	DEPARTMENT OF CORRECTIONS AND REHABILITATION CORRECTIONS ADMINISTRATION POLICY AND PROCEDURES	EFFECTIVE DATE: January 01, 2024	POLICY NO.: COR.14.06
		SUPERSEDES (Policy No. & Date): COR.14.06 of December 04, 2009	
	SUBJECT: INMATE WORK AND CONDUCT REPORTS		Page 1 of 3

1.0 PURPOSE

To establish minimum reporting standards for inmate work and conduct reports.

2.0 SCOPE

This policy shall apply to all correctional facilities. The reporting procedures are intended for sentenced felons but may be employed for pretrial individuals where applicable.

3.0 REFERENCES, DEFINITIONS & FORMS

.1 References

Hawaii Revised Statutes (HRS), 353-A, Director of Corrections and Rehabilitation (DCR), Powers and Duties.

.2 Forms

- a. DCR 8734, Inmate Timesheet
- b. DCR 8700, Monthly Work Evaluation Report
- c. DCR 8712, Comments

4.0 POLICY

A reporting system shall be established which will document inmate work performance and general behavior on a periodic basis. The objective of this reporting system is to establish a chronological history of the behavior of the individual which may be used by those persons responsible for making decisions affecting the life of the inmate while incarcerated and the inmate's potential for parole.

5.0 PROCEDURES

.1 Daily Time Reports

- a. Each person who supervises an inmate on an assigned work program shall maintain a record of attendance. Form DCR 8734, Inmate Timesheet, shall be used to record daily attendance and hours worked. The supervisor and

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inmate shall verify each day's activity by their initials, and their signatures for the monthly total.

- b. The workline supervisor shall be responsible for maintaining those time sheets and their disposition as necessary to ensure the inmate is paid accordingly, where applicable.

.2 Monthly Work Evaluation Reports

Work evaluation reports form DCR 8700 shall be regarded as a constructive means to help the inmate and not a system of punishment. These reports are instrumental in establishing the basis upon which the inmate may receive privileges, advancements, and ultimate parole planning.

a. Reporting Format and Content

- 1. Form DCR 8700, Monthly Work Evaluation Report, shall be used to document inmate work behavior on a monthly basis. The original of form DCR 8700 shall be filed in the inmate's institutional file, the inmate given a copy, and a copy retained by the supervisor.
- 2. The supervisor shall include sufficient information in the report to substantiate and explain why they rated the inmate as they did. An additional sheet may be attached to further elaborate the remarks section where necessary.

b. Evaluation Procedures

The inmate shall be allowed to review their Monthly Work Evaluation Report and discuss it with their supervisor prior to signature by the inmate and supervisor.

- 1. The discussion shall take place in private.
- 2. The reasons for the ratings shall be explained to the inmate and what the inmate should do to improve a rating if it is low.
- 3. The value of maintaining good ratings shall be explained to the inmate in relationship to obtaining privileges, advancement, and ultimate parole.

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4. If the inmate refuses to review the report or sign it, it shall be noted on the report.

.3 General Comment Reporting

Almost every employee in a correctional facility has some contact with an inmate from time to time. These contacts may vary from aiding the inmate in solving a problem to a commendation. These contacts are important and should be recorded and filed in the inmate's institutional file for future use by those persons responsible for making decisions which affect the institutional life of the inmate. Form DCR 8712, Comments shall be used for this purpose.

APPROVAL RECOMMENDED:




Deputy Director for Corrections

JAN 0 1 2024

Date

APPROVED:



DIRECTOR

JAN 0 1 2024

Date

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**DEPARTMENT OF CORRECTIONS AND REHABILITATION
MONTHLY WORK EVALUATION REPORT**

Name of Inmate: _____ Date: _____

Number of Days absent: _____ (excused) _____ (unexcused)

Number of days tardy: _____ (excused) _____ (unexcused)

Work Classification: _____

Number of Work Projects assigned: _____ Rate of Compensation: _____

DUTIES FOR WHICH TRAINED	NUMBER OF HOURS

Number of training phases completed:

	No Evaluation	Poor	Below Average	Average	Above Average	Excellent
Attendance						
Workmanship						
Learning Speed						
Application of Instruction to Work						
Work Adjustment and Adaptability						
Regularity of Output						
Relationship with other Workers						
Relationship with Instructor						
Application of Time						
Care of Government Property						
OVERALL RATING						

REMARKS:

This report was discussed with me.

Signature of Inmate: _____

Signature of Supervisor: _____

Original: Case File
Copies: Inmate, Supervisor

STATE OF HAWAII
DEPARTMENT OF CORRECTIONS AND REHABILITATION

COMMENTS

Name: _____ S.S. No. _____ Date: _____

Subject: _____ Signature: _____