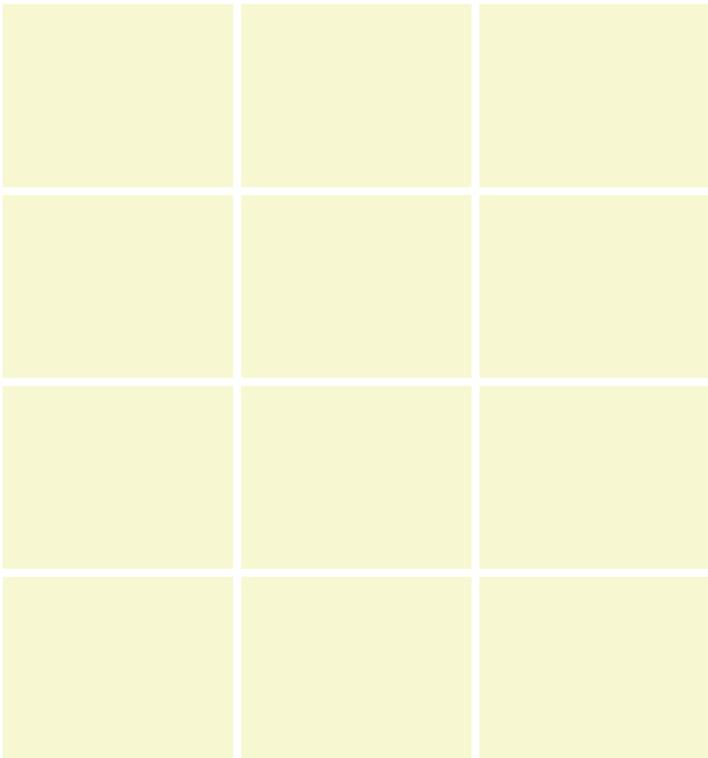
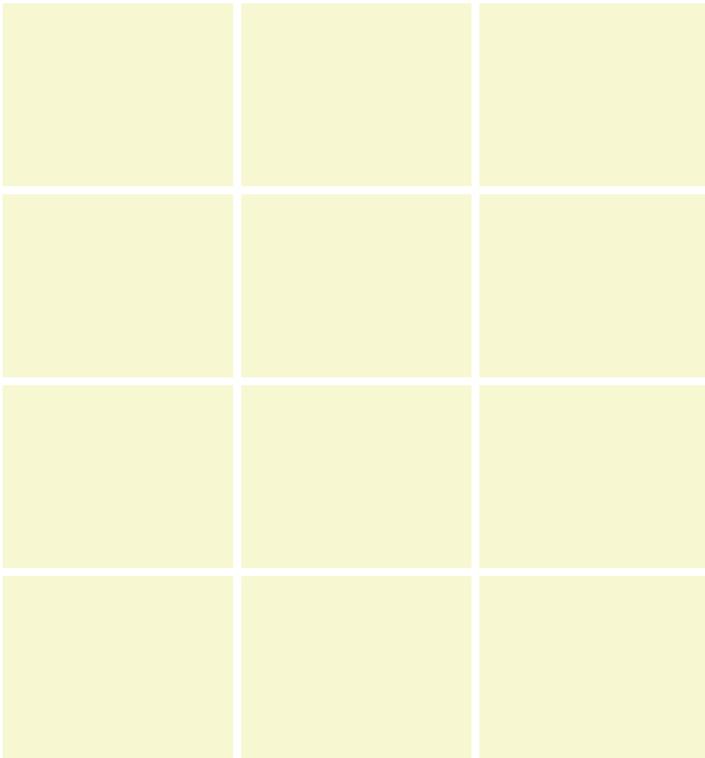


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**ACKNOWLEDGEMENT**

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			<b>1</b>	Introduction and Summary	
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## Chapter 1 INTRODUCTION AND SUMMARY

### SCOPE AND DIRECTION

This report is a 10-Year Corrections Master Plan update for the Hawaii Department of Public Safety (PSD) 10-Year Corrections Master Plan completed by Carter Goble Associates, Inc. in 1991. As such this update provides an assessment of the status of findings and recommendations that were made in 1991 for each existing correctional facility (CF) and each county-based community correctional center (CCC) compared to what was found in making an inspection the same facilities in October 2003. It also provides a recommended plan for meeting the projected jail and prison capacity needs for the next 10 years. Unlike the 1991 master plan this update is intentionally more limited in focus to the correctional facility needs of the State and does not focus on the management and operational conditions and needs of the system. This effort had its genesis in a legislative proposal that suggested that a "secure correctional treatment facility" be located on the Island of Hawaii. This update examines the total correctional facility needs of the Hawaii system to determine what facility improvements, expansions and/or new facilities are needed and whether or not such a facility would help meet those needs and what its role and mission would be.

In the Hawaii system the CFs are the prisons, which are dedicated to confining adjudicated criminal offenders whose length of sentence is longer than one year and have usually committed a felony crime. The CCCs are the county jails located on each of the four major islands where adult pre-trial detainees are confined pending adjudication and where prison inmates are returned for a minimum or community custody assignment near the end of their prison sentence to begin a transition back to their home county where they will be released. The CCCs also hold misdemeanor criminal offenders who are sentenced to less than one year of incarceration and are likely to complete their entire period of confinement in that facility.

