

JOSH GREEN, M.D.  
GOVERNOR  
KE KIA'ĀINA



STATE OF HAWAII | KA MOKU'ĀINA O HAWAII  
**DEPARTMENT OF PUBLIC SAFETY**  
*Ka 'Oihana Ho'opalekana Lehulehu*  
1177 Alakea Street  
Honolulu, Hawaii 96813  
808-587-1288

**TOMMY JOHNSON**  
DIRECTOR

**Melanie Martin**  
Deputy Director  
Administration

**Sanna Muñoz**  
Deputy Director  
Corrections

**Mark Hanohano**  
Deputy Director  
Law Enforcement

No. \_\_\_\_\_

December 14, 2023

The Honorable Ronald D. Kouchi  
President and Members of the Senate  
Thirty-second State Legislature  
State Capitol, Room 409  
Honolulu, Hawai'i 96813

The Honorable Scott K. Saiki  
Speaker and Members of the  
House of Representatives  
Thirty-second State Legislature  
State Capitol, Room 431  
Honolulu, Hawai'i 96813

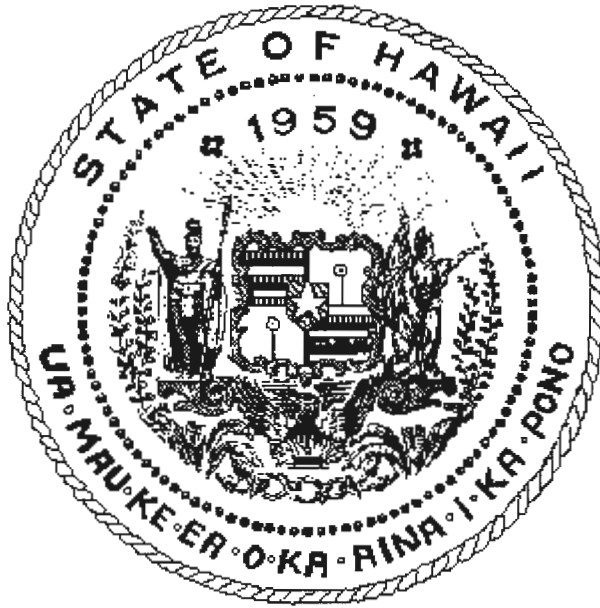
Dear President Kouchi, Speaker Saiki, and Members of the Legislature:

For your information and consideration, I am transmitting a copy of the **Report to the Legislature in Response to HRS 353G-13 (c) Criminal Offender Treatment Act** as required by Act 212, Session Laws of Hawaii 2018, §353H, Hawaii Revised Statutes. In accordance with Section 93-16, Hawaii Revised Statutes, I am also informing you that the report may be viewed electronically at: [Department of Public Safety | 2023 Reports to Legislature \(hawaii.gov\)](https://www.dps.hawaii.gov/2023-reports-to-legislature)

Sincerely,

  
Tommy Johnson  
Director

Enclosure



**DEPARTMENT OF PUBLIC SAFETY  
REPORT TO THE 2024 LEGISLATURE**

**IN RESPONSE TO HRS 353G-13 (c)  
CRIMINAL OFFENDER TREATMENT ACT**

**December 2023**

## **INTRODUCTION**

The Department of Public Safety (PSD) is statutorily required to report on an annual basis to the Legislature and to the Governor, its findings concerning the need for and implementation of the various provisions of Chapter 353G. The report must include information collected under HRS 353G-13 (c), subsection:

