



STATE OF HAWAI'I  
CONTRACT FOR HEALTH AND HUMAN SERVICES:  
COMPETITIVE PURCHASE OF SERVICES

This Contract, executed on the respective dates indicated below, is effective as of

August 1, 20 21 between the Department of  
Public Safety  
*(Name of the state department, agency board or commission)*

State of Hawai'i ("STATE"), by its Director  
*(Title of person signing for the STATE)*

whose address is: 1177 Alakea Street, Honolulu, Hawaii 96813

and CoreCivic, Inc.  
*(Name of PROVIDER)*

("PROVIDER"), a For-profit Corporation  
*(Legal form of PROVIDER i.e., Corporation, Limited Liability Company, etc.)*

under the laws of the State of Maryland whose business street address and taxpayer  
identification numbers are as follows:

Business street address:  
5501 Virginia Way, Suite 110  
Brentwood, TN 37027

Mailing address if different than business street address:

Federal employer identification number: [REDACTED]

Hawai'i general excise tax number: NOT APPLICABLE

**RECITALS**

A. This Contract is for a competitive purchase of services (a "Competitive POS"), as defined in section 103F-402, Hawaii Revised Statutes ("HRS"), and chapter 3-143, Hawaii Administrative Rules.

B. The STATE needs the health and human services described in this Contract and its attachments ("Required Services") and the PROVIDER agrees to provide the Required Services.

C. Money is available to fund this Contract pursuant to:

(1) ACT 88, SLH 2021 \_\_\_\_\_, (Identify state sources)

in the amount of \$152,010,090.00 (\$50,670,030.00/FY) \_\_\_\_\_, or (state funding)

(2) \_\_\_\_\_, (Identify federal sources)

in the amount of \_\_\_\_\_, or both. (federal funding)

D. The STATE is authorized to enter into this Contract pursuant to:

HAWAII REVISED STATUTES, CHAPTER 353C-2 \_\_\_\_\_ (Legal authority for Contracts)

E. The undersigned representative of the PROVIDER represents, and the STATE relies upon such representation, that he or she has authority to sign this Contract by virtue of (check any or all that apply):

- corporate resolutions of the PROVIDER or other authorizing documents such as partnership resolutions;
- corporate by-laws of the PROVIDER, or other similar operating documents of the PROVIDER, such as a partnership contract or limited liability company operating contract;
- the PROVIDER is a sole proprietor and as such does not require any authorizing documents to sign this Contract;
- other evidence of authority to sign:

\_\_\_\_\_

F. The PROVIDER has provided a "Certificate of Insurance" to the STATE that shows to the satisfaction of the STATE that the PROVIDER has obtained liability insurance

which complies with paragraph 1.4 of the General Conditions of this Contract and with any relevant special condition of this Contract.

G. The PROVIDER produced, and the STATE inspected, a tax clearance certificate as required by section 103-53, HRS.

NOW, THEREFORE, in consideration of the promises contained in this Contract, the STATE and the PROVIDER agree as follows:

1. Scope of Services. The PROVIDER shall, in a proper and satisfactory manner as determined by the STATE, provide the Required Services set forth in Attachment "1" to this Contract, which is hereby made a part of this Contract, and the Request for Proposals ("RFP"), and the PROVIDER's Proposal, which are incorporated in this Contract by reference. In the event that there is a conflict among the terms of this Contract, and either the Proposal or the RFP, or both, then the terms of this Contract shall control.

2. Time of Performance. The PROVIDER shall provide the Required Services from August 1, 2021, to July 31, 2024, as set forth in Attachment "2" to this Contract, which is hereby made a part of this Contract.

3. Certificate of Exemption from Civil Service. The Certificate of Exemption from Civil Service is attached and made a part of this Contract.

4. Standards of Conduct Declaration. The Standards of Conduct Declaration of the PROVIDER is attached and made a part of this Contract.

5. General and Special Conditions. The General Conditions for Health and Human Services Contracts ("General Conditions") and any Special Conditions are attached hereto and made a part of this Contract. In the event of a conflict between the General Conditions and the Special Conditions, the Special Conditions shall control.

6. Notices. Any written notice required to be given by any party under this Contract shall be (a) delivered personally, or (b) sent by United States first class mail, postage prepaid.

Notice required to be given to the STATE shall be sent to:

Department of Public Safety, Administrative Services Office - Procurement and Contracts

1177 Alakea Street, Honolulu, Hawaii 96813

Notice to the PROVIDER shall be sent to the mailing address as indicated on page 1. A notice shall be deemed to have been received three (3) days after mailing or at the time of actual receipt, whichever is earlier. The PROVIDER is responsible for notifying the STATE in writing of any change of address.

IN VIEW OF THE ABOVE, the parties execute this Contract by their signatures below.

STATE \_\_\_\_\_  
By \_\_\_\_\_  
*(Signature)*

Print Name Max N. Otani

Print Title Director

Date Aug 11, 2021

FUNDING AGENCY (to be signed by head of funding agency if other than the Contracting Agency)

By \_\_\_\_\_  
*(Signature)*

Print Name \_\_\_\_\_

Print Title \_\_\_\_\_

Date \_\_\_\_\_

CORPORATE SEAL  
(if available)



PROVIDER \_\_\_\_\_  
By \_\_\_\_\_  
*(signature)*

Print Name Natasha K. Metcalf

Print Title Vice President

Partnership Contracts Counsel

Date July 30, 2021

APPROVED AS TO FORM:

\_\_\_\_\_

Sep 2, 2021

Deputy Attorney General



**PROVIDER'S  
STANDARDS OF CONDUCT DECLARATION**

For the purposes of this declaration:

“Agency” means and includes the State, the legislature and its committees, all executive departments, boards, commissions, committees, bureaus, offices; and all independent commissions and other establishments of the state government but excluding the courts.

“Controlling interest” means an interest in a business or other undertaking which is sufficient in fact to control, whether the interest is greater or less than fifty per cent (50%).

“Employee” means any nominated, appointed, or elected officer or employee of the State, including members of boards, commissions, and committees, and employees under contract to the State or of the constitutional convention, but excluding legislators, delegates to the constitutional convention, justices, and judges. (Section 84-3, HRS).

On behalf of:

CoreCivic, Inc.

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*(Name of PROVIDER)*

PROVIDER, the undersigned does declare as follows:

1. PROVIDER  is\*  is not a legislator or an employee or a business in which a legislator or an employee has a controlling interest. (Section 84-15(a), HRS).
2. PROVIDER has not been represented or assisted personally in the matter by an individual who has been an employee of the agency awarding this Contract within the preceding two years and who participated while so employed in the matter with which the Contract is directly concerned. (Section 84-15(b), HRS).
3. PROVIDER has not been assisted or represented by a legislator or employee for a fee or other compensation to obtain this Contract and will not be assisted or represented by a legislator or employee for a fee or other compensation in the performance of this Contract, if the legislator or employee had been involved in the development or award of the Contract. (Section 84-14 (d), HRS).
4. PROVIDER has not been represented on matters related to this Contract, for a fee or other consideration by an individual who, within the past twelve (12) months, has been an agency employee, or in the case of the Legislature, a legislator, and participated while an employee or legislator on matters related to this Contract. (Sections 84-18(b) and (c), HRS).

PROVIDER understands that the Contract to which this document is attached is voidable on behalf of the STATE if this Contract was entered into in violation of any provision of chapter 84, Hawai'i Revised Statutes, commonly referred to as the Code of Ethics, including the provisions which are the source of the

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\* **Reminder to agency:** If the “is” block is checked and if the Contract involves goods or services of a value in excess of \$10,000, the Contract may not be awarded unless the agency posts a notice of its intent to award it and files a copy of the notice with the State Ethics Commission. (Section 84-15(a), HRS).

declarations above. Additionally, any fee, compensation, gift, or profit received by any person as a result of a violation of the Code of Ethics may be recovered by the STATE.

PROVIDER

By \_\_\_\_\_



Print Name Natasha K. Metcalf

Print Title Vice President

Partnership Contracts Counsel

Date July 30, 2021



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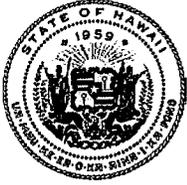
1. TERMS AND ACRONYMS USED UNLESS THE CONTEXT OTHERWISE REQUIRED

|                       |       |   |
|-----------------------|-------|---|
| ACA                   | means | American Correctional Association.  |
| ASO-PC                | means | Administrative Services Office—Purchasing and Contracts. Adult  |
| ASUS                  | means | Substance Abuse Survey.   |
| CARF                  | means | Commission on Accreditation of Rehabilitation Facilities.   |
| CC                    | means | CoreCivic, Inc.   |
| CC Policy             | means | CoreCivic’s policies and procedures as current at the time and as applicable to the particular facility where the inmates are housed. CC shall have the ability to amend its policies in accordance with best correctional practices and changes in ACA standards and applicable law. Policy numbering and formatting may change, following the commencement of the contract, but CC shall always maintain policies to address the same operational areas and services. In no event shall the CC modify its policy to decrease the level of service required herein. CC shall submit electronic copies of all modified or new policies to the State as soon as practicable.   |
| Inmate                | means | State of Hawaii Inmates.  |
| LSI-R                 | means | Level of Services Inventory-Revised.  |
| Mainland & FDC Branch | means | PSD’s branch responsible for the management of this Contract.   |
| NCCHC                 | means | National Commission on Correctional Health Care standards, Prison Edition, 2016.  |
| PSD                   | means | Department of Public Safety.  |
| SCC                   | means | Saguaro Correctional Center.  |
| TC                    | means | Therapeutic Community. An approach to substance abuse treatment that is a psychosocial, experiential learning process, which utilizes the influence of positive peer pressure within a highly structured social environment. The primary therapeutic change agent is the community itself, including staff and program participants together as members of a “family.” The culture is defined by a mutual self-help attitude where community members confront each other’s negative behavior and attitudes and establish an open, trusting and safe environment where personal disclosure is encouraged, and the prison culture of the general population is rejected. Participants need to view staff as role models and rational authorities rather than as custodians or treatment PROVIDER. |



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2. The PROVIDER agrees to perform those services described in the “Request for Proposals”, RFP Number PSD 21-ID/MB-28, A Multi-Custody Level Correctional Facility for the Confinement, Care and Custody of Hawaii Male Offenders, dated May 07, 2021, the PROVIDER’s Proposal submitted on June 07, 2021.
3. The PROVIDER shall place Inmates in housing arrangements as appropriate for their classification and in accordance with management, programming and security concerns. On or before transfer of Inmates to PROVIDER, the STATE shall advise PROVIDER of known predatory and other behavioral issues and any other information relevant to the placement of the Inmates. PROVIDER shall consider this input from the STATE in determining housing arrangements.  
Commingling of Inmates from different jurisdictions shall be permitted, but in no event shall Inmates from different jurisdictions be housed in the same living pod or cell (exception : within the protective custody pod). For population management purposes, the PROVIDER agrees to provide space, however, nothing herein shall prevent the PROVIDER from utilizing these beds for other customers in the event that such beds are not utilized by the STATE and nothing herein shall be construed as a guarantee of bed availability at the SCC. Further upon mutual agreement, the population may be housed in other facilities.
4. The STATE shall identify Inmates proposed for transfer to the facility. For each Inmate proposed, all records including classification and conduct records shall be made available for the PROVIDER’s review. The PROVIDER will then select and determine the appropriateness of each Inmate’s custody level and offenses in accordance with any state statutory requirements in which the facility is located prior to the date of transfer.  
For each Inmate proposed for transfer by the STATE, the STATE shall provide appropriate medical information to the PROVIDER prior to the transfer of an Inmate that includes certification of tuberculosis screening or treatment and information regarding medication prescribed for each Inmate.  
For each Inmate transferred, the STATE shall provide the following:
  - a) Duplicate Inmate institutional file that includes the Inmate’s case history, formal misconduct reports, judicial and administrative judgments and orders pertinent to the Inmate, Mittimus and Judgment, Notice and Order Fixing Minimum Term(s) of imprisonment and all information relating to the sentence(s) for which the Inmate is confined to be provided within 30 days after transfer;
  - b) Health Care Discharge Summary and Medication Administration Record (MARS) that summarizes the Inmate’s current physical, psychological, medical condition, immunizations, and chronic care information (i.e. labs, x-ray reports, consults, etc.) as needed on the day of transfer. Duplicate Inmate medical record to be provided within 30 days after transfer;