### PROJECTED NEEDS

A new 10-year correctional population projection analysis has also been completed and is contained in Chapter 2 of this report in the same general sequence of analysis as found in the 1991 plan. A major difference in this update, however, is that by agreement with the PSD the consultant completed an independent projection analysis this time, whereas the 1991 plan utilized the projection done for the PSD by another independent consultant. Also, this time there are two separate projections, one for CFs and one for CCCs that have been prepared by the PSD staff. The comparative results of these projections are summarized near the end of Chapter 2. The Department's projection for the CCCs is done annually by staff, whereas a separate "Sentencing Simulation Model" (SSMP) was developed for projecting CF populations by staff working under a term-limited federal grant.

For the most part the consultant's projected average daily population (ADP) outcomes were slightly lower than the internal projections done by the PSD. In summary the 2003 current situation and the resulting projected needs for the coming 10-Year term are:

- 2003 annual average of 5,657 Hawaii prisoners in Hawaii and mainland prisons with a Hawaii system rated capacity of 3,369 operational beds (1,760 CFs and 1,609 CCCs)
- 2008 projected annual average of 7,083 Hawaii prisoners with a projected system capacity need of 7,625 operational beds (4,059 CFs and 3,566 CCCs)



## Chapter 1 INTRODUCTION AND SUMMARY

- 2013 projected annual average of 8,320 Hawaii prisoners with a projected system capacity need of 8,950 operational beds (4,863 CFs and 4,087 CCCs)

While these projection results may seem high to some it is important to remember that over the decade of the 1990s the Hawaii correctional population grew by 95%. Both the consultant's projections and the PSD staff's independent projections for 2010 show a very close substantial reduction in the growth rate for the 10-year period to between 47% and 49% respectively, almost half of the rate for the last decade. Certainly any number of major changes in public safety policy, law enforcement, sentencing laws or practices, or the economy could cause an increase in the rate of growth.

As is obvious the Hawaii correctional system has a substantial and immediate need to increase its operating capacity, especially if the approximate 1,400 Hawaii prisoners currently housed in mainland prisons due to lack of suitable secure space in Hawaii are to be returned. If those 1,400 inmates were returned to Hawaii today without the addition of any new facilities or facility expansions, Hawaii would have one of the most overcrowded correctional systems known anywhere at 168% of operating capacity.

Even without the mainland prisoners, however the Hawaii system is still overcrowded today to levels that create very tenuous conditions and security concerns in certain facilities as found during the facility inspections. System-wide the number of inmates confined in Hawaii facilities constantly exceeds the rated capacity with an average inmate count in 2003 of 111% of the rated bed count. Throughout the nation most states and local jails try to follow a professional practice guideline to maintain population at no more than 95% of rated bed capacity, which is obviously an impossible goal when the right kind and number of beds are just not available.

### **IMPROVE FACILITY MAINTENANCE FUNDING**

One of the key findings from the facility inspections is the degree of maintenance and repair needs that seem to be a chronic condition throughout the system. From accounts by Wardens and staff it appears that while maintenance, repair and replacement needs are proposed and budgeted annually, many of those needs go unfunded repeatedly. In addition to the added impacts of overcrowding most of the facilities exhibit conditions needing repair or improvement, which through deferral and neglect and less than adequate annual maintenance funding only shorten the useful life of the buildings and building systems.

### **EXPAND EXISTING SUPPORT SPACES**

Additionally, besides obsolescent spaces found in some of the older facilities (Halawa SNCF, Kulani CF, Waiawa CF, WCCC, and all four CCCs original housing units and support spaces) there is a lack of adequate space to support efficient and effective operations and inmate supervision. Much of the additional space that was recommended as being needed in the 1991 Master Plan is still needed and only more so today. Specific estimates of support spaces needed in each existing



**Chapter 1**  
**INTRODUCTION AND SUMMARY**

facility and the approximate present value 2003 cost to construct them are included in this improvement plan with details in Appendix A.

## **EXISTING FACILITY IMPROVEMENT PLANS**

Chapter 3 contains the facility evaluations and the recommended 10-Year Master Plan with specific expansion and new facility proposals, estimated present value construction costs, a proposed 2-Phase implementation schedule, and annual operating cost estimates. At the beginning of this project the consultant visited all nine of the State's CFs and CCCs to be able to compare the status and conditions of each in relation to the findings and recommendations developed in the 1991 Master Plan. In doing so the functional, operational and capacity conditions of each facility were examined by the consultant team and are summarized at the beginning of Chapter 3. Following that section the bulk of the Chapter provides a facility-by-facility assessment with planning recommendations that include:

1. Recommended Role and Mission
2. Recommended Capacity by Custody Levels
3. Changes and Improvements Needed (since 1991 and as of 2003)
4. Expansion Potential and Continued Use
5. Updated Site Plan and Space Needs

## **10-YEAR DEVELOPMENT PLAN SUMMARY**

Following the "Existing Facilities Capacities and Improvement Recommendations" a section entitled "Recommended Capacity Planning Guidelines" begins with the computation of the number of beds needed to accommodate the 10-year population projection results from Chapter 2. Separate security level cohorts are recommended for allocating the projected number of beds needed for the CFs and the CCCs based on historic data analysis, comparative guidelines from other systems, ACA guidelines and the consultant's experience elsewhere. In deriving the recommended number of beds needed by security level by facility three important planning factors are included: (1) population fluctuations and peaking in the CCCs; (2) regular classification separation needs in all facilities; and (3) temporary special management beds needed beyond the operational capacity beds in all facilities. These computations are explained and used to generate the projected total beds needed.

