

KEY RECOMMENDATIONS OF THE HCR 85 TASKFORCE
CREATE A NEW VISION FOR CORRECTIONS IN HAWAII

Issue: Hawaii's correctional system is not producing acceptable, cost-effective, or sustainable outcomes, and it is not making our communities safe. The State spends over \$226 million a year on corrections, but we have a recidivism rate of over 50% and more than 27,000 citizens under some form of correctional supervision.

The recidivism rate in Hawaii is calculated by the Interagency Council on Intermediate Sanctions (ICIS). The recidivism rate in Hawaii is BELOW 50% and not over 50%, as alleged.

Recommendations:

1. *Transition to a more effective and sustainable correctional system that focuses on rehabilitation rather than punishment.*

In 2016, the Department of Public Safety (PSD) formally established a Reentry Coordination Office (RCO) to work with the Correctional Facilities to address the rehabilitative and transitional needs of the prison population. As of December 2019, all RCO's positions were actively filled.

The positions are: (1) RCO Coordinator, (1) Training, Planning and Staff Development Corrections Program Specialist (This position became vacant on January 9, 2020.), (1) Risk Assessment Program Specialist, (1) Statewide Automated Victim Notification (SAVIN) Program Specialist, (1) Victim Services Program Specialist, and (2) Restitution Collection Specialists.

The RCO works with the Correctional Centers and Facilities; Courts; Departments of Health, Human Services, Transportation, etc.; and other State, Federal, County, and Community Partners to establish evidence-based programs for those we serve. Also, in conjunction with the Interagency Council on Intermediate Sanctions (ICIS), PSD trains staff on interactive methods of case management, including Motivational Interviewing (MI), Cognitive Behavioral Therapy (CBT), Level of Service Inventory-Revised (LSI-R), and Collaborative Case Work (CCW).

2. *Create an Implementation Commission and transitional coordinator position to ensure that the transition to a rehabilitative system takes place in a timely, efficient, and effective manner.*

Established by Act 179, Session Laws of Hawaii 2019.

Assigned to the Office of the Attorney General for administrative purposes.

3. *Create an Oversight Commission to immediately address prison suicides, sexual assaults, and other unacceptable and unlawful conditions in our prison system.*

Oversight Commission Established by Act 179, SLH 2019.

Assigned to the Office of the Attorney General for administrative purposes.

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PSD's Health Care Division has worked diligently over the years to follow the guidelines of the Federal Department of Justice's best practices in Suicide Prevention. This included creating and maintaining active mental health programming for offenders, suicide watch guidelines and practices, and adhering to documentation and active monitoring practices regarding suicide prevention.

According to the December 2016 Bureau of Justice Statistics reports, suicide was identified as the leading cause of death in local jails and the second leading cause of death in state prisons. Since then, Correctional Mental Health Directors and Health Authorities at the National Commission on Correctional Health Care, the American Correctional Association, and the National Institute of Corrections have reported increased rates of suicide in correctional facilities nationwide. Deaths by suicide are now reported nationally as occurring more frequently than identified in the 2016 Bureau of Justice Statistics reports.

PSD moved proactively in the 2017-18 fiscal year (FY) to implement a plan of action to improve the Department's comprehensive Suicide Prevention Program. The 2018, 2019, and 2020 Reports to the Legislature, required by Act 144, SLH 2007, document the numerous actions taken, as well as the results of PSD's Suicide Prevention Program. In calendar years (CY) 2018 and 2019, Hawaii had the **lowest** suicide rate among the six integrated jail/prison systems nationwide. But while PSD has experienced some success in improving the Department's comprehensive Suicide Prevention Program, there remain areas in need of further development. PSD seeks to address several problematic components of the comprehensive Suicide Prevention Program through current Legislative budget requests. However, if funding needs are not met, suicide rates will likely rise again and with these deaths, potential legal costs for the State.

Following is a summary of the Suicide Prevention components and the proposed improvements to each.

