12	24	4	124	16	140	
Total Beds	2,094	272	536	78	2,630	350	2,980	
<b>Phase 2 Totals</b>								
Operational Beds	1,994	488	512	124	2,506	612	3,118	
Special Management Beds	100	12	24	4	124	16	140	
<b>PHASE 2 Totals</b>	<b>2,094</b>	<b>500</b>	<b>536</b>	<b>128</b>	<b>2,630</b>	<b>628</b>	<b>3,258</b>	
<b>PHASE 1 + PHASE 2</b>								
Operational Beds	3,646	3,257	720	782	4,366	4,039	8,405	
Special Management Beds	196	156	34	36	230	192	422	
<b>GRAND TOTAL</b>	<b>3,842</b>	<b>3,413</b>	<b>754</b>	<b>818</b>	<b>4,596</b>	<b>4,231</b>	<b>8,827</b>	
<b>Projected Need vs. Plan Capacity (operational beds)</b>	<b>2008</b>				<b>2013</b>			
	<b>CF</b>		<b>CCC</b>		<b>CF</b>		<b>CCC</b>	
	Proj. Need	Plan	Proj. Need	Plan	Proj. Need	Plan	Proj. Need	Plan
Male	3,684	1,652	2,930	2,769	4,386	1,994	3,312	488
Female	375	208	636	658	476	512	776	124
<b>Totals</b>	<b>4,059</b>	<b>1,860</b>	<b>3,566</b>	<b>3,427</b>	<b>4,862</b>	<b>2,506</b>	<b>4,088</b>	<b>612</b>
Retained Beds	1,616		226		2,254		3,527	
Retained + Planned Beds	<b>3,476</b>		<b>3,653</b>		<b>4,760</b>		<b>4,139</b>	
<b>Grand Total Beds Available</b>	<b>7,129</b>				<b>8,899</b>			
Inmate ADP Projection	7,083				8,320			

Source: Recommendations by Carter Goble Associates, Inc., December 2003.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Figure 3-13  
Oahu Correctional Complex Single Site Development Option



■ Phase 1  
▤ Phase 2



## 10-YEAR BUDGET ESTIMATES

### Capital Project Preliminary Cost Estimates

The 10-Year Master Plan recommends capital improvement projects that consist of a wide variety of new construction and remodeling/expansions as described in the plan descriptions above. While meeting projected 10-year capacity needs is the plan's focus certain conditions in Hawaii also have a major impact on the results. One pervasive finding from facility inspections, plus an agreement with the PSD on two special and important conditions at the beginning of this update study, which have a significant effect on the size, formation and cost of the 10-year plan are:

1. Since the consultant's completion of the 1991 master plan there has been a substantial degree of facility deterioration, apparent deferred maintenance, and delayed needed improvements coupled with overcrowding beyond the design capacities of all facilities in the system;
2. Many of the existing facilities have obsolete designs and floor layouts, especially in inmate housing areas, which results in a less efficient staffing pattern and thus higher annual operating expense than would be the case from a contemporary design. Considering that in the first 20- to 30-year cycle in the life of a correctional facility that 90% of all expenditures will be for annual operating expenses and that the capital investment will only equal approximately 10% makes it very clear that replacing obsolete and operationally inefficient facilities is a sound long-term economic choice.
3. Existing facilities, recommended expansions and any new facilities proposed should comply with the current physical plant standards of the American Correctional Association applicable to Adult Correctional Facilities, Adult Local Detention Facilities and Community Residential Facilities; and
4. The approximate 1,400 Hawaii prisoners currently housed in mainland facilities should be included in capacity planning for return to Hawaii facilities within the 10-year plan.

While the ACA standards should be viewed as minimum requirements, they have been recognized in both Federal and State Courts repeatedly throughout the U.S. as being useful and appropriate for helping assure safe, secure and effective correctional operating environments. Generally, following their principles has been proven time and again as a "good insurance policy" against lawsuits and court intervention, or even total system takeover as happened in Arizona in 1976, Tennessee in 1987, Louisiana and Texas in the 1980s and 90s. Continued lack of attention to making needed improvements in the general conditions of confinement and capacity expansion in the Hawaii system of both its State correctional facilities and its county community correctional centers could easily lead to State or Federal Court intervention.

To give the State an order of magnitude preliminary cost estimate for the recommended 10-year capital improvements plan in present value 2003 dollars, cost experience has been researched for a range of recent prison and jail projects of the types and sizes proposed herein. Also, both Architects Hawaii and the Capital Improvements Program staff of the PSD have provided their expert advice on recent and current construction cost experience in Hawaii.