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- c) Inmate Classification Score sheet that objectively reflects custody level on the day of transfer; and
  - d) Identification data, including photographs, and fingerprints.
5. Relating to the transport of Inmates:
- a) The STATE shall be responsible for the cost of transporting Inmates to and from the STATE. The "return to the STATE from the PROVIDER" shall mean the moment the Inmate exits the aircraft at the Daniel K. Inouye International Airport (HNL) or any other location determined by the STATE and is accepted into the custody of its officials. The STATE shall have the option of providing transportation itself, or it may request that the PROVIDER submits a proposal for the transportation. If the STATE approves the proposal, it shall reimburse the PROVIDER for the cost of the transportation;
  - b) Notwithstanding the foregoing, transportation costs related to the transfer of Inmates between the PROVIDER's facilities shall be the PROVIDER's responsibility, provided however, if an Inmate is transferred between the PROVIDER's facilities, the STATE shall be responsible for the related transportation costs only if the STATE has required such transfer in writing;
  - c) The PROVIDER shall be responsible for the cost of local transportation of the Inmate while assigned to any of the facilities under this Contract and until custody has been accepted by the STATE or authorized agent;
  - d) The PROVIDER shall surrender any Inmate to proper STATE officials within 30 calendar days after demand made to the PROVIDER and upon presentation of official written authority to receive Inmate(s). The STATE shall accept custody of Inmate(s) at Daniel K. Inouye International Airport (HNL), or any other mutually agreed upon location. The STATE shall pay for all transportation costs associated with any request pursuant to this section by the STATE for the return of any Inmate;
  - e) In the event that the PROVIDER requests that an Inmate be returned to the STATE, the PROVIDER shall then be responsible for the cost of transportation for the return of those Inmates to the STATE;
  - f) In the event that an Inmate returns to the STATE for a medical condition or other conditions caused by negligence or willful action on the part of the PROVIDER or any of its agents or employees, the PROVIDER shall then be responsible for the cost of transportation for the return of those Inmates to the STATE; and
  - g) All Inmates confined pursuant to the terms of this contract shall be released within the State. The PROVIDER shall not release any Inmate from custody. If an Inmate's



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sentence is expired, the STATE shall make arrangements to transport the Inmate(s) from SCC to the Daniel K. Inouye International Airport (HNL) and the STATE shall pay all transportation costs associated with the return.

6. The PROVIDER shall, in a satisfactory and proper manner as determined by the PSD, and in accordance with the terms and conditions of this Contract, provide and perform the following inmate services unless waived by the PSD in specific individual cases:
- a) **Clothing and Supplies.** The PROVIDER shall provide Inmates a minimum of three (3) sets of clothing items, including underwear. The PROVIDER shall also provide Inmates with personal hygiene items that includes toothbrush, toothpaste, toilet paper, bar soap, disposable razors and All-in-One (for shower, shampoo, shaving), towel/wash cloth, bed linen, and blankets, which adequately meet Inmate's needs in accordance with CC Policy. This includes but is not limited to warmer clothing for colder weather and lighter clothes for warmer weather. Special clothing for food service, maintenance, landscape workers, and any other special work shall be provided (work boots and gloves). Inmates shall be limited to wearing khaki-colored facility-issued clothing including clothing items approved and sold in commissary. Replacement hygiene items will be regularly issued to Inmates according to a posted schedule.
  - b) **Laundry Services.** The PROVIDER shall ensure that Inmates are issued clean clothing, towels, bed linen and the regular exchange of such items for clean, laundered replacements in compliance with ACA Standards. Services shall be provided weekly according to a posted schedule for both clothing and bed linens.
  - c) **Inmate Property.** The PROVIDER may specify personal property items Inmates may possess in accordance to CC Policy to better utilize the limited space in living quarters and to more effectively facilitate security searches and eliminate contraband issues. All Inmates shall sign the property disclaimer form stating that all their personal property is accounted for and they understand the property procedures. The PROVIDER shall make every effort to standardize its list of allowable property for Inmates at SCC.  
Inmate property lost or damaged when in the control of the PROVIDER shall be the sole responsibility of the PROVIDER in accordance to CC Policy.
  - d) **Food Service.** Food service will adhere to the current American Dietetic Association (ADA), National Academy of Sciences (NAS), ACA Standards, federal, state and local laws and regulations. A Registered Dietitian or Nutritionist shall approve all menus, and meals shall be prepared in compliance with the approved menus. The menu shall include fresh or canned fruit once a week and shall provide rice (50% white & 50% brown) as a daily food staple. For purposes of this paragraph, "canned fruit" shall mean unsweetened canned fruit or fruit canned in its own juices. The PROVIDER shall provide special meals to meet



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medical or religious requirements. Medical diets shall meet the current American Dietetic Association's nutritional requirements as prescribed by a medical physician and shall be maintained and tracked for compliance in accordance to CC Policy. Religious diets shall meet the nutritional requirements and served as directed by the facility Chaplain in accordance to CC Policy.

Three (3) special dinner menus shall be provided for the following special Hawaii holidays: Prince Kuhio Day (March), King Kamehameha Day (June), Admissions day (August) and any other special event as agreed upon by the PROVIDER and the STATE by providing a special meal at no additional cost to the STATE.

The PROVIDER shall abide by applicable laws, rules and recognized health standards relating to the sanitation of food preparation, storage and serving areas.

- e) **Inmate Commissary.** A commissary shall be available to Inmates for purchase of non-essential items not furnished by the facilities under this Contract, such as soft drinks, candy and personal items. Items sold in the commissary shall not be sold as a substitute for the facility's obligation to furnish supplies and materials that are essential to Inmates. Effective July 1, 2012 under Act 190, Session Laws of Hawaii 2012, any items purchased by an in-state and out-of-state inmate from a correctional facility commissary shall be subject to a 4% surcharge on the item's price. The proceeds from the surcharge shall be deposited into PSD's automated victim information and notification system special fund. After the 4% surcharge has been deducted, revenues may be used to pay all operating expenses of the commissary including but not limited to inventory purchase and commissary worker salaries and benefits. The profit from the commissary services shall benefit persons housed at the facility under this Contract (equipment, services and programs). The PROVIDER may deny an Inmate access to the commissary or to any item sold in the commissary for disciplinary or medical reasons.

Restricted purchases of commissary items in segregation housing and the Special Housing Incentive Program shall be in accordance to CC Policy.

- f) **Recreation.** The PROVIDER shall provide facilities, equipment and supplies for indoor and outdoor recreational and leisure time activities in accordance with CC Policy and ACA Standards.
- g) **Library Services.** A comprehensive library with materials selected to meet the educational, informational and recreational needs of inmates and staff shall be provided. The STATE shall provide a daily Hawaii-based newspaper to be placed in the SCC Library. The PROVIDER shall establish and maintain its recreational library in accordance with CC Policy and ACA Standards.



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- h) **Video Visitation Conferencing.** The PROVIDER shall provide separate soundproof physical space, bandwidth, equipment (up to 2 cameras in a housing unit), and supervision at its sole cost to permit video conferencing by the use of video teleconference equipment that is compatible with the equipment that is currently being used by the STATE. Each party is responsible for the cost of their video conferencing equipment at their respective locations provided however, neither party shall be responsible for purchasing additional or different video conferencing equipment due to a change of equipment by the other party unless such change is mutually agreed to in writing by both parties.

Inmates shall use such equipment for regular visits with family members, which shall be scheduled and approved by the PSD's Mainland & FDC Branch. All visitors scheduling video visits must be on the Inmate's approved visit list.

Video visit schedules shall be, at a minimum of four up to ten hour blocks at a mutually agreed upon time on Saturdays.

- i) **Visits.** The PROVIDER shall ensure space is available for all eligible Inmates to have access to visitation. Restrictions may be placed on the number of visitors allowed each Inmate in accordance to CC Policy and ACA Standards.

Special visits shall be allowed but require prior approval from the Warden or the Warden's designee. Special visits include pastoral, legal and those traveling 300 miles or more. Non-contact visits shall be conducted when meeting the facility's established security criteria.

- j) **Grievance Procedures.** Inmates shall be provided access to an impartial and non-discriminatory grievance procedure in accordance with CC Policy, ACA Standards, and federal guidelines established under 42 U.S.C. Section 1997. The grievance process shall include:

- i) An encouragement that the Inmate seek informal resolution of the grievance or complaint before using the formal procedure;
- ii) Ready access to forms necessary for filing grievances;
- iii) Consideration of the grievance by an impartial party;
- iv) Means to ensure that grievances are kept confidential;
- v) Avenues for appeal of decisions; and
- vi) Time limits for filing a formal grievance, responding to a grievance and appealing a decision.



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The PROVIDER shall resolve grievances pertaining to the operation of the facility. Grievances pertaining to the placement of Inmates at the facilities under this Contract shall be resolved by the STATE.

Grievance records are considered confidential and will not be available to employees or Inmates, except for clerical processing of records by the PROVIDER or at the STATE's request to inspect all records and documents pertaining to grievances as part of the operation review process or in the event of an investigation. Employees participating in the disposition of a grievance shall have access to records essential to the resolution of the grievance.

- k. **Access to Courts.** The PROVIDER shall make all legal material provided by the STATE accessible to the Inmate population, including the Hawaii Revised Statutes, Hawaii Reports and other legal materials. All access shall be consistent with the requirements of the U.S. Constitution and the Hawaii Constitution. The STATE shall provide all supplements and updates of the Hawaii specific legal reference materials on a touch-screen kiosk system or other format acceptable by the facilities. However, nothing herein prevents the PROVIDER from charging an Inmate's account for items and equipment intentionally destroyed by the Inmate.

At a minimum, the law library collection shall consist of the following:

- i) Hawaii Revised Statutes (including supplements, Session Laws, Pocket parts);
- ii) Hawaii Reports, Hawaii Appellate Reports;
- iii) U.S. Code Annotated (or equivalent, including supplements, Pocket parts);
- iv) Shepard's Hawaii Citations (1 hardbound volume updated with supplements, pocket parts);
- v) Hawaii Court Rules – State;
- vi) Hawaii Court Rules – Federal;
- vii) Hawaii Digest;
- viii) Black Law's Dictionary;
- ix) Federal Civil Procedures & Rules; and
- x) Supreme Court Reports.



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Inmates requiring copies of earlier Session Laws or State case law from earlier volumes of Hawaii Reports, Hawaii Appellate Reports may contact the PSD Mainland & FDC Branch.

The law library shall be open in accordance with ACA Standards. Inmates shall have a minimum of 3-hour access per week. The possibility of three (3) additional hours of access may be provided to Inmates with verified lawsuits that are still active in court (depending if scheduling permits).

Pursuant to Lewis v. Casey, constitutional access to the courts system extends only to assistance with the preparation of initial pleadings (e.g. Motions to Proceed, In Forma Pauperis, Motions for Appointment of Counsel, Petitions for Writs of Habeas Corpus, Petitions for Post-Conviction Relief, Civil Complaints for Section 1983 Claims in state and federal court). Constitutional access to courts provided by the STATE and PROVIDER does not extend to assistance with any legal proceedings beyond the initial pleading stage.

Access to the court does not extend to any other proceedings not related to the inmate's imprisonment to include bankruptcy, divorce, or child support.

Duplicate copies of pleadings, legal documents including postage for legal mail to be filed in court are the financial responsibility of the Inmate. The PROVIDER shall provide all indigent Inmates, upon request access to paper and other supplies and services to contact legal counsel or representatives, courts, and other persons concerning legal matters in accordance to CC Policy. Under this Agreement, an Inmate is considered to be indigent if there is \$3.00 or less in his trust account within a 30-day period.