The recommended 10-year plan is divided into two 5-year planning, design and construction phases (2004 to 2008 and 2009 to 2013) both as a cost management strategy for the capital improvements program and as a means to more closely match the timing of activating new capacity with projected growth. This could help avoid paying for and bringing excessive capacity on-line too soon compared to when it is needed. The 10-Year program includes recommendations to:

1. Expand Existing Facilities in Phase 1 2004-2008 for Long-range Use
  - Halawa Medium Security CF
  - Kulani CF



**Chapter 1  
INTRODUCTION AND SUMMARY**

2. Expand Existing Facilities in Phase 1 2004-2008 for Short-term or Temporary Use (unless recommended total replacements can be made before the end of Phase 2)
  - Waiawa CF
  - Women's CCC
  
3. Build New Facilities in Phases 1 and 2 Over 10 years – 2004-2013
  - Build a new Secure Special Needs Treatment CF – Phase 1
  - Demolish Halawa Special Needs CF – Phase 1
  - Replace Kauai, Maui and Oahu CCCs – Phase 1
  - Build new West Hawaii CC in Kona – Phase 1
  - Replace Hawaii CCC (except Hale Nani WFC) – Phase 2
  - Replace Waiawa CF – Phase 2
  - Replace Women's CCC – Phase 2
  - Build a new medium security CF – Phase 2
  - Build two new minimum security CFs – Phase 2
  
4. Development Option of CF Correctional Complex on One Site on Oahu (instead of six sites)
  - To contain: New Special Needs Treatment CF; WCF replacement; WCCC replacement; new medium security CF; 2 new minimum security CFs; central production kitchen, RAD/Intake unit, medical clinic and warehousing.

Master planning concept guidelines and new facility staffing guidelines used in developing the plan recommendations are specified in Chapter 3 and sizing and cost estimators used are detailed in Appendix A. Recommended bed allocations that are standards compliant are specified by security level for each existing facility in Table 3-5. Table 3-6 summarizes the recommended number of new beds by security level separately for CFs and CCCs organized by the two 5-year development phases. The total plan is described in narratives for each separate expansion project and each new facility. In summary the recommended 10-Year plan includes:

**Phase 1 – 2004 – 2008: builds 1,860 CF operational beds and 3,427 CCC operational beds resulting in a new system capacity of 7,129 operational beds as follows:**

- Retain 2003 existing 1,616 CF rated operational beds and 89 special management beds at: HMSCF; KCF; WCF; WCCC; and 226 CCC operational beds and 3 special management beds at HCCC.
- Add 1,860 CF operational beds and 106 special management beds at 2003 present value dollars of approximately \$179 million construction cost or \$239 million project cost, excluding financing and land acquisition costs for:
  - 1,362 operational bed expansions at HCF, WCF, WCCC, and KCF
  - 498 operational beds in a new Special Needs Secure Treatment CF either at Halawa or a new site on Oahu
  - Demolish existing Halawa SNCF to allow Halawa MSCF expansion



Chapter 1  
INTRODUCTION AND SUMMARY

- Replace Kauai, Maui and Oahu CCCs and build a West Hawaii CC at Kona for 3,427 operational beds and 176 special management beds at 2003 present value dollars of approximately \$238 million construction cost or \$321 million project cost excluding financing and land acquisition costs for:
  - KCCC 343 operational beds, 16 special management beds
  - MCCC 761 operational beds, 40 special management beds
  - OCCC 1,964 operational beds, 104 special management beds
  - WHCC 359 operational beds, 16 special management beds
- Construct additional Administration, Program Services, and Support & Operations spaces at four existing CFs and four existing CCCs to resolve *existing* space deficiencies for their 2003 rated bed capacities and compliance with minimum space standards.
  - 4 CFs: Approximately 87,900 square feet of space for approximately \$23 million construction cost or \$30 million project cost.
  - 4 CCCs: Approximately 82,400 square feet of space for approximately \$17 million construction cost or \$22 million project cost.
  - *Replacement of any of the existing facilities (as recommended) between 2004 and 2013 could avoid the need for these expenditures accordingly.*

**Phase 2 – 2009 – 2013: builds 2,506 CF operational beds and 612 CCC operational beds resulting in a new system capacity of 8,899 operational beds as follows:**

- Retain operational bed capacity from Phase 1 including: 2,254 CF beds at expanded HMSCF, KCF, and new Special Needs Treatment CF; and 3,527 CCC beds at new KCCC, MCCC, OCCC, WHCC and Hale Nani WFC.
- Add 2,206 CF operational beds plus 124 special management beds at 2003 present value dollars of approximately \$208 million construction cost or \$281 million project cost, excluding financing and land acquisition costs for:
  - 613 operational beds in a new medium security CF (288 medium, 325 minimum; could also replace KCF if expanded to add a 310-bed treatment unit)
  - 350 operational beds in a new minimum security CF
  - 512 operational beds in a new women's CF (replaces WCCC)
  - 756 operational beds (256 medium, 500 minimum) in a new medium security substance abuse treatment CF (replaces WCF)
  - 275 operational beds in a new minimum security CF
- Add 82 operational beds at the new MCCC and 196 operational beds at the new OCCC at 2003 present value dollars of approximately \$11 million construction or \$15 million project cost excluding financing and land acquisition costs.
- Replace Hawaii CCC with 334 operational beds and 16 special management beds at 2003 present value dollars of approximately \$23 million construction cost or \$31 million project cost excluding financing and land acquisition costs.



## Chapter 1 INTRODUCTION AND SUMMARY

A breakdown of the preliminary budget estimates for implementing the recommended 2-Phase 10-Year Capital Improvements Plan is included in Tables 3-9 and 3-10 at the end of Chapter 3. Also, preliminary estimates of the probable annual operating costs for each recommended expansion or new facility are provided in Table 3-11. Essentially they confirm that while the State will obviously have an overall increase in operating costs there are resulting cost savings likely due to the replacement of obsolete and operationally inefficient facilities with contemporary designs that yield much greater staffing pattern efficiencies in the housing units. Just for the recommended replacement of the three CCCs on Kauai, Maui and Oahu and addition of the West Hawaii CC in Kona the estimated operating cost savings for only the added bed capacity is approximately \$4.4 million annually in present value dollars compared to using existing operating conditions and costs.