Physicians and Psychiatrists

Physicians and Psychiatrists act to reduce the risk for suicide by providing medical and psychiatric treatment for identified dynamic risk factors of suicide, including episodes of acute, serious medical illnesses, and symptoms of mood and psychotic disorders. The absence or delay in treatment by physicians and psychiatrists leads to ongoing and increased risk for suicide. The current 7.0 FTE out of 12.5 FTE available positions of physicians and psychiatrists is insufficient to meet the needs of our correctional population to effectively reduce medical and psychiatric risks factors of suicide.

There are two primary reasons for the difficulty with recruitment and retention of physicians and psychiatrists: a) the national shortage of physicians and psychiatrists, and b) an underfunded payroll to match the salaries required to compete in the national market for physicians and psychiatrists.

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In order to compete in the national market for the recruitment and retention of physicians and psychiatrists, an increase in budgeted salary is needed to match local and national demand. The Health Care Division intends to increase physician and psychiatrist salaries by March 2020 in order to improve our recruitment and retention efforts. The projected annual payroll shortfall for physicians and psychiatrists in need of correction is \$676,917. PSD's supplemental budget request for FY 2021 includes funding for the payroll shortfall.

Clinical Psychologists

Clinical Psychologists in our correctional facilities primarily conduct psychological evaluations and provide therapeutic intervention for individuals with serious mental health needs. The Clinical Psychologist conducts the Suicide Risk Evaluation when an individual in custody exhibits suicide warning signs. The Clinical Psychologist also provides individual psychotherapeutic intervention to help reduce the dynamic risk factors for suicide. The absence or delay in evaluation and treatment by Clinical Psychologists leads to ongoing and increased risk for suicide, and again, PSD's 13.0 FTE out of 15.0 FTE of Clinical Psychologists are insufficient to effectively operate the Suicide Prevention Program to meet the needs of our correctional population.

With the Department's Human Resources staff, the Health Care Division has been somewhat successful in addressing the long-standing recruitment problem by focusing recruitment efforts on new Clinical Psychology graduates, who must complete one-year's postdoctoral experience prior to licensure in the field. Retaining Clinical Psychologists following completion of the postdoctoral year, however, remains a serious problem. PSD intends to implement the Licensed Health Care Professional Pilot Project and increase Clinical Psychologist salaries in FY 2020 in order to increase retention. The projected annual payroll shortfall for the needed Clinical Psychologists is \$277,494. PSD's supplemental budget request for FY 2021 includes funding for the payroll shortfall.

Suicides Are Not Limited to Business Hours

Individuals in custody do not only become suicidal and do not only require therapeutic intervention for the reduction of suicide risk during normal business hours (Monday through Friday, 0745 to 1630). The Mental Health Staffing plan provides clinical psychology services during business hours, which clearly does not fully meet the needs of the comprehensive Suicide Prevention Program. Clinical Psychology staffing must be increased at six correctional facilities (i.e., Halawa Correctional Facility (HCF) and the jails: OCCC, WCCC, HCCC, MCCC, and KCCC), which all operate on a 24/7 basis, for the Department to begin addressing the urgent need for evening and weekend mental health services

24-Hour Neighbor Island Jail Nurses

The current number of allotted nursing positions at our neighbor island jail facilities provides nursing services approximately twelve hours a day at HCCC, MCCC, and KCCC. The current Staffing Plan is insufficient to fully meet the needs of the comprehensive Suicide Prevention Program. The identified problem is an absence of 24-hour in-facility health care coverage at our neighbor island jails. The provision of 24-hour infirmary-level of care monitoring by nursing staff at designated intervals is critical for an individual at

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moderate to high acute risk for suicide and is an essential component of the Suicide Prevention Program. Additionally, nursing staff must be available 24-hours a day to provide in-person Mental Health and Medical Crisis Assessment and Intervention, particularly when mental health staff are not on duty. An additional 3.5 FTE Registered Nurse III positions are needed at each of the three facilities. PSD's supplemental budget request for FY 2021 includes funds for these Registered Nurse positions.