- (a) Every assessment program, treatment program, correctional center or facility, and parole agency that provides services pursuant to this chapter or that otherwise supervises a person or issues an order pursuant to this chapter shall keep case specific records and aggregate data and statistics as may be required by the Department of Health and which shall be required by the statewide substance abuse treatment monitoring program under section 321192.5. The Department of Public Safety shall collect data in accordance with section 321192.5 from any assessment program, treatment program, treatment provider, correctional center or facility, and parole agency that provide substance abuse treatment to persons served through public funds administered by the Department of Public Safety.
- (b) The Department of Public Safety shall include in the contract with any treatment provider all criteria established by the Department of Health pursuant to section 321-192.5 to determine whether the treatment provider is achieving success in treating individuals with substance abuse problems/dependencies.
- (c) The Department of Public Safety, in conjunction with the Department of Health, shall report on an annual basis to the legislature and to the governor, its findings concerning the need for and implementation of the various provisions of this chapter. The report shall include information collected under subsection (a) and a synopsis of information or data necessary to determine the impact, utility, and cost benefits of the provisions of this chapter.
- (d) The Department of Public Safety, in conjunction with the Department of Health, shall establish an advisory board that shall be comprised of judges, prosecutors, defense attorneys, adult probation officials, parole officials, correctional officials, representatives of assessment programs and treatment programs, and individuals working in licensed alcohol and other drug abuse treatment facilities who are past consumers of treatment services. The advisory board shall meet periodically to discuss the provisions, implementation, and evaluation of this chapter, and to make recommendations to the Department of Health.

## **URINALYSIS DRUG TESTING OF OFFENDERS**

PSD's Drug Detection Program policy and procedure (COR.08.10) for offenders and defendants was established in order to standardize a statewide program to detect, control and deter the unauthorized use and/or abuse of drugs and alcohol by adult offenders/defendants to support PSD's commitment to its policy of zero-tolerance for substance use.

Drug testing is conducted at all of PSD's correctional centers, correctional facilities, community-based programs and furlough programs. The general population at each facility is tested

randomly at 5% per month in addition to having suspicion or cause to test the offenders. Offenders in community-based programs are tested a minimum of twice per month. Offenders in substance abuse treatment programs are tested a minimum of once per month.

During Fiscal Year 2023 (July 1, 2022, through June 30, 2023), the substance abuse services branch continued to manage the Offender Drug Detection program within the state. To facilitate offender accountability to a drug-free, zero-tolerance program, PSD has contracted the services of Thermofisher Microgenics to provide immunoassay testing machines at eight facilities statewide. For FY'23, 7700+ specimens have been collected and over 68,518 individual assays screened by the immunoassay machines with 393 or 10.4% of those specimens resulting in a "positive" screen (89.6% negative). The top 3 substances of concern are presented in order of prevalence. By far the most commonly present substance remains amphetamines/methamphetamines (114 specimens or 29%). The second- Buprenorphine (41 or 10%). The third- ETG (metabolite for alcohol) at 15 specimens or 4%. Substances of special interest- Fentanyl (7 specimens or 2%). The substance abuse services section continues to work with Thermofisher Microgenics to develop and boost its drug detection program to keep pace with the ever-changing chemistry trends of the illicit substance market.

Important Note: Overall testing numbers experienced a decline as the after-effects of COVID-19 significantly impacted on staffing patterns and vacancies. Trained corrections officers are being re-assigned to fill mandatory posts due to staffing shortages. Additional training of corrections officers to collect, test, and report has been ongoing.

## **SUBSTANCE ABUSE TREATMENT SERVICES**

\*It is important to note that for this year's reporting like Fiscal Year 2022's report, overall numbers of offenders entering and completing treatment programming continues to be impacted by the aftereffects of COVID-19 on the staffing shortages and contractor availability. The staffing shortages and vacancies continue to impact the viability, consistency, and accessibility of programming throughout the Corrections Program Services, Substance Abuse Services Branch throughout FY23. The Substance Abuse Services Branch of PSD continues to work diligently with the facilities and contracted vendors to re-establish program services to pre-covid standards and enrollment numbers.

### **Outpatient Substance Abuse Treatment**

The Women's Community Correctional Center (WCCC), Halawa Correctional Facility (HCF), Kulani Correctional Facility (KCF), Waiawa Correctional Facility (WCF), Kauai Community Correctional Center (KCCC), and the Maui Community Correctional Center (MCCC) offer and provide contracted, outpatient substance use treatment services through with Salvation Army's Addiction Treatment Services (ATS).

Outpatient services provided at KCF are provided by State civil service personnel.