- i) **Parole Hearings.** On-site facilities shall be made available for any parole hearing conducted by the Hawaii Paroling Authority to which an inmate may be a participant. At the request of the STATE, the PROVIDER shall provide video conference (using the facility's current videoconference equipment) telephonic access for such hearings before the Hawaii Paroling Authority.
- ii) **Court Hearings and Appearances.** On-site facilities shall be made for any hearing ordered and conducted by the state or federal courts in which an Inmate may be made available by telephone. A private room, a writing table, a chair for each participant and teleconferencing equipment shall be made available. At the request and sole expense to the STATE, the PROVIDER shall provide telephonic access for such hearings before the courts.

I. **Security and Control.** All security/control and operating plans shall be in accordance with CC Policies and ACA Standards. The PROVIDER shall supply the PSD's Mainland & FDC Branch with copies of its staffing pattern and the identification of all



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mandatory posts. The PROVIDER may adjust the staffing pattern as needed to commensurate with the population and shall provide appropriate staff to fulfill all programming and service requirements of this contract. The PROVIDER shall supply the PSD's Mainland & FDC Branch with copies of any staffing pattern changes. The PROVIDER shall ensure that the facility is adequately staffed at all times and shall be subject to liquidated damages in accordance with Section 28(b) for failure to fill any mandatory post as designated on the daily shift roster.

At a minimum the Warden and Chief of Security shall make daily rounds throughout the facility under this Contract. In the event that they are not available, either the Assistant Warden or the Administrative Duty Officer shall make daily rounds.

The facilities shall follow its procedures and management agreements with local, county and law enforcement agency in responding to emergency evacuations, riots/disturbances, escapes, criminal activities by Inmates and/or staff, and Inmate deaths. The PROVIDER shall be responsible for any costs charged by the county and law enforcement agency responding to any incident or emergency.

The PROVIDER and its facilities shall make diligent efforts to prosecute Inmates who are alleged to commit crimes while in the respective facility.

- m. **Use of Force.** The PROVIDER shall follow CC Policy, which governs the use of force against Inmates. This policy shall comply with federal and state laws and ACA Standards.
  - i) Facility staff training shall be provided in accordance with this policy;
  - ii) Reasonable force may be used as required and as authorized under this policy; and
  - iii) In the event there is a use of force involving an Inmate, the respective facility shall notify the PSD's Mainland & FDC Branch by telephone and email and a complete written investigative report shall be mailed to the PSD's Mainland & FDC Branch. The timing of such notifications and reports shall be governed by the priority level of the incident, as defined by CC Policy 5-1.
  
- mi. **Discipline.** Inmates shall be subject to the rules and regulations of the Facility in accordance with CC Policy, federal and state laws, and ACA Standards to ensure that due process rights are afforded to the Inmate and that the penalty imposed is fair, impartially given and appropriate for the offense, provided:
  - i) The disciplinary action is reasonable and proportionate in relation to the violation;
  - ii) The action taken is impartial and non-discriminatory;



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- iii) The action is neither arbitrary nor retaliatory;
- iv) The discipline is not physically abusive; and
- v) Disciplinary segregation shall not exceed 60 days for any one incident without the prior approval of the PSD's Mainland & FDC Branch Administrator. The PSD's Mainland & FDC Branch Administrator shall review such disciplinary sanction every 30 days once it has been imposed.

All misconduct or disciplinary hearing reports shall provide accurate, detailed information on the actions against the Inmate including its final disposition and mailed to the PSD's Mainland & FDC Branch at the end of each month. Copies of overturned disciplinary appeals shall also be mailed to the PSD's Mainland & FDC Branch at the end of the month.

- o. **Urinalysis Program.** Ten percent of all Inmates shall be required to participate in suspect and random urinalysis on a monthly basis at each facility. The facility's urinalysis program with the exception of the minimum testing requirement, shall be in accordance with CC Policy. All positive results for unauthorized drugs shall be reported as soon as reasonably practicable but in no event later than 24 hours after test results are received by the PROVIDER and reported to the PSD's Mainland & FDC Branch. The PROVIDER shall be responsible for the cost of urinalysis.
- p. **Transfer and Use of Inmate Funds.** Personal funds of the Inmates shall be credited to the Inmate Trust Accounts (Spendable/Restricted) by the PROVIDER in accordance with all applicable federal, state and county laws, ordinances, rules and regulations including, but not limited to, Sections 353-20, 353-21, 353-22, 353-22.6, and 353-22.8, Hawaii Revised Statutes and PSD COR.02.12, Inmate Trust Accounts. Access to restricted accounts requires the approval of the PSD's Mainland & FDC Branch. Under Section 353-20, Hawaii Revised Statutes, accounts maintained for committed persons shall not bear interest.  
For the purposes of this Contract, the facility may restrict monetary deposits to only those who are approved on the Inmates' visitation list.  
Upon return of the Inmate or death of the Inmate, the respective facility shall provide the funds in the amount then due to the Inmate at the time of return. In the event that an Inmate is released to the custody of an authorized representative of the STATE, the facility shall provide the information necessary for the STATE to make a determination regarding the distribution of the Inmate's funds.



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- q. **Restitution Payments.** Section 352-22.6, Hawaii Revised Statutes, requires PSD to enforce victim restitution orders. Effective July 1, 2012, under Act 139, Session Laws of Hawaii 2012, the amount deducted from an Inmate's earnings, deposits and credits for victim restitution orders has increased from 10% to 25%. This increase applies only to court orders for restitution imposed on or after July 1, 2012.

It does not apply retroactively to orders imposed prior to July 1, 2012. For orders imposed prior to July 1, 2012, the required restitution deduction is 10%. However, where a given court order is inconsistent with 25% or 10% statutory deduction, PSD must follow the court order. In conjunction with the State's Crime Victim Compensation Commission (CVCC), the PSD has agreed to deduct restitution amounts from inmate earnings, deposits, and credit and forward these funds to the CVCC. The PROVIDER shall work with PSD's Mainland & FDC Branch in collecting victim restitution orders.

- r. **Telephone Costs and Services.** The PROVIDER shall provide the STATE with a schedule of phone rate charges for the purposes of this Contract. Increases in price, based on increased actual cost, are subject to the STATE's approval, said approval not to be unreasonably withheld. All Inmate telephone calls with the exception of phone calls with attorneys regarding legal matters are subject to electronic monitoring by the PROVIDER's facilities and the STATE.
- s. **DNA Testing Program.** Bucal swabs shall be taken from all Inmates identified by PSD pursuant to Chapter 844-D, Hawaii Revised Statutes. If an Inmate refuses to participate, the PROVIDER shall submit the names of those Inmates to PSD's Mainland & FDC Branch Administrator. The STATE shall provide all testing kits and training to the facility staff at the sole cost of the STATE.
- t. **Prison Rape Elimination Act.** The PROVIDER shall be in full compliance with the Prison Rape Elimination Act (PREA). Failure to maintain full compliance with PREA as demonstrated through facility-specific PREA compliance audit shall constitute an event of default on the part of the PROVIDER. The STATE shall provide written notice to PROVIDER of the default and shall specify a reasonable period of time in which the PROVIDER must cure the default. The STATE shall not specify a cure period of less than the corrective action period specified in the PREA standards, which is currently one hundred eighty (180) days. If the PROVIDER fails to cure the default within the reasonable period of time specified, the STATE may assess liquidated damages against the PROVIDER of \$100 per day for each day after the specific cure period that the PROVIDER is in default, subject to a maximum of \$10,000.00 in liquid damages following the first 3-year PREA audit cycle and a maximum of \$15,000.00 in liquidated damages following each subsequent PREA audit cycle during the term of this contract.
- u. **Safety Ladders.** PROVIDER to install safety ladders in all housing units that utilizes bunk beds. These ladders must be secured to the frame of the bunk beds.



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**PROGRAM & SERVICE ACTIVITIES**

7. The PROVIDER shall provide Inmates with care, education, training, programming, employment and treatment as provided for in this Contract, including, but not limited to, furnishing Inmates with subsistence and all necessary routine medical care; providing for Inmates' physical needs; providing programs, training and treatment consistent with individual needs, and classification and programming recommendations as identified by the STATE and contained in Inmate information required pursuant to this Contract; retaining Inmates in safe, supervised custody; maintaining proper discipline and control; ensuring the execution of sentences and orders issued by the committing court in the State; and providing Inmates with access to the courts as provided in Section 6(k).

The STATE acknowledges that it is responsible for ensuring the validity of the conviction or sentence imposed by a State court upon an Inmate housed by the PROVIDER in accordance to this Contract. The STATE acknowledges that PROVIDER, and its agents, officers and employees, played no role in any conviction or sentence imposed by a State court upon any Inmate housed by the PROVIDER pursuant to this Contract.

8. While in the custody of the PROVIDER, Inmates shall be subject to all provisions of laws and regulations applicable to persons who commit violations of the laws of the State of Arizona, City of Eloy, and the State which are not inconsistent with any constitutional provisions or sentences imposed, except as specifically provided herein to the contrary.

In accordance with State of Arizona statutes, the facilities shall report all suspected felonies to the appropriate law enforcement agency for investigation. In addition, the facilities shall also report any crime committed by an employee in the course and scope of that employee's work, any crime committed on the grounds of the respective facility, and any sex offense, drug offense, or violent offense by an employee wherever committed to an appropriate law enforcement agency, provided that the facility has evidence-based, reasonable suspicion of the crime or offense.

9. All Inmates shall be confined and treated in a facility which:
  - a. Provides a level of program activity for the Inmate that is suitable to allow every Inmate in general population who meet the relevant criteria to participate in meaningful educational, vocational training, drug and other treatment and counseling programs; and
  - b. Does so in a manner that meets and does not violate any rights provided under the laws and Constitution of the United States or of the States of Hawaii and Arizona.

All admitting and booking of each Inmate shall be the responsibility of the receiving facility.



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10. The PROVIDER shall provide sufficient, meaningful program opportunities to eligible Inmates that include the following
- i) Education Services. Services include Basic Literacy Skills, Adult Basic Education, General Education Development leading to a general education diploma, Literacy & English Language Learner (ELL), College Education/Correspondence, Job readiness and vocational training. PROVIDER to conduct an Orientation program to strongly encourage inmates to enroll in classes especially those who do not have high school diploma or high school diploma equivalency.
  - ii) Supplemental Education Programs. The STATE may provide its Inmates with supplemental education programs funded by federal grants (Title 1, Part D) at no cost to the PROVIDER;
  - iii) The STATE shall provide the PROVIDER through posting on the PSD's Student Management System (SMS) educational and/or vocational testing results that may be available. For purposes of this Contract, all education services must comply with the STATE's Education Program Standards and all Federal USDOE Adult Education standards. All program placements shall comply with the STATE's education program standards. The Test of Adult Basic Education(TABE) shall be the standardized assessment used for program placement. PROVIDER shall use the version used by the Hawaii correctional facilities. Inmates transferring to the CC with recorded TABE scores that fall within 120 days shall be placed at the appropriate level of instruction without further testing. CC education personnel shall be responsible for all inmate records and shall diligently record classes, class rosters, attendance, inmate completions, record inmate progress, attendance, diplomas or certification received, and verify inmate educational records in the electronic SMS. The PROVIDER shall adhere to the SMS protocol. The STATE shall provide necessary training on the SMS including initial training, upgrade management and implementation;
  - iv) Career and Technical Education Program. Programs shall be provided to the Inmates with the opportunity to participate in job readiness and vocational training programs that lead to a trade or college certificate of completion or degree. Vocational programs shall be designed to address employment opportunities after release from incarceration. These programs may include but are not limited to Computers, Plumbing, Customer Service, Electrical Wiring/ Residential Electrical, Carpentry/Residential Carpentry, if available at the facility;
  - v) Distance-Learning Alternatives. The STATE may provide distance-learning alternatives via interactive networks such as video conferencing/classroom sharing systems, satellite broadcast classes in collaboration with the STATE's corrections education program and its partners allowing Inmates to participate in additional programming and earn certificates of completion in these programs at no cost to the PROVIDER;