### IN CONCLUSION

It is important to note that there are four facts that have a significant effect on the magnitude of the preliminary cost estimates for this 10-Year Master Plan as follows:

1. Since the consultant's completion of the 1991 master plan there has been a substantial degree of facility deterioration, apparent deferred maintenance, and delayed needed improvements coupled with overcrowding beyond the design capacities of all facilities in the system;
2. Many of the existing facilities have obsolete layouts and small housing unit sizes that result in higher numbers of housing staff and thus higher annual operating costs than would be the case with a contemporary design. Considering that over the first 20 to 30 years of a correctional facility's life span that its construction cost will equal approximately 10% of the total of all capital and operational expenditures for the 20- to 30-year term, whereas annual operating expenses will account for approximately 90% clearly suggests that replacing operationally inefficient facilities is a beneficial long-term economic choice.
3. Existing facilities, recommended expansions and new facilities constructed should comply with the current physical plant standards of the American Correctional Association applicable to Adult Correctional Facilities, Adult Local Detention Facilities and Adult Community Residential Services. While these are sound professional practice standards that have proven to be useful and defensible in litigation against many state and local corrections agencies, they should be viewed as minimum standards to be complied with that do not result in excessive space or space conditions; and
4. The approximate 1,400 Hawaii prisoners currently housed in mainland facilities are included in the projections and subsequent recommended plan for return to Hawaii facilities within the 10-year plan as was agreed they should be with the PSD at the beginning of this study.

By its intended scope this study focuses on and recommends what should be done ideally to make Hawaii's correctional facility capacity meet existing and projected need without consideration for fiscal funding capacity, socio-political concerns or what could happen if current public safety policy, law enforcement and/or sentencing laws were changed substantially.



## Chapter 1 INTRODUCTION AND SUMMARY

It is important to know that statistical comparisons show that Hawaii is and has been exceeding the use of non-incarceration and community-based alternatives and limiting the use of prison and jail to a much greater degree than on average for all 50 states as well as for those 11 other states with populations under 2 million. For example, In 1995 Hawaii's per capita incarceration rate for prison inmates per 100,000 population was 151 compared to the average of 245 for the 11 other states and 311 for all 50 states.<sup>1</sup> For 2001 Hawaii's incarceration rate grew to 269, but is still low compared to 291 for the 11 other states and 373 for all 50 states.

Although it may not be feasible to make continued substantial gains in the use of diversion to community-based supervision and alternative sanctions in light of Hawaii's unusually low incarceration rate it is clear that the policies and practices that have resulted in this performance should not be relaxed or reversed. Otherwise the projected need for jail and prison beds both in this study and by the PSD staff would only increase.

If full funding of the recommended plan is not approved then very careful consideration should be given to the setting of priorities for which expansions and which new facilities should be funded and by when. Without substantial improvement and capacity expansion of the correctional system it is possible that Federal Court intervention could occur again in Hawaii as it did in 1984, which required a decade of work to satisfy the Court as it has in five other states.<sup>2</sup>

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<sup>1</sup> 2001 Corrections Yearbook, Criminal Justice Institute, Inc., and PSD data.

<sup>2</sup> From 1976 through 2002 at various times Alabama, Arizona, Louisiana, Tennessee, and Texas have had their correctional systems temporarily controlled by the Federal Court resulting in major multi-year expenditures for constructing many new prisons and required increases in staffing, medical and food services, and inmate treatment programs.


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# 2

## 10-Year Capacity Needs Projections




**Chapter 2  
10-YEAR CAPACITY NEEDS PROJECTIONS**

**INTRODUCTION**

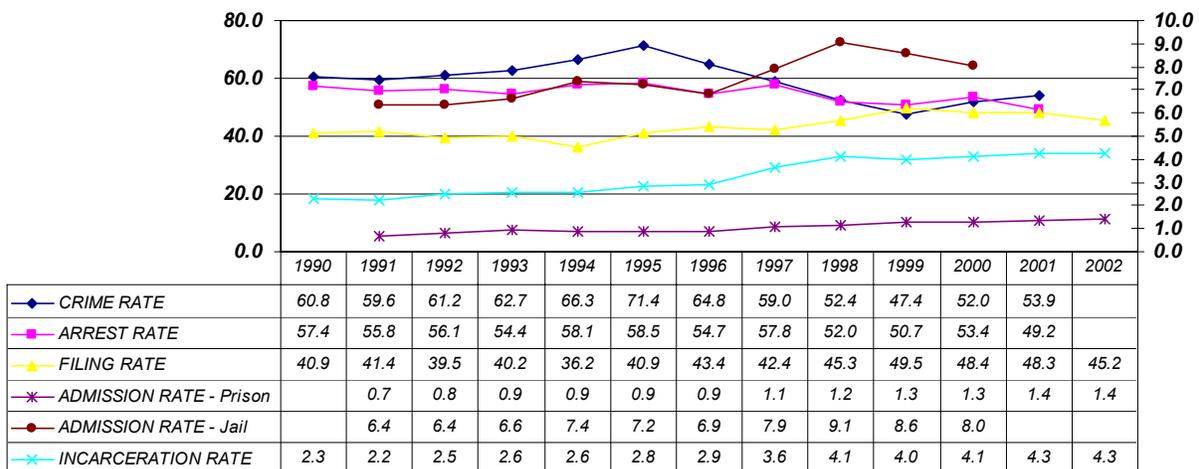
This Chapter addresses the capacity needs projections for the PSD system of correctional facilities and the four county-based community corrections centers. It is intended as an update of the same type of projections that were included in the 1991 Master Plan. This Chapter follows the same outline as the 1991 analysis with a review of the criminal justice trends in the State; general population growth over the past decade and projected for the next decade; a profile of the correctional population and its trends since the last Master Plan; and future projections for the inmate population and bed space requirements. This Chapter is followed by the Capital Improvement Plan, which is based on the resulting bedspace projections and growth accommodation recommendations.