Outpatient services utilize a cognitive-behavioral treatment component lasting approximately 40 to 60 hours, meeting at least once per week. An evidence based cognitive-behavioral therapy curriculum is utilized by programs. Outpatient services are for inmates who are low risk for criminal conduct and meet diagnostic criteria for substance use disorders. Offenders within this modality of treatment tend to have had minimal disruption in their psychosocial or vocational

functioning due to substance use. This level of service may also be appropriate (based on assessment) for inmates who have completed treatment programs in the community or during previous incarcerations but have not been able to maintain their recovery goals consistently.

Fiscal year 2023 data indicates that 194 offenders housed at correctional facilities within the State of Hawaii participated in Outpatient or RTL 3 substance treatment services (up 60% from last FY). One-hundred twenty-six (126) or 65% of offenders successfully completed treatment.

### **Intensive Outpatient Substance Abuse Treatment**

Intensive Outpatient (IOP) substance abuse treatment services are provided at the following facilities: WCCC, HCF, WCF, and KCF. Services provided at WCCC and HCF are procured via contract with the Salvation Army – ATS, while services at WCF and KCF are provided by State civil service personnel.

The IOP consists of group sessions ranging two to three hours in duration. These groups meet at least 3 days per week and are accompanied by monthly individual counseling sessions or more as needed. The program facilitators utilize a mix of the Change Companies' Residential Drug Abuse Program and other resources from the company which are evidenced based, cognitive-behavioral curriculums. The program duration is approximately 9 months for completion. Each group operates via modified, closed-ended group with a maximum of 15 offenders per group. Assessment, treatment planning, individual and group sessions, and continuing care services are provided for each participant.

Fiscal year 2023 data indicates that 166 offenders housed at correctional facilities within the State of Hawaii participated in Intensive Outpatient or RTL 4 substance treatment services (up 137% from last FY) of which 78\* or 47 % of offenders successfully completed treatment.

### **Residential Substance Abuse Treatment:**

#### **Waiawa Correctional Facility & Women's Community Correctional Center**

**KASHBOX** Therapeutic Community (TC): 52 beds, Operated by PSD's Corrections Program Services-Substance Abuse Services Branch

KASHBOX is an intensive long-term, TC treatment program lasting approximately 12-months. In response to more complex cases, the duration may increase up to 15-months, but is uncommon. Ideal participants for this level of treatment are those assessed as high risk for criminal conduct and recidivism.

Cognitive Behavioral Treatment and Social Learning Theory are combined to address criminal thinking and behaviors. Participants work through evidence-based, Residential Drug Abuse Program cognitive-behavioral curriculum. This process assists program participants to learn, develop, and practice skill sets essential to changing criminal thoughts and behaviors while addressing criminogenic needs. The TC provides the environment to safely develop and practice the skills in a community setting within the prison where the "community is method" is allowed

to be in practice. As the TC residents live and work together separated from the general population, they are accountable to one another in practicing recovery skills.

**Ke Alaula** Therapeutic Community (TC): 50 beds.

The program is operated by Hina Mauka through a purchase of service agreement with PSD and is located within the WCCC. The program is an intensive long-term, 9 to 12-month therapeutic community. In response to more complex cases, the duration of the program may be extended to meet the individual's needs.

Cognitive Behavioral Treatment and Social Learning Theory combine to address criminal thinking and behavior. As the TC residents live and work together separated from the general population, they hold each other accountable to practice recovery skills and change their criminal thinking and behavior. Specialized services were also provided in sexual and physical abuse, domestic violence, criminality, and other types of gender responsive issues.

For fiscal period 2023, total residential programming logged 108 participants of which 36 or 33% successfully completed programming (up 100% from last FY). For success to be possible with this population, it is imperative that the population receive consistent and persistent programming at a high dosage and duration. Achieving the targets proved difficult as programming for this high-risk, high-need population was greatly impacted by the after-effects of COVID-19.