Standard of Care

The Department has embraced the national Zero Suicide Initiative and continues to work towards the goal of eliminating all preventable deaths by suicide. We are mindful of this nationwide issue and continue to discover additional considerations of risk for suicide and observe and incorporate nationally recognized best practices into PSD's Suicide Prevention Program. The ongoing objective has been to surpass the Department of Justice's requirement of constitutionally-adequate mental health service delivery and align with the higher national standards of mental health care, as set by the National Commission on Correctional Health Care (NCCHC). Dr. Joel Dvoskin's November 2018 Expert Report on Mental Health Care at OCCC lauded PSD's early encouraging results, and last year, this progress was recognized with the NCCHC conferring re-accreditation status for WCCC in May 2019 and for OCCC in November 2019.

Prison Rape Elimination Act

The Department has followed the National Standard for Prison Rape Elimination Act (PREA) since 2003. In 2012, PSD shepherded Hawaii's early adoption of PREA standards, requiring stringent adherence to national standards and commitment to a "zero tolerance" policy against sexual assault, abuse, harassment towards inmates by other inmates, staff, volunteers, and/or contractors. This included: creating a PREA Checklist that is integrated with a Major Incident Checklist Notification, training on PREA incidents for all staff, establishing PREA Coordinators for each correctional site, training on PREA investigations, self-monitoring by sites, and monitoring by certified PREA inspectors from other States on a rotational basis. This Quality Assurance practice insures that each participating State maintain PREA Standards as set by PREA 2003, Title 28, Code of Federal Regulations Part 115.

Finally, it should be noted that PSD also has a "zero tolerance" policy for unlawful conditions at all facilities and offices. PSD reviews all information provided on unlawful conditions and investigates them thoroughly.

4. *Create a Corrections Academy to train correctional workers at all levels in rehabilitative philosophy and practices.*

The Department has maintained and operated a staff training academy since the early 1980s. This productive and professional branch, Training and Staff Development Academy (TSD), is located at 801 Dillingham Boulevard and is open by appointment for review and inspection.

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TSD provides training for new staff and refresher training for existing staff, utilizing other staff who are certified trainers guided by National Standards, the National Institute of Corrections (DOJ/NIC) and training by standards of all Federal, State and County laws, rules and regulations, as established in Hawaii. The Basic Correctional Training Program offers courses such as Inmates Constitutional and Civil Rights, Substance Abuse and Co-occurring Disorders, Inmate Program and Services and the Referral Process, Inmate Health Services, and Recognizing Inmate Alcohol and Substance Abuse.

In addition, the Criminal Justice Research Institute (CJRI), established by Act 179, Session Laws of Hawaii 2019 may propose and recommend to PSD the implementation of correctional training based on evidence-based research and practices.

REDUCE THE NUMBER OF NATIVE HAWAIIANS IN THE PRISON SYSTEM

Issue: Native Hawaiians make up approximately 21% of the general population, but 37% of the prison population. This overrepresentation has existed for decades and has led to **intergenerational incarceration** for some Native Hawaiian families.

Recommendations:

1. *Develop evidence-based early intervention strategies that are focused on diverting Native Hawaiian youth away from the criminal justice system and toward pathways for success.*

PSD recommends that the Department of Education (DOE), Department of Human Services (DHS), and the Office of Hawaii Affairs (OHA) partner with the CJRI to develop evidence-based early intervention strategies that are focused on offering Native Hawaiian youth pathways for greater societal success and diversion from the criminal justice system.

2. *Create cultural courts in the criminal justice system.*

PSD recommends that the Judiciary partner with CJRI and OHA to establish this practice.

3. *Expand in-prison Native Hawaiian educational and cultural programs.*

PSD makes every effort to establish cultural programs for the community, however, PSD has experienced challenges in finding providers in the community to maintain these programs at the desired level. Nevertheless, PSD has made every effort to maintain and perpetuate all programs provided by Hawaiian Cultural Practitioners.