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- vi) Cognitive Behavior Program. Curriculum shall be evidence-based and similar to the curriculum used at the Halawa Correctional Facility and meet the STATE's Education Program Standards. All instructors must be certified to teach these courses from a training program approved by the STATE. Training of instructors shall be provided at no cost to the PROVIDER. PSD's Education Program Manager shall monitor all courses for content and quality. The STATE may provide training for specialized programs at no cost to the PROVIDER;
  - vii) Anger/Stress Management. A program designed to teach Inmates various techniques to maintain and manage their anger in a correctional environment. Inmates are instructed in recognizing triggers that can lead to anger controlling situations in both correctional and real-world situations and are empowered with techniques to handle the situation properly;
  - viii) Hawaiian Cultural Programs. The STATE may provide curriculums and cultural programming to address religious and cultural needs of Inmates and cultural activities at no cost to the PROVIDER;
  - ix) Faith-based Unit. The housing unit community serves as a socialization process where individuals learn to identify self-centered interests that often result in violating the rights of others and replace those behaviors with productive activities. The program endeavors to reduce recidivism among graduates by instilling the importance of good character and equipping inmates with the skills necessary to resolve the conflicts of life in a positive manner, grow from past failures and live as productive members of society. Specifically, inmates who participate in the program learn how to break unhealthy habits; conquer anger, guilt and bitterness; restore vital relationships with family and others; and conquer fear; and
  - x) Special Housing Incentive Program (SHIP). A program designed to give Inmates the opportunity to readjust to the general population by providing a gradual, but controlled increase in privileges and responsibilities in 3 steps in accordance to CCA Policy. Placement criteria for the SHIP is based on one or more of the following: Current conviction of major misconduct; Disciplinary Segregation release; Administrative Segregation release; Security Threat Group (STG) Involvement; or any other reason deemed as a security threat to the good government of the facility.
11. SCC Treatment Program. If required by the Inmate's assessment, or within 30 days after receiving a request from a qualified Inmate, the PROVIDER shall place the qualified Inmate on the appropriate register for assignment in the applicable substance abuse treatment program on a space available basis. Whenever possible, PROVIDER shall ensure that qualified Inmates are admitted to the program in a timely manner to allow completion of the program prior to their parole date. The appropriate level of substance



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abuse treatment shall be based upon the results of the substance abuse assessment, the initial LSI-R and the ASUS. The STATE shall provide the SCC with the results of the substance abuse assessments. All counselors working in the substance abuse area shall be certified or licensed as substance abuse counselors by the state Certification or Licensure Board.

SCC shall reserve the right to deny any Inmate participation in a treatment program on the basis of the Inmate's general conduct in its facility, level of participation in prerequisite programs, or level of interest in such programs. SCC may terminate an Inmate from the treatment program for good cause, which shall be reported to the PSD's Mainland & FDC Branch. Inmate may be re-admitted: 1) After waiting 3 months to reapply; 2) With recommendation by PSD staff; and 3) With acceptance by counselors/group participants. Treatment graduates who later regress in recovery may be considered for re-admission if staff identifies a clinical need and the Inmate is open to participation.

The substance abuse treatment program shall include:

- a. An outpatient substance abuse program (formerly referred to as Level II) for low risk offenders, utilizing an evidence based, cognitive behavior treatment component lasting approximately 80 hours in duration. (Refer to Appendix A & B for the State of Hawaii's substance abuse program and outpatient substance abuse treatment.)
- b. A Therapeutic Community which includes an intensive residential substance abuse programming for moderate risk offenders, utilizing an evidence based cognitive behavioral treatment component lasting approximately 250+ hours and approximately 9 months in duration (Refer to Appendix A, B & C for the State of Hawaii's substance abuse therapeutic community, including Residential substance abusetreatment).  
The ratio of direct service treatment staff to participants shall not exceed a 1:30 ratio.
- c. Substance abuse assessment policies. The PROVIDER shall provide assessments pursuant to the State of Hawaii's Offender Assessment Tool Policy (COR 14.26) (Refer to Appendix D. Offender Assessment Protocols).
- d. Regularly scheduled and unscheduled (random & test for cause) urinalysis testing with access to test result data for reporting purposes.

12. Religious Programs, Chaplaincy Services and Religious diets shall be in accordance with CC Policy and ACA Standards. The weekly religious and chaplaincy services provided by the Chaplain and religious volunteers shall be provided seven (7) days a week, once daily. The weekly religious programs/services shall be available to all Inmates assigned to the facilities under this Contract and all scheduled religious activities shall be posted in common areas. Religious diets shall meet the nutritional requirements and served as directed by the facility Chaplain.



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13. Custody Reclassification. Classification on Inmates shall not be reduced or increased unless mutually agreed to by the STATE and the facility staff, and consistent with the policies and procedures of both parties (CC Policy 18-1/Form18-1B, effective 11/12/2020 and PSD COR.18.01). Each Inmate shall be considered for reclassification annually by the facility Classification Officer.
14. The PROVIDER's facilities shall provide sufficient workline opportunities to allow every Inmate in general population who meets the relevant criteria to participate in vocational, industrial and other work programs in accordance with CC Policy and ACA Standards. Inmates may be required to work, when ordered to do so by the facility. However nothing contained herein shall be construed to permit or require Inmates to participate in any training, education, industrial, or other program contrary to the laws of the State:
  - a. Inmates shall not be eligible for furloughs or participation in any community work release program. Landscaping worklines outside of the perimeter fences shall need prior approval by the PSD's Mainland & FDC Branch Administrator;
  - b. At any given time, at least two-thirds of the Inmates who meet the relevant criteria to participate in vocational, industrial or other work programs in accordance with ACA Standards shall hold full-time jobs. A full-time job is defined as a job requiring at least six (6) hours of work per day for five (5) days per week. (The 6 hours per day may be spent in the actual full-time job or in other vocational, education or in industrial training sessions.);
  - c. Inmate labor may be used for facility operations and maintenance. However, the PROVIDER or any of its subcontractors or agents shall not personally benefit from the labor of any Inmate, and no Inmate shall be placed in a position of authority over another Inmate;
  - d. The STATE shall be responsible for Inmate workline wages provided that the PROVIDER follows the STATES workline wage rate which is currently \$0.25 per hour for all jobs. Any additional wages shall be the responsibility of the PROVIDER. Workline assignments shall be in accordance to CC Policy. The STATE shall reimburse the PROVIDER for Inmate pay, which amount shall be included as a separate item on the monthly invoice. Inmates shall not be entitled to any worker's compensation benefits under Chapter 386, Hawaii Revised Statutes, nor shall its Inmates be considered to be an employee of the STATE or the PROVIDER;
  - e. In the case of hobby craft/art activities programs, inmates shall have the right to dispose of the products of their labor and to retain a portion of the proceeds on any sale of their work in accordance with the laws and rules of the State of Arizona, and the PROVIDER.



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- f. Except as provided in Item (e) above, the facilities shall have the right to dispose of all products produced by the Inmates and may retain all proceeds and shall bear all costs of the program.
15. The PROVIDER shall provide medical, mental health, dental services, and the PROVIDER staffing for such services in accordance with the laws of the STATE, the laws of the State of Arizona, and the American Correctional Association Standards for Adult Correctional Institutions, Fourth Edition, and its supplements; and the National Commission on Correctional Health Care Standards-Prison Edition, 2018, and its updates and supplements. In the event of any conflict between standards, codes or laws, the more restrictive shall apply.
- The PROVIDER shall provide routine medical services to Inmates at no additional cost to the STATE (unless otherwise provided), and additional health care provided at either the STATE's or the Inmate's expense, including the following:
- The PROVIDER shall employ licensed health care staff including physicians, nurse practitioners, registered nurses and physician assistants, overseen by a Health Services Administrator and in conjunction with the appropriate medical PROVIDER, shall have final responsibility for clinical decisions. The PROVIDER shall provide the staffing levels and hours of service that are pursuant to the NCCHC Standards as they may be amended. This includes a minimum of one (1) registered nurse which may include the Health Services Administrator or nurse shift supervisor or nurse manager on-site per shift of clinic operation. (For the purpose of meeting this requirement, a registered nurse may be available for consults via telephone.)
16. Routine medical services shall include:
- a. Primary care services including sick call exams and daily urgent care for the general and lockdown populations. Clinical delivery of care shall be timely and appropriate to the acuity of the patient, and at a level comparable to the community standard for medical care and in accordance with NCCHC Standards;
  - b. Nursing services shall be provided by registered and licensed nurses who are trained in correctional health care. Services shall include nurse rounds/sick calls, nurse clinics, pill call, emergency response, and oversight of medical observation and lockdown areas;
  - c. A secured sick call management system allowing for daily requests, triaged by a health care professional that occurs within twenty-four (24) hours of notification of the request. Any necessary health care follow-up shall be timely and appropriate to the acuity of the patient and occur within seventy-two hours (72) of receipt of the request;



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- d. Chronic care management system is where all patients with a chronic disease such as diabetes, hypertension, asthma or chronic mental health conditions are enrolled into a chronic care treatment program on intake or when diagnosed. These patients will be followed up by a health care professionals recommended by the attending physician based on the severity of the Inmate's condition and the treatment plan. The frequency of visits depends on the control and status of the disease state (per classification of NCCHC Prison Health Standards, 2018). In no event shall such follow-ups be less than once every six months. The chronic care program treatment schedule will include disease-appropriate screening/testing, diagnostics, examinations and inmate education. The care provided shall be consistent with comparable care in the community and shall generally be in accordance with that described by the NCCHC Prison Health Standards 2014, or most current edition;
- e. Medical and specialty care shall be provided utilizing community specialists; whenever possible, specialist's services shall be provided on-site;
- f. Observation beds/cells for Inmates who require more intense monitoring or treatment, but who are not in need of acute hospitalization, shall be provided. However, this provision shall not be interpreted to require facility modifications or additions;
- g. Routine diagnostic procedures, when deemed medically necessary by the attending physician including, but not limited to, multistix urinalysis, phlebotomy, hemocult tests, glucose tests such as Accuchecks, electrocardiograms, visual acuity screening tests. Results shall be documented in the Inmate's medical record;
- h. Radiology services, fixed and/or mobile;
- i. Periodic prevention visits shall replace traditional annual physical exams specifically to review the Inmate's need for preventive services. Annual visit for inmates over fifty (50) years old; every three (3) years for each inmate less than fifty (50) years old. Visits shall be patient-specific and the frequency can be adjusted per Inmate's chronic conditions (e.g. diabetes or hypertension). Based on the United States Preventive Services Task Force, visits should include Body Mass Index (BMI), blood pressure, tuberculosis, colon cancer screening, abdominal aortic aneurysm screening (if relevant), and the need for aspirin;
- j. Infection control program shall be provided to aggressively monitor such things as MRSA (Methicillin-resistant Staphylococcus Aureus), Coccidioides, and TB (Tuberculosis). Monitoring shall be initially conducted at intake, during annual physicals and as indicated during sick calls;
- k. Immunizations will include: DPT (every 10 years; if under age 65, use Tdap, if over age 65, use Td), Influenza (over age 50; at any age if inmate has risk factors or per latest guidance from the CDC), Zostavax (over age 60, one dose only; or those with



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relevant risk factors), Pneumovax & Prevnar (over age 65, one dose each appropriately spaced; or earlier for those with relevant risk factors), Hepatitis A and B (risk-factor based immunization), MMR (if born after 1956 and previously vaccinated – one dose; if born after 1956 and incomplete or unknown vaccination history- two-dose series). covid-19 (all inmates) initial shot and any booster shot. All immunizations shall be reimbursed by the STATE.