### **Reintegration Services – Oahu Community Correctional Center / Laumaka Work Furlough Center & the Women's Community Correctional Center Bridge Programs**

The Department also provides substance abuse specific reentry services for inmates transitioning from the institution setting and back into the community through Bridge work furlough programs at Laumaka Work Furlough Center (LWFC) and the Women's Community Correctional Center. The Bridge program's focus is to successfully re-integrate both male and female offenders back into the community by capitalizing on the offender's completion of primary treatment and providing a continuum of care to build off past successes. Programming is enhanced at this juncture with job development services, life skills, and family education, therapy, and re-unification opportunities. Offenders pursue work in the community while in Bridge continuing to work on substance abuse issues and criminogenic areas.

Family Education and Therapy is available to offenders participating in the Bridge programs through contracted services within the community. Offenders are introduced to educational group components using evidence-based curriculum for five sessions lasting up to two hours. The focus of these services is to increase awareness for offenders of the benefits that family counseling may have when attempting to reunify with family in the community. Further sessions are available for the offender past the initial five sessions by request and can include the offender's family in the community.

Federal funding via the Residential Substance Abuse Treatment (RSAT) grant, continues to provide the primary funding of both Bridge programs. The Bridge Program currently provides up to 64 beds at OCCC and 15 beds at WCCC to serve the reentry and furlough populations.

**Laumaka Bridge Program** is a 64-bed residential substance abuse reentry, work furlough program for offenders who have completed IOP, or Residential substance abuse treatment while incarcerated and fall within the moderate to high-risk range for recidivism. In March of 2015, the number of beds increased from 32-beds to 64-beds with the help of federal funding of the Bridge expansion grant. The program provides opportunities to practice social learning, cognitive learning, and recovery skills learned in treatment while transitioning to the community. Family therapy and job development services are also provided as the offender reconnects with family and community resources.

Fiscal year 2023, data also indicates that 51 *male offenders* participated in the Bridge furlough program of which 37 offenders or 73% successfully completed.

### **Women's Community Correctional Center**

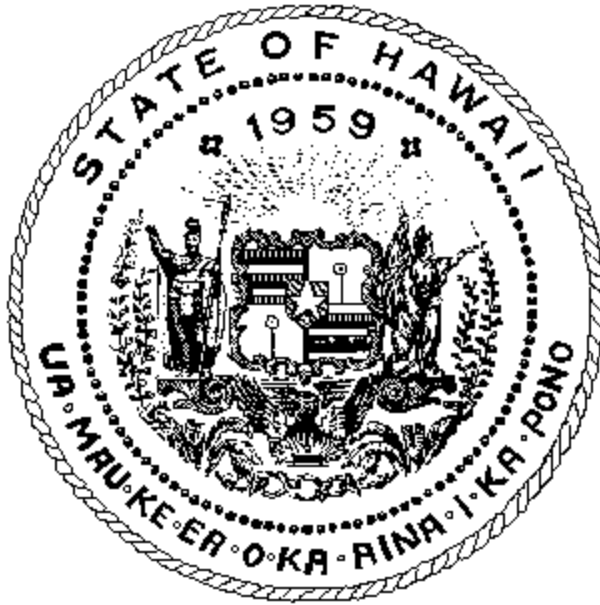
**The Bridge Program** is a residential substance abuse reentry, work furlough program for inmates who have completed IOP, or residential substance abuse treatment while incarcerated. The targeted population would be of moderate to high risk of recidivating. The program provides opportunities to practice social learning, cognitive, and recovery skills learned in treatment while transitioning to the community. Family therapy, psychological, and job development services were provided as the inmate reconnects with family and community resources.

Fiscal year 2023, data indicate that 14 *female offenders* participated in the Bridge furlough program (up 366% from last FY) of which 16 offenders or 114% successfully completed programming. High completion percentage is due to participant carryover from the previous fiscal reporting year.

### **Saguaro Correctional Center**

The Saguaro Correctional Center is contracted under the *Mainland Branch* of the *State of Hawaii Public Safety Department* and offers Outpatient and Intensive Residential substance abuse treatment (Intensive Outpatient treatment in a Residential setting) for adult male offenders.