### Chapter 3 CAPITAL IMPROVEMENTS PLAN

The preliminary budget need for the entire 2-Phase 10-Year plan (excluding certain unknown costs as noted in the table footnotes) is provided in Table 3-9. Table 3-10 presents a possible implementation schedule for both Phase 1 and Phase 2 projects recommending that facility planning/programming, design and construction to be completed year-by-year between 2004 and 2008 for Phase 1 and 2009 and 2013 for Phase 2. For new facility planning, site selection and design two years is assumed and three years for construction completion. For expansions at existing or future facilities one year is assumed to be sufficient for planning and design and two years for construction completion provided that sufficient land is readily available on or immediately adjacent to the facility that will accommodate the proposed expansion.

In the Phase 1 "Facilities Expansions" section of Tables 3-9 and 3-10, items 5 and 6 provide estimates for the cost of making additions to support spaces in eight existing PSD facilities. These additions are needed to make each facility compliant with space standards as originally used in the 1991 Master Plan and again in this update, based on the 2003 rated sleeping area bed capacity for each facility. Appendix A includes a table with a breakdown by general functional area category of the estimated space needs at each existing facility except for the Halawa SNCF since it is recommended for demolition.

**Savings with Replacements** – Finally, if all four CCCs are replaced, the \$22.2 million budget estimate for expanding the existing deficient support spaces can be deducted from the Phase I project costs. Similarly, if the Kulani CF, Waiawa CF and Women's CCC are replaced instead of being continued and expanded the \$19.7 million budget could be deducted. Appendix A provides the estimates for each facility.

**Facility Maintenance** – A critical component of the plan as discussed previously is the need to fully fund, staff and implement a comprehensive preventive maintenance program and to fund and make building and building systems repairs and upgrades in a much more timely manner than has been done in the past. With the degree of deterioration of numerous facilities found in this study, the PSDs maintenance and repair funding requests that have historically been deferred or substantially under-funded can no longer be ignored. Consequently, the budgeted amount by the PSD for this need is included as a line item in Phase 1 of the Master Plan preliminary capital projects budget estimates in Table 3-9.

All preliminary cost estimates in Tables 3-9 and 3-10 are 2003 present value dollars only as already noted and are based on formulas that use the number of beds for each proposed project multiplied by a square footage per bed estimator and a cost per square foot estimator in present value 2003 dollars. A 30% or 35% project cost estimator is also added to each project in order to give a realistic project estimate to include fees, testing, site preparation, furnishings, fixtures and moveable equipment, and a contingency but, excluding such unknowns as land acquisition, inflation to future years, financing costs, unusual building remodel conditions, and unusual site conditions.

Appendix A includes a Table, which specifies the various estimators used to generate the space estimates and preliminary present value construction and project cost estimates. It also includes a table that shows the square footage support space additions needed and resulting construction cost estimates by general functional category for each of the exiting eight PSD facilities (excluding the



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Table 3-9  
10-Year Capital Improvements Plan Preliminary Budget Estimates