- I. Hepatitis C treatment consistent with the STATE's Treatment Guidelines, except that the cost of Hepatitis C related medication shall be reimbursed by the STATE;
- ii. Prescription and over the counter medications taken chronically such as preventive aspirin and pain medication shall be provided as necessary at no cost to the Inmate, except the cost of AIDS/HIV related medication, which shall be reimbursed by the STATE;
- iii. Medical prostheses consistent with the STATE's policies and procedures, will be reimbursed by the inmate;
- liii. Mortality and peer reviews shall be performed both at the facility and the PROVIDER's corporate office. The STATE shall receive verification of the reviews and a copy of the autopsy reports; and
- liv. Durable medical equipment and supplies shall be provided as necessary.
- lv. Optometric care shall include annual eye examinations for Inmates with chronic diseases such as diabetes that may affect vision, and at least once every 2 years for Inmates with prescriptions greater than 20/50 in one or both eyes. If an Inmate with visual acuity 20/50 or worse does not have sufficient funds to pay for corrective eyeglasses, the PROVIDER shall provide the eyeglasses at the STATE's expense provided that the STATE approves of the purchase and the Inmate agrees in writing to reimburse the STATE for the cost. In such cases, the eyeglasses shall be limited to a small number of basic generic styles.



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- s. Dental Services shall include:
  - i) Emergency dental treatment;
  - ii) All necessary extractions including soft tissue and partial bony impaction;
  - iii) Maxillary and mandibular removable partial dentures when necessary for proper mastication (Inmate to pay for the appliance);
  - iv) X-rays;
  - v) Oral surgery specialty outpatient care, including but not limited to extractions, biopsies, treatment of fractured jaws, and other surgical procedures; and
  - vi) Orthodontic treatment, periodontal surgery, tissue or bone grafts and dental implants shall be considered an elective and shall not be required care of the PROVIDER unless paid for by Inmate.
  
- t. Mental Health Care including mental health screening and evaluation for major mental conditions or illness, identification, treatment and management of acute problems, suicide prevention, shall be provided by mental health professionals 40 hours of service per week and a Psychiatrist who will provide at least 4 hours of service weekly:
  
- u. Hormone therapy shall be provided to transsexual inmates at no cost to the patient/ inmate.
  
- v. The PROVIDER shall exercise conservative care before recommending outside treatment or hospitalization. Except in bona fide emergencies, the PROVIDER shall obtain prior written approval from the PSD's Health Care Division before an Inmate is scheduled for hospitalization or other treatment outside of the facility. The PROVIDER shall inform the PSD's Health Care Division the nature of the illness or condition, a recommended course of treatment, and the estimated cost of the treatment. The STATE may authorize the treatment as recommended, or return the Inmate to the STATE, at its own expense, for the treatment. In the absence of a bona fide emergency, the STATE shall not be responsible for the costs of outside treatment undertaken without the STATE's prior written approval. An Inmate's stay in a hospital shall not exceed the usual and customary length of stay for the condition, unless there are documented complications requiring continued treatment in a hospital setting.



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17. In the event that an inmate is hospitalized for cancer treatment and such hospitalization exceeds five (5) consecutive calendar days then beginning on the sixth (6) calendar day, the STATE shall be responsible for the costs of the security during the hospital confinement and shall reimburse the PROVIDER for the security rate of \$36.66 per hour per officer. In the event that an Inmate is hospitalized for any reason other than cancer treatment and such hospitalization exceeds fourteen (14) consecutive calendar days then beginning on the fifteenth (15) calendar day, the STATE shall be responsible for the costs of the security during the hospital confinement and shall reimburse the PROVIDER for half of the security rate of \$36.66 per hour per officer.
18. Emergency Care is defined as a situation in which there is a sudden and unforeseen onset of a condition or symptom that is potentially threatening to life, limb or important bodily function, such as eyesight. To qualify as a medical emergency, care must begin immediately after the onset of the condition or symptom.  
The Provider may make appropriate arrangements for emergency care prior to obtaining approval from the PSD's Health Care Division. The Provider shall provide notification to the STATE of the emergency on the day the emergency occurs. Where possible, the Provider shall arrange for emergency care at a state or county operated medical facility, or at a medical facility known within the community to charge reasonable rates.  
The facilities shall provide transportation services to local medical/dental/mental providers as designated by the STATE. Rapid transport is available to a full service trauma center in Tucson, Arizona or other appropriate center based on the appropriateness of the emergency medical situations at cost to the STATE, provided that the emergency was not caused by or was the fault of the Provider.



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19. The Provider shall not be responsible for the cost of medication or regimens specifically aimed at the treatment of conditions associated with Acquired Immune Deficiency Syndrome (AIDS) and Hepatitis C. The Provider shall follow the STATE's protocols for the treatment of Hepatitis C and the STATE shall be responsible to reimburse the Provider for such costs in accordance with the STATE's Hepatitis C protocol. Otherwise, the Provider shall provide routine medical care for any Inmates who have AIDS or are HIV positive or have Hepatitis C.
20. The STATE will not approve payment for elective care, cosmetic treatment, or procedures primarily for the convenience of the Inmate, experimental procedures, and any procedures not normally covered by standard health insurance plans.
21. The Provider may assess reasonable fees (Inmate Co-Payments) upon Inmates who request non-emergency medical, dental, optometric, or who intentionally inflict injury-upon themselves, if:
  - a. Such fees are governed and will be consistent with the STATE's written co-payment policies and procedures;
  - b. The policies and procedures include an appeal process to allow an Inmate to appeal the assessment;
  - c. The policies and procedures establishes a fee schedule under the following conditions:
    - i) Fees are assessed from the Inmate's individual trust account (spendable and/or restricted); and
    - ii) Fees shall not be assessed if the individual trust fund balance (spendable and/or restricted) is less than \$10, provided that the Provider may implement a procedure to recover fees in the future.
  - d. The fees collected shall be credited towards any medical invoices sent to the STATE.

**MANAGEMENT REQUIREMENTS**

22. **Geographic Coverage of Service.** Multi-custody level correctional facilities for the confinement, care and custody of STATE male inmates shall be provided at the Providers facilities in Arizona (SCC). The facilities shall not exceed their rated capacities in a manner which impacts the housing units occupied by the Inmates without the STATE's prior approval.

The SCC shall be program-intensive, providing comprehensive programs that emphasize counseling, substance abuse treatment, education and vocational opportunities to prepare Inmates for a successful re-entry into society. This facility shall support academic



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development through Adult Basic Education (ABE) programs and GED testing. Inmates may participate in a wide range of religious and recreational activities and programs sponsored by facility staff and local volunteers.

23. The facilities shall meet and comply with all relevant codes and standards for housing male inmates:
- a. Each facility shall comply with all mandatory provisions and 90% of the non-mandatory provisions enumerated in the Physical Plant Standards of the American Correctional Association Standards for Adult Correctional Institutions, Fourth Edition, and its Supplements;
  - b. The Provider shall take all necessary steps to have the facilities under this Contract continually accredited by the ACA;
  - c. The Provider shall operate the facilities in accordance with all mandatory provisions and 90% of the non-mandatory provisions of the American Correctional Association Standards for Adult Correctional Institutions, Fourth Edition, and its Supplements;
  - d. The Provider shall comply with all essential standards and 85% of the applicable important standards of the National Commission on Correctional Health Care Standards-Prison Edition, 2016, and its Supplements;
  - e. The Provider shall operate and maintain the facilities so as to comply with the Life Safety Code, and all applicable fire codes, health codes, and building and occupancy codes of the State of Arizona;
  - f. In the event of any conflict between any code, standard, law or rule, the more restrictive shall apply; and
  - g. If the Provider fails to comply with any of the provisions of this Section, it shall provide to the STATE for its approval a plan of corrective action within 30 days.
24. **Personnel.** The Provider shall:
- a. Provide 24-hour care and supervision to incarcerated individuals, as well as administrative and support service personnel for the overall operation of the facility in compliance with ACA standards. Staffing plans must provide for all aspects of the management and operation of the facility, including administering all inmate programs, providing transportation and security, and ensuring appropriate health care;
  - b. Perform criminal history checks, background checks and random drug testing of staff;



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- c. Provide correctional officers a minimum 160 hours of basic correctional training within three (3) months of employment at the facility and provide a minimum of 40 hours of annual supplemental correctional training. Provide support personnel who have daily contact with inmates, professional specialists and administrative and managerial personnel pre-service orientation and on-the-job training in the first year of employment and 40 hours of annual in-service training;
- d. Provide staffing in compliance with Section 28(b);
- e. Employ a single on-site Warden to manage each facility under this Contract and its programs;
- f. Operate its facilities using the Provider's Unit Management model. If at any time the Provider intends to deviate from this management model, the STATE shall be given notice in writing;
- g. Provide case management staff and/or substance abuse counselors with LSI-R training and appropriate LSI/ASUS forms at SCC at no cost to the STATE;
- h. Provide qualified records personnel who shall prepare and maintain all necessary and pertinent files and records on Inmates, including name, State inmate number, birth date, the date and place from which the Inmate was transferred to the Provider's classification and housing status, medical, mental health and dental records, adjustment, participation in activities and programs, discipline, and any other relevant information or significant events while in the custody of the Provider;
- i. Provide a facility Classification Officer at each facility to complete annual reclassification on each Inmate. Classification on Inmates shall not be reduced or increased unless mutually agreed to by the STATE and the facility staff, and consistent with the policies and procedures of both parties (CC Policy 18-1/Form18-1B, effective 11/12/2020 and PSD COR.18.01);
- j. Provide the STATE with office space, telephone and computer access for the on-site monitor that the STATE may employ. Monitor's office shall be within the SCC administrative offices at no additional cost to the STATE; and
- k. Provide the STATE with internet access at SCC to allow access and review data stored in PSD's Offendertrak Management System relative to Inmates housed in the facilities covered under this Contract. Prior to access to PSD's Offendertrak, SCC shall submit a list of staff names that PSD Mainland & FDC Branch shall review and approve for security password clearance. Identified and approved staff shall be required to attend Offendertrak training provided by PSD at no cost to the Provider.



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Offendertrak data shall not be downloaded to the Provider's independent automated system.

25. **Quality Assurance and Evaluation Specifications.** The STATE shall have the right to inspect, at all reasonable times, the facility or institution of the Provider in which Inmates are confined pursuant to this Contract in order to determine whether the terms of this Contract are being followed; whether all Inmates are treated equitably; whether the facility is appropriately constructed, equipped, and maintained; and whether the Provider is maintaining standards as provided for in this Contract.

The STATE may have a full-time onsite monitor(s). Each facility covered under this Contract and inmate programs shall be subject to daily inspections for contract compliance.

The STATE may investigate, in person or by record review all incidents or reported conditions of confinement involving the Inmates.

The STATE shall have the right to inspect, at all reasonable times, all records of, or associated with, Inmates or any charges, billings, demands, and payments under this Contract, including, but not limited to any institutional, medical, dental, psychiatric, financial, educational, recreational, or transportation expense, timekeeping, or other operational records. All records shall be retained and made accessible for a minimum of three years after the expiration date of this Contract, or any subsequent amendment, continuation, or follow-up contract whichever is later. The Provider shall not dispose of any records without the approval of the STATE. The STATE reserves the right to require appropriate audits to be conducted by an accounting firm or person chosen by the STATE, the cost to be paid by the STATE.

The STATE's access to records and information shall be limited to information specific to the facility and relevant to monitor compliance with this Contract or necessary to fulfill its own obligations hereunder. Access shall not extend to proprietary corporate information, documents protected by statute or regulation, or documents containing information about other facilities or customers. Neither shall the STATE's access extend to documents necessary for peer review, mortality and morbidity reports, and as otherwise set forth below. After an incident, any document prepared by counsel in anticipation of litigation will be protected in accordance with attorney-client privilege. Any other information regarding the facts of an incident, including but not limited to: incident reports, witness statements, video tapes, medical reports, internal investigation reports, pictures, telephone recordings, or physical evidence and/or subsequent remedial actions shall be released to the STATE. Opinions or other subjective assessments related to a non-factual conclusion shall not be released except by mutual agreement of the parties.

