

DEPARTMENT OF CORRECTIONS AND REHABILITATION CORRECTIONS ADMINISTRATION

CORRECTIONS ADMINISTRATION POLICY AND PROCEDURES EFFECTIVE DATE: January 01, 2024 POLICY NO.: COR.18.06

SUPERSEDES (Policy No. & Date): COR.18.06 of 03/02/2012

SUBJECT:

JAIL INMATE CLASSIFICATION REVIEW

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1.0 PURPOSE

To establish a procedural system to complete classification reviews of jail inmates detained at Community Correctional Centers (CCCs).

2.0 SCOPE

This policy shall apply to all the CCCs. To the extent any individual facility's policy conflicts with the statewide policy, COR.18.06 shall control.

3.0 REFERENCES, DEFINITIONS & FORMS

.1 References

- a. Department of Corrections and Rehabilitation (DCR); COR.18.01, Inmate Classification System.
- b. DCR P&P, COR.18.05, Initial Classification and Facility Assignment of Jail Inmates
- c. DCR P&P, COR.18.07, Exception Case.
- d. DCR P&P, COR.18.08, Transfer of Adult Inmates.

.2 Definitions

- a. Adjustment Committee A Committee of 1-3 staff members, dictated by the size of the facility, who convene to determine guilt or innocence of an inmate accused of facility misconduct while in custody. Committee member (s) convene once an investigation is completed and review the contents of that investigation to render a decision.
- from the general population (GP) on the order of a Watch Commander or higher authority. This action occurs when their continued presence in GP poses an imminent threat to the safety of self, or others, jeopardizes the integrity of an internal investigation, or disrupts the good government of the facility. The terminology "administrative segregation" is not applicable to maximum custody or protective custody inmates housed in a segregation unit.

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- c. Adverse Classification Action Any increase involving one or more steps in custody using a completed instrument for the purpose of providing a more restrictive setting. This action is often a result of misconduct or a change in sentencing status. This includes but is not limited to the transfer of a pretrial or State/Federal hold inmate to prison housing.
- d. Adverse Classification Action Any increase involving one (1) or more steps in custody to provide a more restrictive setting; often associated with the occurrence of a misconduct or a change in sentencing status.
- e. Custody Level The degree of physical control and staff supervision mandated to manage inmates placed into a specific housing unit. A single facility may have more than one (1) level of security within its perimeter: a) Maximum, b) Close, c) Medium, d) Minimum and e) Community.
- f. Disciplinary Segregation The temporary placement of an inmate in a segregated housing unit/cell separated from GP. Typically follows guilty finding by an Adjustment Committee. Disciplinary Segregation includes the loss of certain privileges consistent with COR.11.01, Administrative Segregation and Disciplinary Segregation, and as authorized by the Warden.
- g. Exception Case Administrative request for an override of a "Comprehensive Custody Score" to assure appropriate placement of an inmate. Action is typically requested as a result of the inmate's action/inaction and aims to provide for the safety of staff, other inmates, the community and/or the good management of the facility. Form DCR 8202, Exception Case Request, shall be used in accordance with COR. 18.07, Exception Case.
- h. Jail Inmate Any individual who is convicted of a crime and commitment by the courts for a period of up to one(1) year (this includes probation violators awaiting violation hearings, pretrial detainees, Federal/other State holds.)

.3 Forms

- a. DCR 8202 Exception Case Request
- b. DCR 8203 Transfer Request

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4.0 POLICY

- 1. DCR shall provide an efficient and objective system to ensure that the custody of all jail inmates are reviewed whenever significant changes occur.
- 2. Once a jail inmate's status changes to sentenced, a review of the inmate's custody level and program needs shall be reviewed and assessed on a 6-month interval.
- 3. Inmates shall be placed in the least restrictive capacity consistent with their security and custody needs and public safety.
- 4. Wardens shall be responsible for administering the jail inmate classification review policy and procedures.

5.0 PROCEDURES

- .1 At a minimum, the following documentation will be required to complete a jail inmate classification review:
 - a. Jail Initial Custody Instrument
 - b. Any previously completed Jail Offender Custody Review Instrument(s) completed during inmate's current incarceration.
 - c. If available other justice-involved documents may be used to achieve a more complete assessment of inmate: Judgement/Mittimus, Pre-Sentenced Investigative (PSI) report, Criminal Justice Information System (CJIS) reports, ECourt Kokua/JEFs/JIMS reports, State/Federal detainers, holds, and any other reports of disciplinary violations that occurred during current incarceration.
- .2 Whenever their assigned custody changes, inmates shall be informed verbally and receive written notification of their revised custody level, this includes classification actions that have a significant effect on the inmate's custody level and housing.
- .3 Assigned case managers shall be responsible to complete the Jail Inmate Review Instrument, if warranted, in a timely manner.