**CRIMINAL JUSTICE TRENDS**

The criminal justice system is an integrated and interrelated system of events. It is important to assess the relationship between the different variables that make up the justice system. It begins with crime trends which lead to arrests by law enforcement agencies, which follow into filings in the court, admissions into a correctional facility, and eventually incarceration. The “crime funnel” is an analytical tool that takes the pool of potential prison inmates and narrows it from all arrestees to just those actually incarcerated, examining each step along the way for changes in the system. Changes in crime rates could increase the pool of potential arrestees, or increased law enforcement activity could lead to increased arrests.

The Hawaii Public Safety Department (PSD) collected historical information on crime, arrest, filings, and inmate population counts. Figure 2-1 presents the trends for the five key characteristics of the State’s criminal justice system.

**Figure 2-1  
Criminal Justice System Trends, State of Hawaii**





**Chapter 2**  
**10-YEAR CAPACITY NEEDS PROJECTIONS**

The definitions for these variables are as follows:

- Crime Rate: The number of reported Part I (or Index) Crimes per 1,000 residents in Hawaii. Part I Crimes include the eight major crimes reported under the FBI's Uniform Crime Reporting system.
- Arrest Rate: The index measures the total number of all arrests made in Hawaii per 1,000 State population.
- Filings Rate: The total number of criminal case filings in all Circuit and District Courts in the State of Hawaii measured as a rate per 1,000 State population.
- Admission Rate: The total number of admissions (in prison/correctional facilities or jail/community correctional centers) measured as a rate per 1,000 State population.
- Incarceration Rate: This rate measures the total number of prison and jail (CF and CCC) inmates incarcerated in Hawaii per 1,000 State population.

Crime, arrest, and filings rates are plotted on the left hand axis. Admission and incarceration rates are plotted on the right hand axis. Crime rates in the State have remained fairly constant even declining between 1995 and 1999. The crime rate decreased from 61.7 at the end of the last study in 1989 to 53.9 in 2001. Arrest rates have also followed a declining trend over the past decade. The 1990 rate of 57.4 arrests per 1,000 population declined to a reported 49.2 arrests per 1,000 population in 2001. The rate of filings in the criminal court has shown little growth, from 40.9 in 1990 to 45.2 filings per 1,000 in 2002.

Overall admissions rates have shown some growth over the past decade. Prison admissions rate has doubled between 1991 and 2002 from 0.7 to 1.4 per 1,000 population. This trend has probably had a significant impact on the need for prison beds. As will be shown later in this chapter, the admissions of parole/probation violators has been the segment of the prison population with the largest growth. The jail admissions have also shown an increasing growth trend. The rate peaked in 1999, at the same time as the rate of criminal filings, with 9.1 admissions per 1,000 population and has since decreased to 8.0 jail admissions per 1,000 population. However, the incarceration rate for the combined prison and jail population has also almost doubled. The reported incarceration rate of 2.3 per 1,000 population in 1990 has grown to 4.3 per 1,000 population in 2002.

In 1989 near the time when the last Master Plan was completed, of the 61.7 per 1,000 population Part 1 crimes reported in the State only 2 persons per 1,000 were actually incarcerated. As seen from Figure 2-1 this number has doubled and just last year a with only 53.9 Part 1 Crimes per 1,000 population being reported but over 4 persons per 1,000 ended up incarcerated either in prison or jail. This change in incarceration policies clearly occurred with the State's prisons and jail growth of inmate numbers reflecting that policy change.

In terms of demographics, the population in Hawaii has grown at the average of 1% per year over the past twelve years. In the individual counties of Hawaii, Kauai, Maui, and Oahu the historical rate of growth has been similar to that of the overall State with growth rates of 0.6% in the largest county of Oahu, 2.3% in the second largest county of Hawaii, and 1.3% and 2.7% for the counties of Kauai and Maui respectively. Table 2-1 provides historical population for the State.



**Chapter 2**  
**10-YEAR CAPACITY NEEDS PROJECTIONS**

**Table 2-1**  
**State of Hawaii Historical Population**

<b>General Population</b>	<b>State Total<sup>1</sup></b>	<b>Oahu County</b>	<b>Hawaii County</b>	<b>Kauai County</b>	<b>Maui County<sup>2</sup></b>
1990: July 1	1,113,491	838,534	121,572	51,676	101,709
1991: July 1	1,136,754	850,510	127,266	53,379	105,599
1992: July 1	1,158,613	863,959	131,630	54,439	108,585
1993: July 1	1,172,838	870,348	135,085	55,461	111,944
1994: July 1	1,187,536	878,591	137,713	56,478	114,754
1995: July 1	1,196,854	881,399	140,492	57,068	117,895
1996: July 1	1,203,755	883,443	141,935	57,688	120,689
1997: July 1	1,211,640	886,711	144,445	57,712	122,772
1998: July 1	1,215,233	886,909	145,833	57,843	124,648
1999: July 1	1,210,300	878,906	146,970	58,264	126,160
2000: July 1	1,212,670	875,881	149,261	58,560	128,968
2001: July 1	1,227,024	884,176	151,709	59,105	132,034
2002: July 1	1,244,898	896,019	154,794	59,946	134,139
<b>1990-2002</b>					
Total Growth	12%	7%	27%	16%	32%
Annual Growth	1.0%	0.6%	2.3%	1.3%	2.7%

<sup>1</sup> Population estimates after April 1, 2000 are based on revisions released in April 2003 and may differ somewhat from earlier figures cited in other tables.