Detailed reports may be viewed via the Mainland Branch data reports.



**DEPARTMENT OF PUBLIC SAFETY  
REPORT TO THE 2024 LEGISLATURE**

**IN RESPONSE TO HRS 353G-13 (c)  
CRIMINAL OFFENDER TREATMENT ACT**

**December 2023**



## **INTRODUCTION**

The Department of Public Safety (PSD) is statutorily required to report on an annual basis to the Legislature and to the Governor, its findings concerning the need for and implementation of the various provisions of Chapter 353G. The report must include information collected under HRS 353G-13 (c), subsection:

- (a) Every assessment program, treatment program, correctional center or facility, and parole agency that provides services pursuant to this chapter or that otherwise supervises a person or issues an order pursuant to this chapter shall keep case specific records and aggregate data and statistics as may be required by the Department of Health and which shall be required by the statewide substance abuse treatment monitoring program under section 321192.5. The Department of Public Safety shall collect data in accordance with section 321192.5 from any assessment program, treatment program, treatment provider, correctional center or facility, and parole agency that provide substance abuse treatment to persons served through public funds administered by the Department of Public Safety.
- (b) The Department of Public Safety shall include in the contract with any treatment provider all criteria established by the Department of Health pursuant to section 321-192.5 to determine whether the treatment provider is achieving success in treating individuals with substance abuse problems/dependencies.
- (c) The Department of Public Safety, in conjunction with the Department of Health, shall report on an annual basis to the legislature and to the governor, its findings concerning the need for and implementation of the various provisions of this chapter. The report shall include information collected under subsection (a) and a synopsis of information or data necessary to determine the impact, utility, and cost benefits of the provisions of this chapter.
- (d) The Department of Public Safety, in conjunction with the Department of Health, shall establish an advisory board that shall be comprised of judges, prosecutors, defense attorneys, adult probation officials, parole officials, correctional officials, representatives of assessment programs and treatment programs, and individuals working in licensed alcohol and other drug abuse treatment facilities who are past consumers of treatment services. The advisory board shall meet periodically to discuss the provisions, implementation, and evaluation of this chapter, and to make recommendations to the Department of Health.

## **URINALYSIS DRUG TESTING OF OFFENDERS**

PSD's Drug Detection Program policy and procedure (COR.08.10) for offenders and defendants was established in order to standardize a statewide program to detect, control and deter the unauthorized use and/or abuse of drugs and alcohol by adult offenders/defendants to support PSD's commitment to its policy of zero-tolerance for substance use.

Drug testing is conducted at all of PSD's correctional centers, correctional facilities, community-based programs and furlough programs. The general population at each facility is tested

randomly at 5% per month in addition to having suspicion or cause to test the offenders. Offenders in community-based programs are tested a minimum of twice per month. Offenders in substance abuse treatment programs are tested a minimum of once per month.

During Fiscal Year 2023 (July 1, 2022, through June 30, 2023), the substance abuse services branch continued to manage the Offender Drug Detection program within the state. To facilitate offender accountability to a drug-free, zero-tolerance program, PSD has contracted the services of Thermofisher Microgenics to provide immunoassay testing machines at eight facilities statewide. For FY'23, 7700+ specimens have been collected and over 68,518 individual assays screened by the immunoassay machines with 393 or 10.4% of those specimens resulting in a "positive" screen (89.6% negative). The top 3 substances of concern are presented in order of prevalence. By far the most commonly present substance remains amphetamines/methamphetamines (114 specimens or 29%). The second- Buprenorphine (41 or 10%). The third- ETG (metabolite for alcohol) at 15 specimens or 4%. Substances of special interest- Fentanyl (7 specimens or 2%). The substance abuse services section continues to work with Thermofisher Microgenics to develop and boost its drug detection program to keep pace with the ever-changing chemistry trends of the illicit substance market.

Important Note: Overall testing numbers experienced a decline as the after-effects of COVID-19 significantly impacted on staffing patterns and vacancies. Trained corrections officers are being re-assigned to fill mandatory posts due to staffing shortages. Additional training of corrections officers to collect, test, and report has been ongoing.