Project	Construction Cost in 2003 \$*				Other Project Costs*	Project Cost 2003 \$*
	New Facility	Repairs/Maint. **	Remodel/Expand	Subtotal		
<b>PHASE 1 - 2004 - 2008</b>	<i>Phase 1 builds 1,860 new CF operational beds and 3,427 new CCC operational beds and makes needed support space expansions and major repairs.</i>					
<b>Facility Expansions</b>						
1. WCF @ 256 Medium, 150 Minimum, 32 Spc. Mgt.			\$ 33,626,250	\$ 33,626,250	10,087,875	\$ 43,714,125
2. Women's CCC @ 192 Medium, 16 Max/Close, 10 Spc. Mgt.			\$ 20,982,500	\$ 20,982,500	6,294,750	\$ 27,277,250
3. KCF @ 150 Minimum, 8 Spc. Mgt.			\$ 10,895,000	\$ 10,895,000	3,268,500	\$ 14,163,500
4. HMSCF @ 448 Medium, 150 Minimum, 32 Spc. Mgt +SNF Demo			\$ 60,861,800	\$ 60,861,800	21,301,630	\$ 82,163,430
5. CF Support Space Additions for Deficiencies			\$ 22,836,500	\$ 22,836,500	6,850,950	\$ 29,687,450
6. CCC Support Space Additions for Deficiencies			\$ 17,102,500	\$ 17,102,500	5,130,750	\$ 22,233,250
7. Unfunded Major Repairs & Replacement**		\$ to be provided by PSD		\$ -	-	\$ -
<b>New Facilities</b>						
1. Special Needs Treatment CF @ 498 beds, 24 Spc. Mgt. Cells	\$ 52,985,000			\$ 52,985,000	18,544,750	\$ 71,529,750
2. Oahu CCC @ 1,964 beds, 104 Spc. Mgt. Cells	\$ 135,685,000			\$ 135,685,000	47,489,750	\$ 183,174,750
3. Maui CCC @ 761 beds, 40 Spc. Mgt.	\$ 53,056,250			\$ 53,056,250	18,569,688	\$ 71,625,938
4. Kauai CCC @ 343 beds, 16 Spc. Mgt.	\$ 24,033,750			\$ 24,033,750	8,411,813	\$ 32,445,563
5. West Hawaii Correctional Center @ 359 beds, 16 Spc. Mgt.	\$ 25,133,750			\$ 25,133,750	8,796,813	\$ 33,930,563
<b>Totals Phase 1</b>	<b>\$ 290,893,750</b>	<b>\$ -</b>	<b>\$ 166,304,550</b>	<b>\$ 457,198,300</b>	<b>154,747,268</b>	<b>\$ 611,945,568</b>
<b>PHASE 2 - 2009 - 2013</b>	<i>Phase 2 would be implemented as needed for population growth to build up to 612 CCC operational beds and up to 2,570 new CF operational beds</i>					
<b>Facility Expansions</b>						
1. Maui CCC @ 32 medium, 25 min., 25 comm. Cust.			\$ 3,394,000	\$ 3,394,000	1,018,200	\$ 4,412,200
2. Oahu CCC @ 96 med., 25 min., 75 comm. cust.			\$ 7,932,000	\$ 7,932,000	2,379,600	\$ 10,311,600
<b>New Facilities</b>						
1. Hawaii CCC Hilo Facility @ 334 ops. beds, 16 Spc. Mgt.	\$ 22,916,250			\$ 22,916,250	8,020,688	\$ 30,936,938
2. Medium Security CF @ 613 beds, 32 Spc. Mgt.	\$ 53,617,500			\$ 53,617,500	18,766,125	\$ 72,383,625
3. Minimum Security CF @ 350 beds, 16 Spc. Mgt. Cells	\$ 25,605,000			\$ 25,605,000	8,961,750	\$ 34,566,750
4. Women's CF @ 512 beds, 24 Spc. Mgt. (replaces WCCC)	\$ 45,790,000			\$ 45,790,000	16,026,500	\$ 61,816,500
5. Substance Abuse Treatment CF @ 756 beds, 36 Spc. Mgt. (replaces WCF)	\$ 62,845,000			\$ 62,845,000	21,995,750	\$ 84,840,750
6. Minimum Security CF @ 275 beds, 16 Spc. Mgt. Cells	\$ 20,542,500			\$ 20,542,500	7,189,875	\$ 27,732,375
<b>Totals Phase 2</b>	<b>\$ 231,316,250</b>	<b>\$ -</b>	<b>\$ 11,326,000</b>	<b>\$ 242,642,250</b>	<b>84,358,488</b>	<b>\$ 327,000,738</b>

\* Preliminary estimates are in 2003 present value dollars only and include a 30% project cost additive for facility expansions and 35% for new facilities to include all fees, testing, site preparation, furnishings, fixtures and moveable equipment, and a contingency, but do not include any provision for future years inflation or financing costs, land acquisition, unforeseen building conditions, or unusual site conditions.

\*\* Includes unfunded repairs/maintenance allocation as reported by PSD budget requests for only those items that are facility or building systems related.

Source: Preliminary estimates by Carter Goble Associates, Inc., December 2003.