<sup>2</sup> Including Kalawao County (Kalaupapa Settlement). Kalawao had 130 in 1990, 147 in 2000, and 132 in 2002.

Source: U.S. Bureau of the Census; The State of Hawaii Data Book, 2002.

Calculations by Carter Goble Associates, October 2003.

Projected growth, according to the State's Department of Economic Development and Tourism, is slower than has been seen in the past. Between 2002 and 2015 the State is expected to grow at an average of 0.6% per year except in the County of Kauai where the population is expected to grow at the rate of 1.5% per year over the next 13 years. Table 2-2 presents the State projections. Note that these projections have not been updated since February 2000. Interestingly, some of the 2005 projections are lower than 2002 estimates.

**Table 2-2**  
**State of Hawaii Population Projections**

<b>General Population<sup>2</sup></b>	<b>State Total</b>	<b>Oahu County</b>	<b>Hawaii County</b>	<b>Kauai County</b>	<b>Maui County<sup>1</sup></b>
2005	1,236,100	895,600	151,400	60,500	128,600
2010	1,291,100	929,200	159,600	65,800	136,400
2015	1,349,100	964,800	168,300	72,000	144,000
<b>2002-2015</b>					
Total Growth	8%	8%	9%	20%	7%
Annual Growth	0.6%	0.6%	0.7%	1.5%	0.6%

<sup>1</sup> Includes Kalawao.

<sup>2</sup> The resident population is defined as the number of persons whose usual place of residence is in an area, regardless of physical location on the estimate or census date. It includes military personnel stationed or homeported in the area but excludes persons of local origin attending school or in military service outside the area.

Source: *Hawaii State Department of Business, Economic Development & Tourism, Population and Economic Projections for the State of Hawaii to 2025 (Series DBEDT 2025) (February 2000)*



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Next, a closer look at the historical incarceration trends of each of the following population subgroups is presented: prison and jail. The review is performed by gender for both prison and jail populations, and for the jail population it is also reviewed by jurisdiction. Following that review population projections are developed.

### INMATE TRENDS and BASELINE PROJECTIONS

When surveyed in September 2003, the Hawaii PSD had a total of 9 facilities. Table 2-3 organizes the facilities by the Department's general security designation (prison and jail) and shows their reported type of population, design and operating capacities, average daily population head counts as recorded on July 31, 2003, and the resulting operating rate.

Table 2-3  
**Hawaii Facilities Capacity versus Population Head Counts - 2003**

Facility	Inmate Population	Bed Capacity by PSD Ratings		Average Daily Population (Head Counts)			Operating Ratio
		Design	Operating	Total	Male	Female	
<b>Prisons</b>							
Halawa Correctional Facility	Male	496	992	1,237	1,237		125%
Halawa Correctional Facility – Special Needs	Male	90	132	139	139		105%
Kulani Correctional Facility	Male	160	160	175	175		109%
Waiawa Correctional Facility	Male	294	348	317	317		91%
Women's Community Correctional Center	Female	258	260	289		289	111%
<b>Subtotal Prisons</b>		<b>1,298</b>	<b>1,892</b>	<b>2,157</b>	<b>1,868</b>	<b>289</b>	<b>114%</b>
<b>Jails</b>							
Hawaii Community Correctional Center	Male/Female	206	226	279	249	30	123%
Kauai Community Correctional Center	Male/Female	110	128	155	130	25	121%
Maui Community Correctional Center	Male/Female	209	301	316	267	49	105%
Oahu Community Correctional Center	Male/Female	628	954	1,044	957	87	109%
<b>Subtotal Jails</b>		<b>1,153</b>	<b>1,609</b>	<b>1,794</b>	<b>1,603</b>	<b>191</b>	<b>111%</b>
<b>Contracted Beds</b>							
Mainland (OK, AZ, Federal Ctr)				1,349	1,282	67	
<b>TOTAL</b>		<b>2,451</b>	<b>3,501</b>	<b>5,300</b>	<b>4,753</b>	<b>547</b>	<b>151%</b>

Source: Public Safety Department, Hawaii. July 31, 2003. Compiled by Carter Goble Associates, October 2003.

**Overcrowding** - The Department operates a total of four males prisons (or Correctional Facilities – CF), one female prison (Women's Community Correctional Center – WCCC which also holds some female jail inmates), and four county jails (Community Correctional Centers – CCC), which hold both male and female populations. The prison system's design capacity as recorded by the PSD in



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July 2003 was 1,298. However, since 1991 the inmate population has grown well beyond the system’s capacity with no new facilities having been added. Consequently, both the CFs and CCCs have been forced to double-bunk cells, add beds to dorms without adding space, and convert spaces to other functions just to cope with increasing population. Accordingly, the current operating capacity for the prisons has been increased to 1,892. Even with this increase, the system remains overcrowded with an operating ratio of 114%. All prison facilities are operating over capacity except for the Waiawa Correctional Facility (operating at 91% of capacity). The total average daily population (ADP) for all prison inmates at the end of July 2003 was 2,157 with 1,868 males and 289 females.