## **SUBSTANCE ABUSE TREATMENT SERVICES**

\*It is important to note that for this year's reporting like Fiscal Year 2022's report, overall numbers of offenders entering and completing treatment programming continues to be impacted by the aftereffects of COVID-19 on the staffing shortages and contractor availability. The staffing shortages and vacancies continue to impact the viability, consistency, and accessibility of programming throughout the Corrections Program Services, Substance Abuse Services Branch throughout FY23. The Substance Abuse Services Branch of PSD continues to work diligently with the facilities and contracted vendors to re-establish program services to pre-covid standards and enrollment numbers.

### **Outpatient Substance Abuse Treatment**

The Women's Community Correctional Center (WCCC), Halawa Correctional Facility (HCF), Kulani Correctional Facility (KCF), Waiawa Correctional Facility (WCF), Kauai Community Correctional Center (KCCC), and the Maui Community Correctional Center (MCCC) offer and provide contracted, outpatient substance use treatment services through with Salvation Army's Addiction Treatment Services (ATS).

Outpatient services provided at KCF are provided by State civil service personnel.

Outpatient services utilize a cognitive-behavioral treatment component lasting approximately 40 to 60 hours, meeting at least once per week. An evidence based cognitive-behavioral therapy curriculum is utilized by programs. Outpatient services are for inmates who are low risk for criminal conduct and meet diagnostic criteria for substance use disorders. Offenders within this modality of treatment tend to have had minimal disruption in their psychosocial or vocational

functioning due to substance use. This level of service may also be appropriate (based on assessment) for inmates who have completed treatment programs in the community or during previous incarcerations but have not been able to maintain their recovery goals consistently.

Fiscal year 2023 data indicates that 194 offenders housed at correctional facilities within the State of Hawaii participated in Outpatient or RTL 3 substance treatment services (up 60% from last FY). One-hundred twenty-six (126) or 65% of offenders successfully completed treatment.

### **Intensive Outpatient Substance Abuse Treatment**

Intensive Outpatient (IOP) substance abuse treatment services are provided at the following facilities: WCCC, HCF, WCF, and KCF. Services provided at WCCC and HCF are procured via contract with the Salvation Army – ATS, while services at WCF and KCF are provided by State civil service personnel.

The IOP consists of group sessions ranging two to three hours in duration. These groups meet at least 3 days per week and are accompanied by monthly individual counseling sessions or more as needed. The program facilitators utilize a mix of the Change Companies' Residential Drug Abuse Program and other resources from the company which are evidenced based, cognitive-behavioral curriculums. The program duration is approximately 9 months for completion. Each group operates via modified, closed-ended group with a maximum of 15 offenders per group. Assessment, treatment planning, individual and group sessions, and continuing care services are provided for each participant.

Fiscal year 2023 data indicates that 166 offenders housed at correctional facilities within the State of Hawaii participated in Intensive Outpatient or RTL 4 substance treatment services (up 137% from last FY) of which 78\* or 47 % of offenders successfully completed treatment.

### **Residential Substance Abuse Treatment:**

#### **Waiawa Correctional Facility & Women's Community Correctional Center**

**KASHBOX** Therapeutic Community (TC): 52 beds, Operated by PSD's Corrections Program Services-Substance Abuse Services Branch

KASHBOX is an intensive long-term, TC treatment program lasting approximately 12-months. In response to more complex cases, the duration may increase up to 15-months, but is uncommon. Ideal participants for this level of treatment are those assessed as high risk for criminal conduct and recidivism.

Cognitive Behavioral Treatment and Social Learning Theory are combined to address criminal thinking and behaviors. Participants work through evidence-based, Residential Drug Abuse Program cognitive-behavioral curriculum. This process assists program participants to learn, develop, and practice skill sets essential to changing criminal thoughts and behaviors while addressing criminogenic needs. The TC provides the environment to safely develop and practice the skills in a community setting within the prison where the "community is method" is allowed

to be in practice. As the TC residents live and work together separated from the general population, they are accountable to one another in practicing recovery skills.