**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

**Table 3-10  
Project Budgets Allocation and Implementation Schedule 2004 – 2013**

PHASE 1 PROJECTS	Project Cost in 2003 \$*	Implementation Schedule by Year					
		Planning, Design, PM/CM**		Construction, PM/CM**			
		2004	2005	2005	2006	2007	2008
<b>Facility Expansions</b>							
1. WCF @ 256 Medium, 150 Minimum, 32 Spc. Mgt.	\$ 43,714,125	\$ 2,589,221		\$ 18,376,746	\$ 22,748,158		
2. Women's CCC @ 192 Medium, 16 Max/Close, 10 Spc. Mgt.	\$ 27,277,250	\$ 1,615,653		\$ 11,466,936	\$ 14,194,661		
3. KCF @ 150 Minimum, 8 Spc. Mgt.	\$ 14,163,500	\$ 838,915		\$ 5,954,118	\$ 7,370,468		
4. HMSCF @ 448 Medium, 150 Minimum, 32 Spc. Mgt +SNF Demo	\$ 82,163,430	\$ 4,686,359		\$ 34,630,364	\$ 42,846,707		
5. CF Support Space Additions for Deficiencies***	\$ 29,687,450	\$ 1,758,411		\$ 12,480,147	\$ 15,448,892		
6. CCC Support Space Additions for Deficiencies***	\$ 22,233,250	\$ 1,316,893		\$ 9,346,516	\$ 11,569,841		
7. Unfunded Major Repairs & Replacements	\$ to be provided by PSD						
<b>New Facilities</b>							
1. Special Needs Treatment CF @ 498 beds, 24 Spc. Mgt. Cells	\$ 71,529,750	\$ 1,854,475	\$ 1,854,475		\$ 18,279,825	\$ 28,082,050	\$ 21,458,925
2. Oahu CCC @ 1,964 beds, 104 Spc. Mgt. Cells	\$ 183,174,750	\$ 4,748,975	\$ 4,748,975		\$ 46,811,325	\$ 71,913,050	\$ 54,952,425
3. Maui CCC @ 761 beds, 40 Spc. Mgt.	\$ 71,625,938	\$ 1,856,969	\$ 1,856,969		\$ 18,304,406	\$ 28,119,813	\$ 21,487,781
4. Kauai CCC @ 343 beds, 16 Spc. Mgt.	\$ 32,445,563	\$ 841,181	\$ 841,181		\$ 8,291,644	\$ 12,737,888	\$ 9,733,669
5. West Hawaii Correctional Center @ 359 beds, 16 Spc. Mgt.	\$ 33,930,563	\$ 879,681	\$ 879,681		\$ 8,671,144	\$ 13,320,888	\$ 10,179,169
<b>Totals Phase 1</b>	<b>\$ 611,945,568</b>	<b>\$ 22,986,732</b>	<b>\$ 10,181,281</b>	<b>\$ 92,254,827</b>	<b>\$ 214,537,071</b>	<b>\$ 154,173,688</b>	<b>\$ 117,811,969</b>
<b>PHASE 2 PROJECTS</b>							
	Project Cost in 2003 \$	2009	2010	2010	2011	2012	2013
<b>Facility Expansions</b>							
1. Maui CCC @ 32 medium, 25 min., 25 comm. Cust.	\$ 4,412,200	\$ 213,822		\$ 1,878,579	\$ 2,319,799		
2. Oahu CCC @ 96 med., 25 min., 75 comm. cust.	\$ 10,311,600	\$ 499,716		\$ 4,390,362	\$ 5,421,522		
<b>New Facilities</b>							
1. Hawaii CCC Hilo Facility @ 334 ops. beds, 16 Spc. Mgt.	\$ 30,936,938	\$ 641,655	\$ 641,655		\$ 8,181,101	\$ 12,191,445	\$ 9,281,081
2. Medium Security CF @ 613 beds, 32 Spc. Mgt.	\$ 72,383,625	\$ 1,501,290	\$ 1,501,290		\$ 18,917,348	\$ 28,748,610	\$ 21,715,088
3. Minimum Security CF @ 350 beds, 16 Spc. Mgt. Cells	\$ 34,566,750	\$ 716,940	\$ 716,940		\$ 9,302,465	\$ 13,460,380	\$ 10,370,025
4. Women's CF @ 512 beds, 24 Spc. Mgt.	\$ 61,816,500	\$ 1,282,120	\$ 1,282,120		\$ 16,483,470	\$ 24,223,840	\$ 18,544,950
5. Substance Abuse Treatment CF @ 756 beds, 36 Spc. Mgt.	\$ 84,840,750	\$ 1,759,660	\$ 1,759,660		\$ 22,097,245	\$ 33,771,960	\$ 25,452,225
6. Minimum Security CF @ 275 beds, 16 Spc. Mgt. Cells	\$ 27,732,375	\$ 575,190	\$ 575,190		\$ 9,121,797	\$ 9,140,486	\$ 8,319,713
<b>Totals Phase 2</b>	<b>\$ 327,000,738</b>	<b>\$ 7,190,393</b>	<b>\$ 6,476,855</b>	<b>\$ 6,268,941</b>	<b>\$ 91,844,746</b>	<b>\$ 121,536,721</b>	<b>\$ 93,683,081</b>