26. The Provider may employ a Quality Assurance Manager under this Contract who shall be responsible for:



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- a. Tracking all facility policies, procedures and contractual changes against the approved audit instruments, updating it as needed, as well as tracking all period quality assurance reports required by the Provider;
  - b. Scheduling internal audits;
  - c. Serving as the local coordinator for all external audit activity;
  - d. Tracking audit deficiencies plans of action and other remedial actions related to audit outcomes;
  - e. Making recommendations to the Warden for policy and procedural changes that will increase the effectiveness and efficiency of the audit program; and
  - f. Providing a Response and Corrective Action Plan to the STATE within 30 days of receiving any adverse actions as documented in the STATE's monitoring report.
27. The PSD's Mainland & FDC Branch shall review and approve any recommendations from the Provider for Inmate transfers, classification custody level changes, determination of release dates, parole eligibility, and work line salaries.

The STATE's inspection team shall be provided with all requested documentation upon arrival provided such information is requested in writing two weeks in advance.

28. **Liquidated Damages.** Liquidated damages shall be assessed against the Provider if the Provider fails to comply with the terms of this Contract for the following reasons:
- a. If one or more qualified Inmates are not placed into SCC's residential substance abuse treatment program within 30 days of the qualified Inmate's request, because the Provider violated Section 11, liquidated damages in the amount of \$17.00 per day per Inmate shall be assessed; and
  - b. The Provider shall staff the facilities covered under this Contract in accordance with its staffing pattern. In the event any mandatory post is unmanned, the STATE may assess liquidated damages for each shift the post is unmanned. Damages shall be based upon a daily pro-rated amount based upon the salary and fringe benefits of the employee normally assigned to the post.

If liquidated damages are assessed, the Provider may credit the amount or the STATE may withhold the amount from the Provider's payment.



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Notwithstanding the above, the Provider shall not be relieved of liability to the STATE for any damages sustained by the STATE due to the Provider's breach of the contract for reasons other than those described in this section.

29. **Defense.** The STATE shall defend itself in connection with civil actions filed in federal or state courts, or administrative grievance procedures and claims, challenging the authority of the STATE to transfer an Inmate to the custody of the Provider, provided that the Provider remains responsible for claims involving the selection of individual Inmates. For example, the STATE shall defend itself in a habeas corpus claim, which alleges that the STATE had no authority to transfer Inmates to a private correctional facility.

The Provider shall defend itself and the STATE and STATE's agents, officers and employees, and bear all costs, attorney's fees and other litigation expenses incurred in connection with any and all claims, other than those specified above, brought against the Provider and/or the STATE and/or their respective agents, officers or employees, by any Inmate in the physical custody of the Provider so long as the allegations arise from the conduct of the Provider, and including any decisions of the Provider relating to the selection process resulting in any Inmate being placed, assigned or transferred to the custody of Provider.

In the event the STATE or its officials, and the Provider or its officials are served with civil process in connection with any civil action, the applicable party shall promptly tender the case to the party bearing the burden of the defense.

The Provider shall have authority to settle cases on a purely monetary basis. On a semi-annual basis, Provider shall forward to the STATE a list of cases for which Provider indemnified the STATE under this provision and the identification of the outcome.

30. Inmates legally confined to the Provider's facilities under this Contract shall not be removed there from without an order from the STATE. This paragraph shall not apply to an emergency necessitating the immediate removal of an Inmate for medical, dental, or psychiatric treatment or to a removal made necessary by fire, flood, earthquake, or other emergency presenting danger to the safety of the staff, the public or the Inmate. In case of removal for an emergency, the Provider shall, at the earliest practicable time, inform the PSD's Mainland & FDC Branch Administrator of the whereabouts of the removed Inmate and shall exercise all reasonable care for the safekeeping and custody of the Inmate.
31. The STATE shall not reimburse the Provider for any cost enumerated in this Contract where such cost arises from or is caused by the negligence or fault of the Provider.
32. **Reporting Requirements for Program and Fiscal Data.** The Provider shall make files and records on Inmates available to designated personnel of the STATE. All Inmate records, reports, documents and files shall be made available immediately to the PSD's Mainland & FDC Branch staff upon request. Upon termination of confinement of an Inmate



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at the Provider's facility, the Provider shall forward a complete updated copy of the Inmate's files or records to the PSD's Mainland & FDC Branch. All Inmate records shall be considered confidential, accessible only to the Provider's employees or agents with a bona fide need to know.

The Provider shall provide to the PSD's Mainland & FDC Branch progress reports every 6 months summarizing each Inmate's conduct, adjustment, and program participation, and recommendations regarding the Inmate's continued placement in SCC, and an annual consideration for reclassification. Semi-annual reports shall be submitted no later than 10 working days after the end of each 6-month period.

SCC shall submit the following reports to the PSD's Mainland & FDC Branch Administrator by the 5<sup>th</sup> working day of each month:

- a. Name and number of Inmates placed in disciplinary, administrative or medical segregation, along with the reason for placement and the dates of placement;
- b. Name and number of Inmates who are in educational, vocational training, substance abuse treatment, and other programs;
- c. Name and number of Inmates who are assigned to jobs, along with the title of their jobs, hours of work, and rate of pay;
- d. Monthly grievance log containing Inmate's name, description of grievance and outcome of grievance;
- e. Narrative of facility highlights, serious incidents, and other significant issues;
- f. Summary reports on the results of urinalysis conducted on Inmates pursuant to this Contract; and
- g. Monthly STG reports and statistics.

The Provider shall provide the STATE with copies of reports of inspections conducted by local fire, health, and other regulatory agencies.

The STATE shall be responsible for calculation of the length or duration of confinement for all Inmates and shall notify the Provider of any transports returning Inmates to the STATE.

33. **Escape of an Inmate.** The Provider shall notify the STATE immediately upon the escape of any Inmate and shall take all action necessary to affect the apprehension of the escaped Inmate. The PSD's Mainland & FDC Branch Administrator shall be notified immediately by telephone, and in writing as soon as possible, but not later than the 1<sup>st</sup> working day



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after the escape. The Provider shall bear all expenses related to the escape, apprehension and return of the Inmate(s) to the Facility from which they escaped. The Provider shall promptly notify the local law enforcement officials regarding escapes and major incidents.

The Provider shall refer for prosecution any Inmate who is alleged to have escaped from its facilities under this Contract. The STATE shall not be responsible for health care for any illness or injuries incurred while an Inmate is on escape status.

34. **Death of an Inmate.** In the event of the death of any Inmate, the Provider shall notify the PSD's Mainland & FDC Branch Administrator, as soon as possible, but no later than 2 hours after the Provider first learns of the death. Fingerprint arrangements shall be made including, but not limited to, taking fingerprints of the right thumb and right index finger. The coroner of the local jurisdiction shall be requested to review all deaths. The STATE shall not be responsible for the cost of the coroner's review. The Provider shall provide the STATE with any reports relating to the death, including reports by the coroner and the attending physician, autopsy reports, and investigative reports of the facility and law enforcement officials. The Provider shall provide the STATE with a certified copy of the death certificate within 5 working days of its receipt from the State of Arizona. The facility shall return the Inmate's file, medical records, property and funds to the PSD's Mainland & FDC Branch within 5 business days after the death.

The PSD's Mainland & FDC Branch Administrator shall furnish instructions and information regarding disposition of the body. Provided that the Provider is not at fault for the Inmate's death, all expenses relative to any necessary preparation of the body for shipment or express charges incurred by the Provider pursuant to instructions of the PSD's Mainland & FDC Branch Administrator shall be reimbursed by the STATE. The parties may agree to have the Provider arrange the burial and all matters related or incidental thereto and such expenses shall be paid as mutually agreed by the parties. The provisions of this paragraph shall govern the relationship only between the STATE and the Provider and shall not affect the liability of any relative or other person for the disposition of the deceased or for any expenses connected therewith.

The STATE shall notify the next of kin of the deceased Inmate.

35. **Contract Contact Information.**

**State Contact:**

Mr. Howard KOMORI, Administrator  
State of Hawaii/Department of Public Safety  
Mainland & FDC Branch  
1177 Alakea Street  
Honolulu, Hawaii 96813



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E-mail address: Howard.D.Komori@hawaii.gov  
Office telephone: (808) 837-8020  
Facsimile: (808) 837-8026

For all Inmate medical matters, please contact PSD's Health Care Division:

Mr. Gavin Takenaka, Administrator  
State of Hawaii/Department of Public Safety  
Health Care Division  
1177 Alakea Street  
Honolulu, Hawaii 96813

E-mail address: GavinK.Takenaka.@hawaii.gov  
Office telephone: (808) 587-1250  
Facsimile telephone: (808) 587-3378

**Provider's Contact:**

Ms. Kelly Durham, Managing Director, State Partnership Relations  
Corrections Corporation of America  
5501 Virginia Way, Suite 110  
Brentwood, Tennessee 37027

Office telephone: (615) 263-3034  
Facsimile: (615) 263-3100

**Provider's Facility Contact:**

Warden Kristopher Kline  
Saguaro Correctional Center  
1250 East Arica Road  
Eloy, AZ 85131

Office telephone: (520) 464-0500  
Facsimile: (520) 464-0599

## **Appendix A**

### **State of Hawaii's Substance Abuse Program**

The scope of work encompasses the following tasks and responsibilities:

#### A. Service Activities (Minimum and/or mandatory tasks and responsibilities)

The Department of Public Safety require that the following components of treatment services include:

##### 1. Assessment services and treatment planning

Assessments conducted shall be in accordance to The State of Hawaii Public Safety Department's Offender Assessment Tool policy and procedure (COR.14.26).

Individuals will be referred for treatment based on the initial LSI/ASUS, a multi-leveled assessment which will indicate level of risk, level of criminogenic needs, and substance abuse problems across 6 domains, involvement, disruption, anti-social, emotional, defensiveness and motivation. PROVIDER'S assessment will focus on specific strengths, problem areas targeted for change and strategies for change. As part of the assessment process, the PROVIDER shall review the offender's institutional file for any additional information that may contribute to formation of the treatment plan. Information gathered in the assessment will be used to develop a treatment plan.

Treatment plans shall include treatment services (group and individual), projected time in treatment, short and long-range goals, and should measure an offender's progress in treatment. The client will agree to the treatment plan, which becomes part of the treatment record. The PROVIDER will develop treatment phases that reflect measurable and observable changes in the clients' attitudes and behaviors. The treatment plans shall coincide with the treatment phases and document client behavioral and attitudinal changes.

PROVIDER shall endeavor to accept into treatment those individuals who are nearing their parole hearings so that the individual can be paroled shortly after completing treatment. It should be noted that offenders should be accepted into treatment so that they may complete all components of the continuum of care for their treatment.

##### 2. Education and Treatment services

PROVIDER will develop an open-ended treatment program, which includes both educational services (i.e., criminogenic issues, cognitive restructuring, skill building, family issues, co-dependency issues, and substance

abuse/addiction issues) and group counseling services. Program shall be tailored to deal with needs identified in the LSI/ASUS and clients' assessment and treatment plan.

PROVIDER shall develop/utilize an evidence-based, cognitive-behavioral curriculum that addresses the interaction of criminal thinking and drug abuse using a group treatment format. The curriculum shall offer a method that allows participants to explore and correct their thinking errors, learn new coping behaviors, and rehearse and practice these new behaviors and attitudes for optimal skill development. The provider shall offer a relapse prevention component to the treatment program that includes education, and rehearsal and practice of relapse prevention skills.

Class time shall be structured as below:

25% of time shall be spent in teaching the lessons.

25% of time shall be spent in review of the lessons.

50% of time shall be spent in practice and rehearsal of new skills learned from the lessons.

PROVIDER shall provide at least sixteen (16) open-ended education and treatment groups that operate on an on-going basis throughout the year. The treatment groups shall be designed to be "open-ended" in order for inmates to begin treatment according to their individual availability and eligibility without having to wait for a new group to begin. It is recommended that each offender attend a minimum of two group sessions per week, approximately two (2) hours per session for a minimum of twenty (20) weeks, thus allowing the offender to receive a total of eighty (80) hours of structured group education and treatment before completion of treatment. In some cases, individuals may need to have more than the recommended twenty (20) weeks of treatment based on their personal progress in treatment.