Below are the Native Hawaiian cultural programs that are offered in the different correctional facilities:

Beginning and Advanced Ukulele; Carving; Environmental Horticulture; Hawaiian Language (computer-based program); Hawaiian Studies; Introduction to Ho`oponopono (Hawaiian culture class focused on forgiving others to whom we are connected); Imu

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Cooking; Ke Ala Hou Reentry Program (includes Hawaiian values in the workplace); Ku Kanaka (a program that enables the participants to explore and examine life through the lens of our kupuna (elders/ancestors), our makua (parents), our ohana (family) and aina (land). Through these revelations, the participants learn how to evoke these understandings to guide their futures. Also, Local Solutions in Action; Pahu Drum; Paniolo Small Ruminant Farming; Recycled Art; and Wood Carving: Poi Boards.

At the Saguaro Correctional Center in Eloy, Arizona, the following Native Hawaiian Programs are offered:

Native Hawaiian Makahiki Season Opening/Closing Ceremonies; Native Hawaiian Equinox Services; Native Hawaiian Winter, Summer, and Fall Solstice Services; Native Hawaiian Language Classes; and Native Hawaiian Dance and Chant classes.

The Corrections Program Services Division has reached out to Kamehameha Schools for a partnership to expand Native Hawaiian cultural programming in correctional facilities.

For FY 2019, 4,559 Native Hawaiian inmates enrolled in various educational programs, such as, Assessment, Academic, Career and Technical, Language and Cultural Studies, and Self-Development Programs. Program completion was 35% (1,606 out of 4,559). (An inmate is counted more than once if he or she enrolled in more than one program). In the same period, out of 67 inmates who obtained High School Equivalency (GED/HiSET) diplomas, 30 inmates or 45% were Native Hawaiians.

4. *Make culturally relevant reentry programs available to Native Hawaiians.*

Referrals are made to available Native Hawaiian programs for those who are returning to the community. PSD provides offenders and their ohana with opportunities to engage in these community resources through direct services provided by facility case management staff and through a Resource Guide provided in every housing unit, as well as, family visits to the PSD Web site. The link is below:

<https://dps.hawaii.gov/wp-content/uploads/2019/11/2019-Community-Resource-Guide.pdf>

5. *Implement the recommendations of the 2012 Native Hawaiian Justice Task Force.*

The Report of the recommendations of the 2012 Native Hawaiian Justice Task Force was completed in 2012. One significant recommendation was to have all women offenders returned to Hawaii, which PSD completed prior to 2012.

PSD continues to offer programs to offenders who are self-motivated to participate in established programs. (See the Reentry Services Educational Listing, linked below.)

<https://dps.hawaii.gov/wp-content/uploads/2018/12/Reentry-Services-Inventory-as-of-12-7-18.pdf>

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EVALUATE, IMPROVE, AND EXPAND EVIDENCE- BASED PROGRAMS

Issue: Evidence-based programs are an essential part of the rehabilitation process and are a cost-effective way to reduce recidivism.

PSD Information Technology Systems will be procuring a single platform Corrections solution, officially named “*Corrections Collaboration System*,” to allow evidence-based programs to evaluate and analyze data appropriately. A professional assessment on PSD’s information technology systems revealed that PSD had nearly 90 separate and independent data systems. These stand-alone systems were developed by individual program staff to carry out and track their work objectives when the antiquated offender tracking system (OffenderTrak) failed to meet their needs. The assessment suggested that OffenderTrak, which was purchased off the shelf in the late 1990s was used as-is, without being customized to service PSD’s programs. As a result, PSD was not using evidence-based information to make meaningful decisions, including inmate classification, facility placement, and programming decisions. The comprehensive assessment of PSD’s nearly 90 separate and independent data systems helped PSD to determine how to create a pathway to one unified corrections information management system that could inform the decisions PSD to make. This was the first time PSD had attempted such a large-scale, multi-faceted undertaking to comply with the Justice Reinvestment Initiative established by the Hawaii Legislature in 2012. It was a daunting challenge, but this unified system will help with IT modernization by improving public-facing visitor registration and monitoring, courtroom interface for all counties, information quality and data entry speed for inmate processing, and accurate management and assessment in corrections programs. It will also help with research of trending reform methods that reduce inmate return rates (recidivism).