\* Preliminary estimates are in 2003 present value dollars only and include a 30% project cost additive for facility expansions and 35% for new facilities to include all fees, testing, site preparation, furnishings, fixtures and moveable equipment, and a contingency, but do not include any provision for future years inflation or financing costs, land acquisition, unforeseen building conditions, or unusual site conditions.  
 \*\* A/E, Design/Build/Finance RFP, and Project/Construction Management fees combined are 10% of construction for new facilities and 11% for facility expansions.  
 \*\*\* These costs would be avoided by any facility replacements that are implemented.  
 Source: Preliminary estimates by Carter Goble Associates, Inc., December 2003.



**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

Halawa SNCF recommended for demolition). These additions are needed just to give each existing facility enough support space for the existing sleeping areas rated operational bed capacity at each facility.

**Annual Operating Expense Preliminary Cost Estimates**

For each recommended new facility or existing facility capacity expansion preliminary staffing targets were estimated and are included in the master plan narratives for each proposed project. In order to provide a general preliminary annual operating cost estimate the PSD staff provided the consultant with calculations of the average annual personnel cost per staff for CFs and CCCs based on the most recent 2003 salary, fringe benefits and overtime data. Also, PSD staff provided computations of the ratio of labor versus non-labor operating expenses for all CFs and all CCCs. These figures were applied to the preliminary staffing estimates in order to provide a preliminary total annual operating cost estimate in present value 2003 dollars. Table 3-11 provides a summary of the results of those computations.

**Table 3-11  
Annual Operating Costs Preliminary General Estimates  
(2003 present value dollars)**

Facility Project	New Ops. Beds	Total Staff	Staff Costs	Non-labor Costs	Annual Totals	Annual Cost per Bed	One-Time Startup Transition & Training
<b>Phase 1 Projects - 2004-2008</b>							
1. WCF Expansion	406	110	\$ 5,832,530	\$ 2,157,237	\$ 7,989,767	\$ 19,679	\$ 874,880
2. WCCC Expansion	208	73	\$ 3,870,679	\$ 1,431,621	\$ 5,302,300	\$ 25,492	\$ 580,602
3. Kulani CF Expansion	150	40	\$ 2,120,920	\$ 784,450	\$ 2,905,370	\$ 19,369	\$ 318,138
4. Halawa MSCF Expansion	598	158	\$ 8,377,634	\$ 3,098,577	\$ 11,476,211	\$ 19,191	\$ 1,256,645
5. New Special Needs Treatment CF	498	298	\$ 15,800,854	\$ 5,844,151	\$ 21,645,005	\$ 43,464	\$ 2,686,145
6. New West Hawaii Regional CC	359	126	\$ 6,932,898	\$ 2,564,223	\$ 9,497,121	\$ 26,454	\$ 1,178,593
7. New Kauai CCC	343	120	\$ 6,602,760	\$ 1,972,253	\$ 8,575,013	\$ 25,000	\$ 1,122,469
8. New Maui CCC	761	267	\$ 14,691,141	\$ 4,388,263	\$ 19,079,404	\$ 25,071	\$ 2,497,494
9. New Oahu CCC	1,964	690	\$ 37,965,870	\$ 11,340,455	\$ 49,306,325	\$ 25,105	\$ 6,454,198
<b>Totals</b>	<b>5,287</b>	<b>1,882</b>	<b>\$ 102,195,286</b>	<b>\$ 33,581,230</b>	<b>\$ 135,776,516</b>	<b>\$ 25,681</b>	<b>\$ 16,969,163</b>
<b>Phase 2 Projects - 2009-2013</b>							
1. Maui CCC Expansion	82	16	\$ 880,368	\$ 262,967	\$ 1,143,335	\$ 13,943	\$ 132,055
2. Oahu CCC Expansion	196	40	\$ 2,200,920	\$ 657,418	\$ 2,858,338	\$ 14,583	\$ 330,138
3. New Hawaii CCC - Hilo	334	118	\$ 6,492,714	\$ 1,939,382	\$ 8,432,096	\$ 25,246	\$ 1,103,761
4. New Medium Security CF	613	215	\$ 11,399,945	\$ 4,216,418	\$ 15,616,363	\$ 25,475	\$ 1,937,991
5. New Minimum Security CF	350	92	\$ 4,878,116	\$ 1,804,235	\$ 6,682,351	\$ 19,092	\$ 829,280
6. New Women's CF	512	268	\$ 14,210,164	\$ 5,255,814	\$ 19,465,978	\$ 38,019	\$ 2,415,728
7. New Substance Abuse Treat. CF	756	396	\$ 20,997,108	\$ 7,766,054	\$ 28,763,162	\$ 38,047	\$ 3,569,508
8. New Minimum Security CF	275	73	\$ 3,870,679	\$ 1,431,621	\$ 5,302,300	\$ 19,281	\$ 658,015
<b>Totals</b>	<b>3,118</b>	<b>1,218</b>	<b>\$ 64,930,014</b>	<b>\$ 23,333,908</b>	<b>\$ 88,263,922</b>	<b>\$ 28,308</b>	<b>\$ 10,976,477</b>