The jail system’s design capacity as recorded by PSD in July 2003 was 1,153 beds. PSD’s official operating capacity is 1,609 but the system is over crowded with a recorded ADP at the end of July 2003 of 1,794 (1,603 males and 191 females). The average operating ratio for the jail system was 111%.

In addition to the correctional population in State facilities, Hawaii has been forced to contract out beds in the mainland for lack of suitable space in the islands. The process of contracting of beds in the mainland began in 1995 when transfers to Texas facilities were made for 300 male inmates. Transfers followed in 1997 with 236 male and 64 female inmates, and have continued to grow since then. As of the end of July 2003, PSD had 1,349 inmates (1,282 males and 67 females) on the mainland.

Under the design capacities shown in Table 2-3, the system would clearly hold substantially less inmates than the number of offenders confined today. As shown in Table 2-3, the total existing facilities ADP reached 3,951 (2,157+1,794) inmates in July 2003, which excludes State-sentenced inmates being held in the mainland. If the mainland inmates were to be housed back in the State the demand for beds would increase to 5,300 (not including other in-State out-counts).

Table 2-4 presents the historical ADP assigned counts for the correctional facilities and community correctional centers.

**Table 2-4  
Historical Population Assigned Counts**

Inmate Population	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
<b>Prison - CF</b>	<b>1,396</b>	<b>1,491</b>	<b>1,700</b>	<b>1,764</b>	<b>1,785</b>	<b>1,867</b>	<b>2,032</b>	<b>2,522</b>	<b>2,935</b>	<b>3,077</b>	<b>3,144</b>	<b>3,347</b>	<b>3,469</b>	<b>3,532</b>
SNF	123	86	171	168	154	180	103	195	184	183	163	155	166	146
HMSF	896	985	1,057	1,077	1,086	1,104	1,349	1,631	1,991	2,202	2,095	2,288	2,347	2,482
KCF	115	159	181	189	207	210	219	203	215	169	187	167	217	171
WCCC	128	118	142	161	167	200	186	249	329	258	367	406	410	402
WCF	134	143	149	169	171	173	175	244	216	265	332	331	329	331
<b>Jail - CCC</b>	<b>1,229</b>	<b>1,182</b>	<b>1,299</b>	<b>1,369</b>	<b>1,461</b>	<b>1,716</b>	<b>1,661</b>	<b>2,082</b>	<b>2,281</b>	<b>1,966</b>	<b>1,983</b>	<b>2,065</b>	<b>2,100</b>	<b>2,125</b>
HCCC	106	131	128	158	198	235	264	298	369	318	334	358	412	430
KCCC	82	76	88	66	105	135	146	128	134	168	157	140	172	151
MCCC	144	138	145	221	240	302	290	374	449	379	377	361	405	374
OCCC	897	837	938	924	918	1,044	961	1,282	1,329	1,101	1,115	1,206	1,111	1,170
<b>Grand Total</b>	<b>2,625</b>	<b>2,673</b>	<b>2,999</b>	<b>3,133</b>	<b>3,246</b>	<b>3,583</b>	<b>3,693</b>	<b>4,604</b>	<b>5,216</b>	<b>5,043</b>	<b>5,127</b>	<b>5,412</b>	<b>5,569</b>	<b>5,657</b>

Source: Public Safety Department. Data compiled by Carter Goble Associates. December 2003.



## Projections

Projecting future bedspace requirements is a two-stage process. The first stage consists of developing a mathematical forecast of inmates based on historical data. The second stage of the process is the determination of the number of beds necessary to meet projected demands. Historical end of fiscal year reports were obtained from PSD and assigned (head counts plus out-counts) ADP counts were tabulated by facility.

Next, a multiple model, historically based forecasting approach was used to develop projections based on different incarceration levels. The resulting projections are based on the assumption that there are no adjustments to current sentencing or detention policies. It must be noted that the historical ADP information used in the forecasts that follow represents Assigned Counts or total jurisdictional inmate population for the PSD. These counts include the head counts plus the inmates housed in the mainland and the out-counts (people temporarily out of the facility attending hearings, receiving medical treatment, etc.)

ADP is the result of two contributing factors—the number of individuals admitted to the facility (Admissions or ADM) and the length of time they remain in the facility (Average Length of Stay or ALOS). If more individuals are admitted and ALOS remains the same, the ADP will increase. Likewise, if the same number of individuals are admitted but the ALOS increases, the ADP will increase. These factors can compound one another if both increase at the same time, or they can compensate for each other, with one increasing and the other decreasing to leave ADP the same as before. As such, the projections presented for each subgroup focus on historical trends of the ADP, ADM and ALOS as primary variables and include the following assumptions:

1. ADP Males – include male sentenced (felons, probation felons, and misdemeanors), pretrial (felons and misdemeanors), other jurisdiction inmates, and probation/parole violators;
2. ADP Females – include female sentenced (felons, probation felons, and misdemeanors), pretrial (felons and misdemeanors), other jurisdiction inmates, and probation/parole violators;
3. Prison Admissions (ADM) – include either male or female new admissions and status changes admissions for sentenced felons and parole violators;
4. Jail ADM – include all male or female admissions;
5. Average Length of Stay (ALOS) – calculated as average daily population assigned counts annualized and divided by the number of total number of annual admissions ( $[ADP \times 365] \div ADM$ );
6. Population projections have been interpolated for individual years between 2002 and 2010 and between 2010 and 2015;