If an exception case or transfer is warranted, facility staff will be responsible for following procedures as stated in COR. 18.07, Exception Case and COR.18.08, Transfer of Adult Inmates.

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- .4 If the Inmate Classification Office (ICO) disapproves, all materials shall be forwarded back to the referring branch with a memo stating reason(s) for disapproval.
- .5 If the Warden contests disapproval of reclassification by ICO, an appeal to the Deputy Director for Corrections for final resolution will be automatic (per COR.18.07, Exception Case).
- .6 The inmate shall be made aware of the final decision in writing.
- .7 COR.18.08, Transfer of Adult Inmates, the policy on transfers shall be adhered to in all cases where transfer is contemplated.
- .8 The classification recommendations listed below require review and approval of the department classification officer. Approval may be given verbally; however, in all cases verbal approval shall be followed and confirmed by the department classification officer's signature on the respective Inter-Departmental Communication Form.
 - a. All cases involving the use of exceptions (administrative overrides).
 - b. Transfer between institutions
 - c. Transfer to the custody of other jurisdictions both local and out-of-state.
- .9 Inmates shall be scheduled for formal classification review for the reasons stated below:
 - a. Upon status change from pretrial to sentenced.
 - b. After a disciplinary hearing or new information, i.e., new/additional charges, detainers, escape, etc.
 - c. Once sentenced, jail inmates shall have a classification review completed every six (6) months.
 - d. Any time after a status change, at the discretion of the Warden or a designee.
- .10 Sentenced petty misdemeanants, misdemeanants, and felon probationers, as jail inmates, may be considered for community custody.

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.11 Programs and activities may also be afforded to jail inmates in accordance with their custody level and the good management of the facility.

Date

.12 Inmates may appeal the decision of any classification action through the offender grievance process.

APPROVAL RECOMMENDED:	
Saluy-	JAN 0 1 2024
Deputy Director for Corrections	Date
APPROVED:	
24	JAN 0 1 2024

DIRECTOR

STATE OF HAWAII DEPARTMENT OF CORRECTIONS AND REHABILITATION

EXCEPTION CASE FORM

	Date:
Name of Inmate:	SID #:
Current Facility Location:	
Computed Custody Score:	Recommended Custody:
Reason for Exception Case Recommendation:	
Submitted By:	
(Facility Classification Coordinator/Designee) Reviewed By:	Date
(Warden/Designee) Forward this from to the Department Inmate Classificatio 1) Completed Classification Instrument(s) 2) Exception Case Summary Approved/Disapproved:	Date on Officer along with:
(Department Classification Officer) If disapproved, reason:	Date
When disapproved by the Classification Officer, exception for appeal and review. Exception Request Granted / Not Granted.	on case to automatically be sent to the Deputy Director
(Deputy Director for Corrections)	Date

STATE OF HAWAII DEPARTMENT OF CORRECTIONS AND REHABILITATION

INMATE TRANSFER REQUEST

DATE:					
INMATE NAME:			SID:		
SENDING FACILITY:CUSTODY LEVEL:			RECOMMENDED TRANSFER FACILITY:		
		POINT TOTAL:		DATE COMPLETED:	·····
REASON FOR TRANSFER:			***************************************		
<u> </u>	<u></u>				
Classification Committee Chai	r or UTM/Designee:		Signature	Date	-
Review by Branch Administrat	Review by Branch Administrator/Designee:		0.	D	_
MAN ON	. D.4.37 / COO. D.40.1.3 MC		Signature	Date	
MAIL OR	CFAX (587-3481) IC	CENTR	AL INMATE CLASSIFIC	CATION	
RECOMMENDATION OF CL	ASSIFICATION OF	FICER:	APPROVED	☐ DISAPPROVED	
Classification Committee Chair or UTM/Designee:			Signature	Date	
			o ignature	Date	
Sending Facility Notified	Yes	□ No	Receiving Facil	ity:	
Receiving Facility Notified	☐ Yes	☐ No	Transfer Date:		
COMMENTS:					