**Ke Alauala Therapeutic Community (TC): 50 beds.**

The program is operated by Hina Mauka through a purchase of service agreement with PSD and is located within the WCCC. The program is an intensive long-term, 9 to 12-month therapeutic community. In response to more complex cases, the duration of the program may be extended to meet the individual's needs.

Cognitive Behavioral Treatment and Social Learning Theory combine to address criminal thinking and behavior. As the TC residents live and work together separated from the general population, they hold each other accountable to practice recovery skills and change their criminal thinking and behavior. Specialized services were also provided in sexual and physical abuse, domestic violence, criminality, and other types of gender responsive issues.

For fiscal period 2023, total residential programming logged 108 participants of which 36 or 33% successfully completed programming (up 100% from last FY). For success to be possible with this population, it is imperative that the population receive consistent and persistent programming at a high dosage and duration. Achieving the targets proved difficult as programming for this high-risk, high-need population was greatly impacted by the after-effects of COVID-19.

**Reintegration Services – Oahu Community Correctional Center / Laumaka Work Furlough Center & the Women's Community Correctional Center Bridge Programs**

The Department also provides substance abuse specific reentry services for inmates transitioning from the institution setting and back into the community through Bridge work furlough programs at Laumaka Work Furlough Center (LWFC) and the Women's Community Correctional Center. The Bridge program's focus is to successfully re-integrate both male and female offenders back into the community by capitalizing on the offender's completion of primary treatment and providing a continuum of care to build off past successes. Programming is enhanced at this juncture with job development services, life skills, and family education, therapy, and reunification opportunities. Offenders pursue work in the community while in Bridge continuing to work on substance abuse issues and criminogenic areas.

Family Education and Therapy is available to offenders participating in the Bridge programs through contracted services within the community. Offenders are introduced to educational group components using evidence-based curriculum for five sessions lasting up to two hours. The focus of these services is to increase awareness for offenders of the benefits that family counseling may have when attempting to reunify with family in the community. Further sessions are available for the offender past the initial five sessions by request and can include the offender's family in the community.

Federal funding via the Residential Substance Abuse Treatment (RSAT) grant, continues to provide the primary funding of both Bridge programs. The Bridge Program currently provides up to 64 beds at OCCC and 15 beds at WCCC to serve the reentry and furlough populations.

**Laumaka Bridge Program** is a 64-bed residential substance abuse reentry, work furlough program for offenders who have completed IOP, or Residential substance abuse treatment while incarcerated and fall within the moderate to high-risk range for recidivism. In March of 2015, the number of beds increased from 32-beds to 64-beds with the help of federal funding of the Bridge expansion grant. The program provides opportunities to practice social learning, cognitive learning, and recovery skills learned in treatment while transitioning to the community. Family therapy and job development services are also provided as the offender reconnects with family and community resources.

Fiscal year 2023, data also indicates that 51 *male offenders* participated in the Bridge furlough program of which 37 offenders or 73% successfully completed.

### **Women's Community Correctional Center**

**The Bridge Program** is a residential substance abuse reentry, work furlough program for inmates who have completed IOP, or residential substance abuse treatment while incarcerated. The targeted population would be of moderate to high risk of recidivating. The program provides opportunities to practice social learning, cognitive, and recovery skills learned in treatment while transitioning to the community. Family therapy, psychological, and job development services were provided as the inmate reconnects with family and community resources.

Fiscal year 2023, data indicate that 14 *female offenders* participated in the Bridge furlough program (up 366% from last FY) of which 16 offenders or 114% successfully completed programming. High completion percentage is due to participant carryover from the previous fiscal reporting year.

### **Saguaro Correctional Center**

The Saguaro Correctional Center is contracted under the *Mainland Branch* of the *State of Hawaii Public Safety Department* and offers Outpatient and Intensive Residential substance abuse treatment (Intensive Outpatient treatment in a Residential setting) for adult male offenders.

Detailed reports may be viewed via the Mainland Branch data reports.