Recommendations:

1. *Ensure that every prisoner is functionally literate by the time of release.*

PSD makes every effort to motivate offenders to participate in literacy, adult education and/or GED classes. However, all programs are voluntary. If the offender is unmotivated, PSD cannot force them to take even basic literacy classes. It should also be noted that some offenders do not have the functional capacity to become “functionally literate.” However, PSD does make every effort to accommodate those with special educational and/or ADA needs.

2. *Expand opportunities for prisoners to take community college courses.*

PSD’s Education Branch has been working with the University of Hawaii System to allow offenders to enroll in a variety of community college classes to obtain credits and, in time, degrees.

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3. *Create a prison-to-college pipeline.*

Already established. See PSD's Annual Report from the Corrections Program Services Division's Education Branch.

4. *Restore funding to the highly successful sex offender treatment program.*

Funding for the Sex Offender Treatment Program has not been cut or diminished. The program continues to provide in-facility and aftercare treatment. It should be noted that an important impediment is the shortage of treatment providers in the community.

5. *Require prisoners to participate in at least three programs that address **criminogenic factors**.*

Offenders are offered and provided a variety of programs that address criminogenic factors identified through the Level of Service Inventory-Revised (LSI-R) assessment. PSD, the Judiciary, the Hawaii Paroling Authority, and the Department of Health are all trained by the Interagency Council on Intermediate Sanctions (ICIS). The EBP was established 20 years ago and continues to be updated, with staff being recertified and retrained to ensure that proper assessments are completed. Program recommendations are based on their assessments. Again, program participation is voluntary, not mandatory.

6. *Expand restorative justice programs.*

PSD continues to work with the Victim Services community to establish Restorative Justice Programs that are evidence-based. PSD has been recognized nationally as a model for its Victims Restitution Collections Program. In addition, PSD recently added Victim Impact classes to the list of Restorative Justice related programs.

IMPROVE THE REENTRY PROCESS AND SUPPORT THE DEVELOPMENT OF NEW TRANSITIONAL HOUSING

Issue: Hawaii does not (have) an effective support system (for) prisoners reentering the community.

In 2016, PSD established its Reentry Coordination Office (RCO). In the past three years, the RCO has reviewed all contracts relating to transitional housing and improved the processes in which Requests for Proposal (RFP) are conducted, vetted, and awarded.

In addition, the RCO reviewed all reentry programming within PSD and the community, and then developed a fluid Resource Guide which is posted on PSD's website. See link below:

<https://dps.hawaii.gov/wp-content/uploads/2019/11/2019-Community-Resource-Guide.pdf>

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RCO also created a Reentry Form which has been designed to assess detainee and/or prisoner needs for transition. This may include, but is not limited to educational programming, medical/mental health/dental, treatment programming, vocational/employment training, housing, restitution, identifying documents. etc.

Further, Hawaii Correctional Industries (HCI), a program under PSD, provides able-bodied inmates with every opportunity for reformation, rehabilitation, and ultimately, reintegration through vocational training and work opportunities. HCI is committed to maintaining and expanding work training programs which develop marketable job skills, allowing for effective reentry and reintegration in the community.

Moreover, based on Act 56, SLH 2017, PSD has established a process for detainees and offenders to obtain their birth certificates regardless of their birthplace. PSD continues to diligently work with the Department of Transportation and the Social Security Administration to establish effective ways for detainees and offenders to obtain their Civil IDs, including Social Security Cards. Due to the complexities of the Federal Real ID Act of 2005, it has been very difficult for many state prisons to formalize these processes for prisoners.