Depending on offender availability and the size of the meeting/classroom space, the basic format for the groups is as follows:

1. Weekly education group consisting of one treatment counselor and a maximum of fifteen (15) offenders;
2. Weekly process or focus group consisting of one treatment counselor and a maximum of fifteen (15) offenders;
3. The structured group education and counseling groups shall be offered either during daytime or evening hours, during hours that do not interfere with other correctional facility priorities;  
The structured group education and counseling groups shall be conducted in the learning center or other available facility spaces; and

4. The structured group education and counseling groups shall be conducted in the learning center or other available facility spaces.

PROVIDER shall provide the philosophical basis for treatment and for dealing with incarcerated inmates who have a history of substance abuse:

1. The type(s) of intervention(s) that they will use;
2. The frequency and duration of the treatment intervention for each issue;
3. The maximum number of inmates that will be allowed in each component of treatment;
4. The admission criteria to be used for accepting offenders into the program; The discharge criteria for both successful completion of treatment and unsuccessful completion of treatment (i.e., termination, transfer before completion);
5. Procedures for re-admitting inmates to a program if they have been terminated for breaking rules; and
6. Procedures for re-admitting inmates to a program if they have already completed outpatient treatment and regress in recovery as noted by behavioral problems, positive urinalysis, facility misconducts, etc.

### 3. Individual Counseling

The PROVIDER shall conduct individual counseling session for each participating offender at each phase increment or when necessary as dictated by the counselor or when requested by the offender. The recommended session length should be approximately fifteen (15) minutes. Some individuals may require additional assistance to learn treatment materials, to accept the need to change, or to overcome their specific barriers to change. The individual counseling sessions may be provided to deal with issues not appropriate for the group setting.

### 4. Continuing Care

PROVIDER shall develop a continuing care component for offenders that successfully complete primary treatment, including those discharged from other levels of treatment (i.e., Residential treatment). Continuing Care shall be provided for the purpose of reinforcing and maintaining recovery from the time of completion of treatment to the time when the offender transfers to either parole status or to a community level facility. (It is well documented in the corrections treatment research, and has been observed in our own population, that inmates who complete treatment, and who return to the general population without any continuing support, lose the effects of treatment, and regress back to criminal attitudes and behaviors.)

The continuing care component of treatment must encompass the aspects of relapse prevention, criminal conduct behaviors and attitudes, and

prevention of recidivism. Additionally, other topics related to recovery should be added to the repertoire of curriculum topics, such as recovery support systems, job skill development, assertiveness vs. aggression, transportation issues, etc. It should also be noted that the offender must comply with all recommendations that are on his discharge summary from his primary treatment. An offender's length of stay in the continuing care program is dependent upon his personal ability and demonstration of maintaining responsible behavior and the counselors' observations and discretion. The continuing care component may also include process group and individual counseling.

The continuing care component shall be conducted once a week for one and half (1½) hours. The group size shall be no larger than twenty (20) offenders participating in the group. Should there be more than 20 candidates per facility, the PROVIDER may conduct more than one group at a time to insure all offenders receive the continuing care program. The continuing care component should be no less than ten (10) weeks and no more than thirty (30) weeks. The PROVIDER must include a continuing care component available to all clients who have completed either Outpatient or Residential treatment until he is paroled, or terminated from incarceration.

#### 5. Booster Sessions for Completed Outpatient Participants

Booster sessions should be available to clients to return to treatment that have completed and then later have misconduct or behavioral problems that warrants a redress of treatment for success of recovery. These sessions would be extremely limited and would be used only for those offenders who have regressed that still demonstrate potential for recovery. The booster sessions should be used as a refresher for the offender who completed treatment and has somewhat digressed in his performance since completing treatment. This should not be used for the offenders who have relapsed into active substance use and abuse. Active use and abuse of substances would warrant a re-evaluation of the offender with a high probability of being recommended to an appropriate level of treatment. Additionally, these sessions would not be used for the client who re-commits another crime while on furlough or extended furlough. Again, this offender would be re-evaluated and would again probably be recommended for the appropriate level of treatment. Booster sessions are designed to be used for the offender who may have committed minor or moderate misconducts, demonstrates consistent poor decisions, demonstrates consistent and constant thinking errors, poor emotional control, or re-establishes himself as being resistant to the facility rules and staff authority

**Appendix B**  
**State of Hawaii's Outpatient Substance Abuse Treatment**  
**(Formerly Level II)**

Outpatient primary treatment services utilize a cognitive behavioral treatment component lasting approximately 80 hours, meeting twice per week, over a twenty-week period. The curriculum utilized is The Residential Drug Abuse Program (RDAP). Four (4) selected Journals are used as a stand-alone program resulting in a self-assessment. Each Journal systematically builds on the previous Journal, thereby increasing the level of knowledge, skills, and awareness.

Outpatient services are for Inmates who are at lower risk for criminal conduct and meet diagnostic criteria for substance abuse or dependence. They have had minimal disruption in their psychosocial or vocational functioning.

**SERVICE ACTIVITIES**

**A. Assessment services and treatment planning**

Individuals will be referred for treatment based on the completed LSI and ASUS instruments (Intake & Initial), multi-leveled assessment instruments initially completed in Halawa's RAD Unit which will indicate level of risk, level of criminogenic needs, and substance abuse problems across 6 domains, involvement, disruption, anti-social, emotional, defensiveness and motivation.

The scope of the assessment shall include a full analysis of the offender's strengths and weaknesses as determined from an evaluation of the following areas: current health status, medical history, alcohol and drug use history, emotional and behavioral functioning, social history, family background, relationships, legal history, occupational and educational history, degree of denial, readiness for treatment, behavioral performance while incarcerated, as well as other pertinent information available.

An individualized comprehensive treatment plan shall be developed from the LSI and ASUS instruments (Intake & Initial) for those who have been identified as having moderate to serious substance abuse problems and who have been accepted for admission to structured Outpatient group education and treatment services. Treatment plans must include, at a minimum, the following information:

- Identification of inmate's problem areas;
- Type(s) of treatment services recommended;
- Short and long range treatment goals;
- Target activities and dates for accomplishing objects as a means of measuring treatment progress;
- Process for periodic review and update of treatment plans; and
- Roles and responsibilities of both inmates and program staff.

Treatment plans will be individualized to meet different inmate needs and will be specific enough to measure each offender's progress through the treatment process. Each participant's treatment plan and progress will be reviewed periodically and updated as necessary by program staff. PROVIDER's counselors shall also assume case management responsibilities for the substance abuse programming of sentenced offenders and will work closely with treatment staff of the different service components of the substance abuse continuum as well as with appropriate staff at the correctional facilities.

A copy of the treatment plan shall become part of the Inmate's regular institutional file which facility case workers and parole officers may review. As an Inmate progresses through treatment, the plan shall be reviewed on a monthly basis and updated as needed.

Periodic update and review of treatment plans shall occur while participating offenders are receiving structured educational and treatment services and individual and family counseling services. Treatment plans for all sentenced offenders participating in the substance abuse treatment continuum shall be reviewed and updated prior to the inmate's release from the correctional facility.

## B. Treatment Services

Following assessment and development of an individualized treatment plan, each sentenced offender shall receive a substance abuse and criminality treatment continuum aimed to provide target group inmates with a structured program of cognitive/life skills training, and group counseling with a behavior/cognitive focus rather than a purely educational or twelve-step oriented approach as a means of facilitating each offender's recovery and preparation for eventual discharge and release into community status.

The Outpatient Program shall consist of Treatment Groups held not less than twice each week for a period of two hours per group covering the four selected Journals of the RDAP curriculum that address cognitive restructuring and initial in-roads to cognitive processes, with homework and Journal requirements outside of the classroom for a period of 20 weeks. Contingent upon inmate availability and meeting room size, the format for treatment groups shall consist of two weekly sessions of 2 hours each, as follows:

- Weekly process or focus group with a maximum of 18 Inmates each facilitated by one counselor; and
- Each of the 18 participating Inmates will receive four (4) hours of structured group counseling per week. The group counseling will include role modeling, role-playing and skill practice activities.

Criteria for admission, discharge and re-admission to the group will be based upon multiple factors. Criteria for admission includes:

1. Inmate is referred for treatment by Department staff.
2. Inmate has been assessed as having a moderate to serious substance abuse problem.
3. Inmate chooses to participate, i.e., voluntary admission.
4. Inmate's substance abuse screening specifies outpatient treatment as part of the overall rehabilitation plan.
5. Inmate's current behavior in the correctional facility merits the opportunity to participate.

Criteria for clinical discharge from the group are based upon attendance, participation, conformity to rules, absence of dirty urinalysis tests, and progress made regarding completion of individualized treatment plan objectives. Participants should be required to demonstrate mastery of the skills practiced in the group sessions. Participants may be terminated from group treatment for failure to comply with their treatment plan or group rules, including non-excused absenteeism.

Criteria for re-admitting Inmates to the group if they are terminated for breaking program rules is based upon: (1) Inmate must wait for at least thirty days before reapplying for re-admission; (2) Inmate must be recommended for re-admission by Department staff; and (3) re-application must be accepted by PROVIDER's counselors and participants of the group.

Treatment sessions shall provide offenders with these four Journals of the RDAP curriculum:

- Journal 1 -Orientation
- Journal 2 - Rational Thinking
- Journal 4 - Living with Others
- Journal 7 - Transition

In the process of presenting material in these content areas, counselors are expected to use lecture, group activities, open discussion, role modeling by staff, role-play by staff and inmates, inmate skill practice activities, and written assignments. Outpatient groups will be structured to ensure that the materials are adequately covered, reviewed, and the participant has sufficient opportunity to practice effective behaviors that target the top three criminogenic areas and receive feedback.

The structured group treatment program shall provide weekly group counseling sessions that will emphasize inmates' personal recovery, responsibility and awareness. Group sessions are intended to help inmates internalize and apply lessons from the skill-building groups. Group counseling sessions use the interaction of group participants in order to affect the desired changes necessary to achieve individual treatment plan objectives. Through participation in treatment groups, inmates learn from each other and receive the strength of group support. Through the process of giving and receiving feedback in-group sessions, inmates become more aware of the skills they need to develop to prevent future criminal activity and begin to accept ownership and responsibility for the consequences of their behaviors and lives in general. (Approximately 80 hours)

Although the program consists mostly of structured group sessions, PROVIDER's counselors shall also be available to provide individual sessions as needed for the purpose of evaluation/treatment planning, individual counseling, case management or individual consultation. (Approximately 16 hours)

### C. Individual Counseling

Individual counseling shall be provided according to individual inmate need as indicated in the inmate's treatment plan. While most inmates will require only a minimal amount of individual counseling, other inmates may need more extensive amounts of one-on-one counseling. Individual sessions shall focus on the top three criminogenic areas identified in the offender's treatment plan, and what the inmate needs to do to successfully change their behaviors, to better assist the inmate with the reintegration process necessary for successful transition to community living.

**Appendix C**  
**State of Hawaii's Residential Substance Abuse Therapeutic Community**  
**(Formerly Level III)**

The PROVIDER shall, in a satisfactory and proper manner as determined by the Department, provide and perform the following services:

1. Provide a program plan for the various types of treatment services that will be gender-responsive in a safe, humane and healing environment.
2. Provide assessments using tools such as the ASI, ASUS, and bio-psycho-social summary that identifies diagnoses, recommendations and master problem lists.
3. Provide treatment planning that is individually based, specific to defined needs and includes the inmates as well as other relevant parties. Set goals, define timeliness and action items, and review charted outcomes.
4. Provide proper documentation management such as charting goals, assess the outcomes, and then based on the results, re-assess the goals and action items.
5. Provide case management to coordinate relevant services and communicate treatment focus when appropriate.
6. Provide individual counseling that is specific to the individual's defined needs.
7. Provide cognitive/behavioral treatment including role modeling, role-playing, and skills practice to provide the inmates with specific skills to further prevent criminal activity.
8. Teach and monitor senior clients in conducting addiction and skill building classes.

Service Activities shall consist of the following:

A. Screening

When possible, the PSD will complete screening for all substance-abusing inmates referred to the PROVIDER.