Source: Preliminary estimates by Carter Goble Associates, Inc. based on PSD FY2003 cost data. December 2003.

The staff costs were estimated by using an FY2003 value of \$53,023 to include the CFs average salary, fringe benefits and overtime per staff. For the CCCs the comparable average figure used was \$55,023 annually. Certain costs that are normally paid by the PSD in a lump sum or single payment rather than separately for each facility were allocated by the PSD to the facilities for this analysis on a per staff or per inmate count basis as appropriate.



Chapter 3  
CAPITAL IMPROVEMENTS PLAN

Non-labor annual facility operating expenses use the FY2003 average cost ratios of 73% personnel/27% non-labor costs for CFs and 77%/23% for the CCCs to derive the estimates in Table 3-11. Typically correctional facilities incur annual operating expenses anywhere from a 75%/25% ratio to 80%/20% ratio so the experience in Hawaii is very close to that normal range. Since the system now incurs extraordinary annual non-labor operating costs as payments to other states for approximately 1,400 Hawaii prisoners, the ratio for the CFs is slightly lower on the labor side versus non-labor costs. This ratio would shift as new capacity is brought on-line and the payments to other states are reduced. The one-time startup transition/activation and training costs are based on 17% of annual staff costs for new facilities and 15% for facility expansions since the expansions will only need the training but not the transition/activation staff time costs as for a new facility.

**Cost Efficiency/Cost Savings** – While the addition of new facilities and expanded capacity at existing facilities will certainly increase the PSD annual operating budget the improved staffing patterns and efficiency inherent in new contemporary housing unit designs and floor plans will lead to cost savings in the long-run. Although the proposed new Special Needs Secure Treatment Facility is unlike any facility currently in the Hawaii system and will cost significantly more to operate per bed due to the higher number of custody staff and specialist diagnostic and treatment staff needed, the other new facilities compare quite favorably. For example, the average estimated annual operating cost per bed from Table 3-11 for the Phase 1 new CCCs, the Kulani CF expansion and the Halawa Medium CF expansion all have a lower cost per bed compared to the FY2003 averages by facility as follows:

Phase 1 Projects Estimated Annual Operating Cost per Total Beds		Existing FY 2003 Annual Operating Cost per Total Beds	
▪ New CCCs Average	\$25,400	▪ CCCs Average	\$27,806
▪ KCF Expansion	\$19,369	▪ KCF	\$27,663
▪ HCF Expansion	\$19,191	▪ HCF	\$23,070

Note: All computations are based on the total of rated operational capacity beds and non-operational special management beds and exclude non-assigned central office administrative costs.

The single greatest potential cost savings benefit from the recommended Phase 1 projects would be from the new CCCs. For example, the operational bed capacity included in the four new jail projects in Phase 1 is 3,427 as compared to the current CCC rated operational bed capacity of 1,609 for a difference of 1,816 beds. If *just those additional beds* were occupied and operated at the current annual operating cost per bed for CCCs of \$27,806 the added cost would be approximately \$50.5 million a year. For the new facilities proposed, however, operating at an average of \$25,400 per bed per year the cost would be approximately \$46.1 million a year, which is a savings of approximately \$4.4 million a year in present value dollars.

In conclusion it should be remembered that there is also the possibility for additional cost savings over the current capital project cost estimates and the annual operating cost for those six CF facilities that could be co-located on a single large site on Oahu (see Figure 3-13) rather than being built on six separate sites.