Recommendations:

1. *At the time of release all prisoners should have a decent place to live, employment, health insurance, identification, and access to addiction and mental health services.*

PSD fully agrees with the above. In addition to addiction and mental health services, treatment services for sex offenders, family support services, and other supportive transitional services should be recommended to the exiting prisoner prior to their release. PSD makes every effort to provide information and connections to those exiting our facilities. PSD also makes every effort to work with community providers to ensure that aftercare services are available for those being released. PSD would hope that the often-difficult behind-the-scenes work of our staff in ensuring continuity of housing and related support for those being released receives the recognition it is due.

2. *Amend or eliminate status that erect barriers to reentry.*

The elimination of barriers and obstacles for those exiting the system takes the involvement and cooperation of prisoners, their support networks (i.e., family, friends, employers, etc.), and the community.

3. *Create a unit within PSD to locate housing to place the inmates who (are) eligible for release.*

Such services are currently provided for all inmates being paroled via the Hawaii Paroling Authority (HPA).

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RCO was established in 2016 to create additional opportunities for PSD to assist offenders otherwise being released from our system (Max-Out).

4. *Designate Leahi Hospital as the default placement for compassionate release of prisoners who require specialized (e.g., hospice) medical care.*

Leahi Hospital continues to be under the jurisdiction of the Department of Health (DOH). However, PSD would be open to the start of discussions with the DOH.

*Note: PSD already works in tandem with DOH and DHS in such cases

5. *Expand transitional housing through partnerships with nonprofit (agencies).*

PSD has already established this process. We currently work with other State agencies (DOH, DHS, and the Hawaii Interagency Council on Homelessness) and nonprofit agencies such as, Makana O Ke Akua (MOKA) and the YWCA, etc. However, PSD and all agencies agree that the extreme shortage of affordable housing statewide severely hampers our ability to place offenders in transitional housing.

BUILD A NEW JAIL THAT IS SMARTER THAN JAIL UNDER CONSIDERATION

Issue: The State is planning to spend over \$525 million on a new jail on Oahu, but it has no plans or policies on how to make the pretrial from arrest to trial more just and efficient, and know-how to reduce the jail population and ensure the new jail does not warehouse for the poor, homeless, and mentally ill.

PSD recognizes this issue as a systemic one. PSD does not have control over who is arrested or recommended for pretrial hold by the Judiciary to the Courts. Our Intake Services Centers Division has actively engaged with all recommendations of Act 179 SLH 2019. Moreover, PSD continues to be an active participant with the Governor's Hawaii Interagency Council on Homelessness and has partnered with DOH and DHS on these matters.

Recommendations:

1. *Stop any further jail planning until there is a plan to reduce the jail population through diversion, bail reform and other means and ensure that the jail houses only those few who a danger society or flight risks.*

PSD has not had a new jail built since the 1970s. In fact, all jail sites have had only modifications of expanding housing structures since then. The current OCCC location has constant infrastructure deficiencies which are costly to resolve. The housing is antiquated and needs replacement for better operations of all programming needs of the inmates.

PSD is actively following all points of Act 179, SLH 2019 – Relating to Corrections. This includes bail reform recommendations.

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2. *Build the jail near the Courts not in Halawa Valley.*

PSD will continue to follow the established site selection recommendations.

3. *Build a jail that uses clustered housing and dynamic security.*

PSD will continue to follow all National Standards and Models suited for a jail.

4. *Do not house the mentally ill or probation or parole violators in the new jail.*

All arrestees on Oahu are currently processed at the OCCC location for intake. As probation violators are considered a part of the jail population, they will remain at OCCC. Once processed and assessed, all male parole violators are sent to HCF. Females probation and parole violators are processed at OCCC and facility assigned commensurate with their status and housed either at OCCC / FDC (SFP's) or at WCCC (PARV's).

All those assessed with Mental Health disorders are housed in accordance with National Commission on Correctional Health Care (NCCHC) Accredited standards to ensure their needs are appropriately met (OCCC/WCCC).