B. Assessments Services

A Substance Abuse Counselor shall conduct initial personal interviews with inmates who are referred for admission into the TC:

1. The Adult Substance Use Survey (ASUS) or similar instrument(s);
2. The Level of Service Inventory – Revised (LSI-R) provided by PSD;

3. A Bio-Psycho-Social assessment instrument;
4. Identification of lack of social/family support for clean living; and the presence of unsafe housing conditions;
5. Legal issues; and
6. Social and psychological functioning and the impairment of function to each factor.

Within the initial phase of treatment, a complete Bio-Psycho-Social assessment shall be conducted and an Interpretive Summary written. The Interpretive Summary shall contain at a minimum the initial diagnosis, recommendations for treatment, and a master problem list.

Once assessed, the inmate will have a program that is tailored to his needs. Of particular importance is matching the intensity of treatment to the offender's risk level (Risk Principal) target criminogenic needs such as antisocial attitudes (Need Principle) and use cognitive-behavioral approaches to facilitate offender change (Responsivity Principle.)

#### C. Treatment Planning

PROVIDER shall create a treatment plan with the Inmate and treatment team specific to his needs, based on the assessment focusing on specific problem definition, the top three criminogenic needs, interventions aimed at resolution of identified issues, and agreed upon long term and immediate goals. The treatment team will include the PROVIDER's clinical staff, the Inmate referral sources, and all other affiliated personnel. The treatment plan shall contain at a minimum:

1. Long term goal for treatment;
2. Short term goals to address each problem area;
3. Objectives for each problem area;
4. Specific strategies to be used to achieve the objectives;
5. Target dates for completion of each strategy and objectives;
6. Strengths possessed by the inmate to aid in completing the plan;
7. Weekly reviews of the plan; and
8. Monthly updates.

## D. Treatment

### 1. Counseling

#### a. Individual

Treatment staff shall provide individual counseling to Inmates as per the treatment plan regarding the Inmate's substance abuse, criminality, and other defined needs. Frequency of individual sessions will vary with the Inmate's need. At a minimum, the counselor will be responsible to meet with the Inmate weekly to review treatment plan progress and to assign homework for the next week.

#### b. Group

Cognitive/behavioral groups shall be provided daily for all Inmates. A minimum of two-hours each utilizing a cognitive behavioral curriculum such as the Residential Drug Abuse Program (RDAP). The group shall include role modeling of skills by staff, role-playing of skills by staff and Inmates, and skill practice by Inmates.

### 2. Education

The treatment counselors will train senior program participants to conduct addiction education classes that address basic issues related to addiction and recovery. In addition, senior participants will be taught to teach skill building classes that will improve the inmate's skills in relaxation techniques, stress management, communication, conflict resolution, decision making, parenting, etc. Treatment staff will oversee and assist as necessary all sessions to ensure the accuracy and effectiveness of peer educators.

### 3. Referral and Discharge Planning

The PROVIDER will coordinate the discharge planning, aftercare support, community sources of support, counseling resources for ongoing family and other therapy, and referrals as appropriate with PSD's Mainland Branch.

## E. Case Management

The PROVIDER shall provide case management services to include:

1. Participation of the Addiction Treatment Unit Supervisor in weekly meetings with the facility staff. Case managers and TC staff shall meet weekly to review all Inmates and their progress; and

2. Assistance in the collection of data and preparation of reports.

F. Documentation

PROVIDER's supervisors and senior staff shall ensure that clinical charts are kept in accordance with CARF and ADAD standards and that documentation is entered in a timely manner so as to reflect current information as to the Inmate's progress. Clinical charts will contain at a minimum the following:

1. Inmate's screening documents;
2. Intake documents including signed Consents to Treatment, Contracts for Behavior, and appropriate Consents to Release Confidential Information;
3. Inmate's Assessment with Interpretive Summary;
4. Master Problem List;
5. Treatment Plan and all Treatment Plan Reviews;
6. Treatment plans will be reviewed weekly with inmate and updated to reflect current assignments and progress towards completion of past assignments. Every month, a formal treatment plan review will be completed and documented on the treatment plan review form;
7. Weekly Progress Notes, referencing treatment plan Goals;
8. Treatment Activities Log;
9. Discharge summaries including prognosis and recommendations; and
10. Any other required documentation as determined by facility staff and PROVIDER's staff.

|   |  |  |                                 |
|---|--|--|---------------------------------|
|  | <b>DEPARTMENT OF PUBLIC SAFETY</b>                                   | <b>EFFECTIVE DATE:</b><br>January 15, 2016                         | <b>POLICY NO.:</b><br>COR.14.26 |
|   | <b>CORRECTIONS ADMINISTRATION<br/>         POLICY AND PROCEDURES</b> | <b>SUPERSEDES (Policy No. &amp; Date):</b><br>COR.14.26 (11/30/11) |                                 |
|   | <b>SUBJECT:</b><br><b>OFFENDER ASSESSMENT PROTOCOLS</b>              | Page 1 of 5  |                                 |

**1.0 PURPOSE**

To implement the use of department-wide standardized protocols for adult sentenced offender assessment instruments.

**2.0 REFERENCES AND FORMS**

.1 References:

- a. Department of Public Safety (PSD), Policy & Procedure (P & P), COR.18.07, Exception Case.
- b. Hawaii Revised Statutes (HRS) § 353-6, HRS, Establishment of Community Correctional Centers.
- c. HRS § 353-62, Hawaii Paroling Authority (HPA); Responsibilities and Duties; Operations; Records, Reports, Staff
- d. Memorandum of Agreement (MOA) between the Department of the Attorney General (AG), Department of Public Safety (PSD), Department of Health (DOH), and the Judiciary, State of Hawaii, effective April 17, 2002.

.2 Forms:

- a. PSD 8202 – Exception Case form (attached).

**3.0 DEFINITIONS**

- .1 Certification: Passing scores of 3 or less scoring errors on the LSI and a .36 entry-level MI score.
- .2 Criminal Justice Agencies: The Probation Divisions, the PSD, and the Hawaii Paroling Authority (HPA).
- .3 Criminogenic Needs: Attributes that are directly linked to criminal behavior.
- .4 Cyzap: Internet database used by all Criminal Justice agencies to store the offender's scores.

**NOT CONFIDENTIAL**

|                                     |                                      |   |
|-------------------------------------|--------------------------------------|---|
| <b>COR</b><br><br><b>P &amp; PM</b> | <b>SUBJECT:</b>                      | <b>POLICY NO.:</b><br><b>COR.14.26</b>            |
|                                     | <b>OFFENDER ASSESSMENT PROTOCOLS</b> | <b>EFFECTIVE DATE:</b><br><b>January 15, 2016</b> |
|                                     |                                      | <b>Page 2 of 5</b>                                |

- .5 Face to Face Contact: An interview by the assigned officer with the offender at the office, work place, home or other appropriate sites to provide counseling, acquire information, and provide information as part of his/her supervision.
- .6 Interagency Council on Intermediate Sanctions Policy Group: A group established by Order of Appointment, issued by Chief Justice Ronald Moon, January 11, 2002.
- .7 Level of Service Inventory-Revised (LSI-R): A predictive risk and needs scale that assesses an offender's propensity for further unlawful and rule-violating behavior based upon criminal history and dynamic risk factors.
- .8 Offender: Any person incarcerated or detained in a prison, or jail, community correctional center.
- .9 RAD: Reception, Assessment, Diagnostic Unit that conducts an Initial Classification, Level of Service Inventory-Revised (LSI-R), Adult Substance Use Survey (ASUS), and a prescriptive plan for services based on information from the LSI-R and ASUS on all newly sentenced inmates in the Hawaii correctional system
- .10 Reassessment: A file and/or face-to-face interview to review an offender's risk/needs after the initial LSI and ASUS.
- .11 Supervision Standards: Minimum required supervision tasks and activities determined by the offender's classification.
- .12 Supervisor(s): Corrections Supervisor(s)

**4.0 POLICY**

- .1 PSD shall ensure that all eligible offenders including those in contracted out-of-state facilities, are administered the LSI-R/ASUS by certified staff in a timely manner.
- .2 PSD shall be responsible for a common information system platform containing current offender-based information for interagency collaboration.
- .3 PSD shall be responsible for quality assurance in the application of the assessment instruments, and ensuring that any significant changes hereto shall conform to the goal of the Interagency Council on Intermediate Sanctions (ICIS).

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| <b>COR</b><br><br><b>P &amp; PM</b> | <b>SUBJECT:</b><br><br><b>OFFENDER ASSESSMENT PROTOCOLS</b> | <b>POLICY NO.:</b><br><b>COR.14.26</b>            |
|                                     |   | <b>EFFECTIVE DATE:</b><br><b>January 15, 2016</b> |
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**5.0 PROCEDURES**

**.1 Correctional Facilities (In State)**

- a. All newly sentenced felons entering the RAD Unit shall have a LSI-R and ASUS completed by trained and certified staff within 60 days of admission. Only the initial LSI-R/ASUS, Summary Scores, Recommended Treatment Level shall be used to assign inmates to the appropriate level of substance abuse treatment. Overrides shall only be made by the Substance Abuse Programs Manager or designee.
- b. RAD staff shall use the results of the LSI-R and ASUS to identify appropriate program and treatment level when completing the Initial Prescriptive Plan.
- c. Inmates, who may be eligible for parole, transfer to a minimum or community based facility, or have been transferred to a minimum or community facility, shall be assessed as follows:
  - 1) LSI-R and ASUS reassessments shall be completed on all inmates within 24 months prior to their parole eligibility date.
  - 2) LSI-R and ASUS reassessments shall be completed as part of the inmate transfer request packet submitted to the Inmate Classification Office for transfer to a minimum or community based facility. The reassessments shall be done within one (1) year prior to transfer to the minimum or community based facility.
  - 3) Staff shall reassess LSI-R and ASUS scores every 6 months upon admittance into a minimum or community-based facility or when any significant event affects the six criminogenic factors identified in the LSI-R.
  - 4) LSI-R and ASUS Instruments shall be completed within 30 days of placing an inmate on furlough and within 60 days upon placing an inmate on extended furlough.
- d. Staff may request a custody override to a program and/or an identified level of treatment when an inmate has demonstrated exemplary institutional behavior over a substantial period of time. This information shall accompany a request for such an exception through PSD 8202.

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e. Staff shall enter the completed LSI-R and ASUS information into the Cyzap Internet database.

**.2 Correctional Facilities (Out-of-State)**

a. All inmates transferred out-of-state shall have a current LSI-R and ASUS completed by the sending facility.

b. LSI-R and ASUS reassessments shall be completed by the Mainland Branch staff on all inmates returning to In-State Correctional Facilities for furlough, sex offender treatment programs, and parole, prior to their return to the State.

c. Mainland Branch staff shall enter the completed LSI-R and ASUS information into the Cyzap Internet Database.

**6.0 RESPONSIBILITY**

.1 Wardens or their designees shall ensure that all staff are properly trained and certified in the use of the LSI-R and ASUS.

.2 Supervisors shall ensure that staff is appropriately trained to complete the LSI-R and ASUS instruments.

.3 Supervisors shall ensure that staff is properly trained to enter and retrieve LSI-R and ASUS data from the Cyzap Internet database.

.4 Supervisors shall ensure that the LSI-R and ASUS initial and reassessment instruments are completed on all offenders meeting the criteria in a timely manner, as outlined in section 5.1.c.

.5 Supervisors shall be responsible for conducting random reviews of staff interviews and scoring of the LSI-R and ASUS instruments to maintain consistency in scoring and to identify any (gross) scoring errors.

.6 Supervisors shall be responsible for identifying staff in need of retraining and developing an action plan. Such plan shall be submitted to the warden or designee for approval.

.7 Supervisors shall be responsible for conducting random case reviews to ensure the LSI-R and ASUS data are being used as part of the case planning process.

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.8 Supervisors shall be responsible for reviewing, and approving, or disapproving any request for score over-rides.

**7.0 SCOPE**

This policy applies to all Wardens or designees, corrections supervisors and staff assigned to assess and evaluate offenders.

APPROVAL RECOMMENDED:

 January 15, 2016  
Deputy Director for Corrections Date

APPROVED:

 January 15, 2016  
Director Date

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