OTHER RECOMMENDATIONS

1. *Adopt a rehabilitative vision and mission statement and rehabilitative goals and objectives for PSD.*

Our Mission Statement: To uphold justice and public safety by providing correctional and law enforcement services to Hawaii's communities with professionalism, integrity and fairness.

The Department is committed to the betterment of all offenders' lives we encounter. All Corrections Division programs are geared towards self-improvement, educational, vocational, transitional, treatment and health services (including mental health and treatment services). We consider all of the individuals' needs and develop program and treatment plans through their prescriptive plans. PSD is open to the rhetorical recommendation that systemic rehabilitative goals and objectives be included in its mission statement.

2. *Expand the community treatment programs alternative to incarceration.*

PSD is anxiously waiting further recommendations from the Oversight Commission established by Act 179, SLH 2019. It is only through a Judicial directive that PSD can place a pretrial or convicted person into In-Community treatment programs/housing in lieu of incarceration.

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3. *Expand the drug, mental health, and veterans' courts.*

Agreed. PSD supports these Judicial reforms.

4. *Reform the cash bail system to reduce the jail population.*

PSD will follow §804-7 Release After Bail, as required by Act 179, SLH 2019.

5. *Create a Sentencing Reform Commission to review the penal code with the goal of downgrading offenses and shortening sentences.*

PSD recommends the Act 179, SLH 2019 Oversight Commission thoroughly review the December 2015 Report of the Committee to Review and Recommend Revisions to the Hawaii Penal Code, submitted to the 2016 Legislature, 28th Regular Session, linked below:

https://www.courts.state.hi.us/docs/news_and_reports_docs/2015_PENAL_CODE_REVIEW_REPORT-FINAL-12-30-15.pdf

6. *Set numerical goals timetable for reducing Hawaii Prison populations.*

The reduction of Hawaii's prison population is determined by the number of court-ordered admissions/releases and the number of parole release orders issued by the HPA, both of which are beyond the scope and authority of PSD.

PSD is currently working on various CIP projects to address our overpopulation situation. This includes the expansion of minimum/community beds for WCCC, HCCC, KCCC, and MCCC housing units.

In addition, PSD continues to work with outside agencies to address community bed space through transitional housing for those who are eligible and with our partners in the ICIS to minimize inmates returned to prison as Parole/Probation violators or for new crimes.

7. *Support federal legislation that would benefit Hawaii such as a restoration of Pell grants for prisoners.*

PSD supports the restoration of the Pell Grant Program for offenders. PSD will be partnering with Chaminade University of Honolulu (CUH) to meet the mission and goals of Pell for Students who are Incarcerated Experimental Site (Second Chance Pell) by developing an experimental site that allows the use of Federal Pell Grants to pay for postsecondary education and/or training.

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8. *Support the initiative to create BA and MA program in Criminology/ Criminal Justice at the University of Hawaii at Manoa.*

PSD has long supported Criminology and Criminal Justice classes within the University of Hawaii and Chaminade University programs in Honolulu. The Department will continue supporting these educational changes and expansions to all local universities.

In addition to BA and MA programs in Criminology/Criminal Justice at the UH Manoa, the community colleges in Honolulu, Hilo, and Maui offer associate degrees in Administration of Justice and related fields. These programs are suitable to careers in corrections. PSD is working with the UH system to strengthen and enhance the school-to-career pipeline for positions in public safety. For example, PSD will be waiving the entry level examination process for all candidates in possession of an associate of science degree in Administration of Justice from the University of Hawaii system, and any conferred degrees from an accredited community college or university in Criminology, Criminal Justice or related fields of study.

9. *Support a second round of Justice Reinvestment for Hawaii.*

PSD has continued to follow all Justice Reinvestment Initiative processes as established in 2012, in partnership with the Hawaii State Legislature, Judiciary, and the Council of State Governments. PSD has made progress in establishing the Reentry Coordination Office, and its Restitution Collection program has been touted as a national model.