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7. To define the basis for future ADP assigned counts, historical detention information and projected increases in the State and Counties population were used. Admissions and length of stay are also important variables which have been considered for the following ADP Projections Models:
- a. Model 1 – Historical Percent Change: This model identifies the historical percent growth in ADP and applies that rate to future years.
  - b. Model 2 – ADP Linear Regression: Performs linear regression analysis by using the "least squares" method to fit a line through the data points. R-square values which return the square of the Pearson product moment correlation coefficient through the data points were calculated. This statistic can be interpreted as how well the model fits the historical data and is better the closer it is to the value of 1.
  - c. Model 3 – Projected Incarceration Rate: This model projects the incarcerated population based on the growth of the general population. The IR was projected using a straight line linear regression method. The resulting rates for each of the projecting years were applied to future State (or County) population to estimate the ADP.
  - d. Model 4 – Rate to Projected Admissions with Constant 2002 ALOS: Projected admissions are used in conjunction with a constant ALOS (2002 for prison and 2000 for jails) to project ADP.
  - e. Model 5 – Rate to Projected Admissions with Constant 5-year Average ALOS: Similar to Model 4 projected ADM are used along with a constant ALOS calculated as the average for the most recent five years to estimate future ADP.

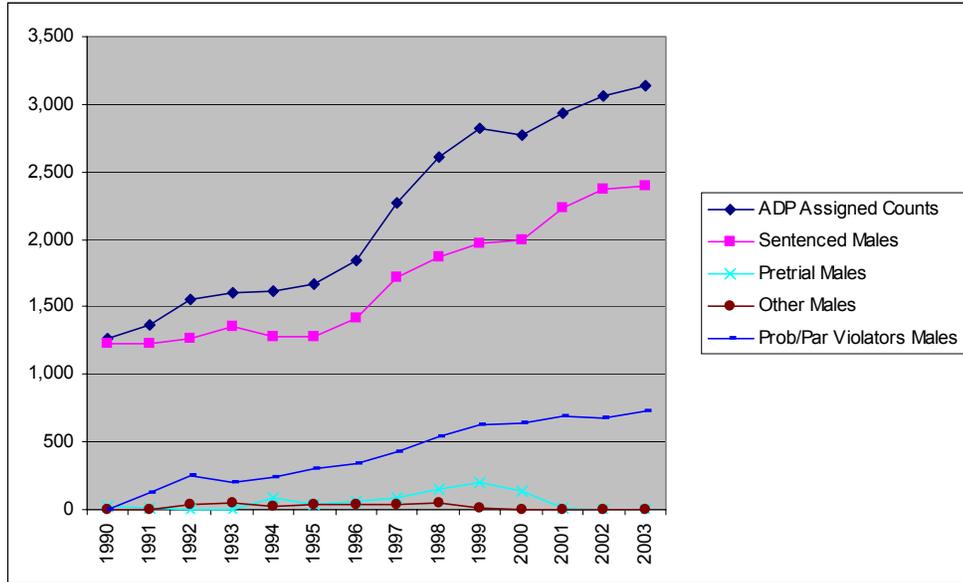
### **Prison / Correctional Facilities – Male**

The prison–male subgroup includes the male inmates assigned to the four male correctional facilities as listed in Table 2-3. Figure 2-2 provides a graphic illustration of the historical trend followed by the inmates included in this subgroup of inmates. Tables 2-5 below presents the historical data for the entire male population.



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**Figure 2-2**  
**Prison-Male Historical ADP**



**Table 2-5**  
**Prison-Male Historical Trends**

Prison-Males	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
State Population	1,113,491	1,136,754	1,158,613	1,172,838	1,187,536	1,196,854	1,203,755	1,211,640	1,215,233	1,210,300	1,212,670	1,227,024	1,244,898	
ADP Assigned Counts	1,268	1,373	1,558	1,603	1,618	1,667	1,846	2,273	2,606	2,819	2,777	2,941	3,059	3,130
Males	1,268	1,373	1,558	1,603	1,618	1,667	1,846	2,273	2,606	2,819	2,777	2,941	3,059	3,130
ADM	na	693	846	995	965	992	934	1,160	1,260	1,320	1,314	1,390	1,498	na
Males	na	693	846	995	965	992	934	1,160	1,260	1,320	1,314	1,390	1,498	na
ALOS	na	723	672	588	612	613	721	715	755	779	771	772	745	na
Males	na	723	672	588	612	613	721	715	755	779	771	772	745	na
Incarceration Rate (per 1,000 population)	11.4	12.1	13.4	13.7	13.6	13.9	15.3	18.8	21.4	23.3	22.9	24.0	24.6	na
Males	11.4	12.1	13.4	13.7	13.6	13.9	15.3	18.8	21.4	23.3	22.9	24.0	24.6	na

Source: Public Safety Department. Data compiled by Carter Goble Associates. October 2003.

Below are some of the observations regarding the trends for this subgroup of inmates:

- The prison-male population is made up primarily of inmates sentenced to more than one year and probation/parole violators.
- Overall ADP has shown an average 11% growth per year.
- Sentenced male population almost doubled between 1990 and 2003 from a 1,234 to 2,395 (or 94%).
- Probation/Parole violators grew from 128 in 1991 to 733 in 2003 (or 743%).
- Admissions growth was similar to that of the ADP at an average of 11% per year.
- Average length of stay has remained steady with little fluctuations.



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- Historical ALOS between 1991 and 2002 has been 705 days. The more recent 5-year average has been 765 days or just over 2 years.
- Incarceration rates for males into prison has shown an annual growth rate of 10%.

Reflecting these trends, the male prison population has been projected using the five models described earlier. Table 2-6 presents the results.

**Table 2-6**  
**Prison-Male Inmate Projections**

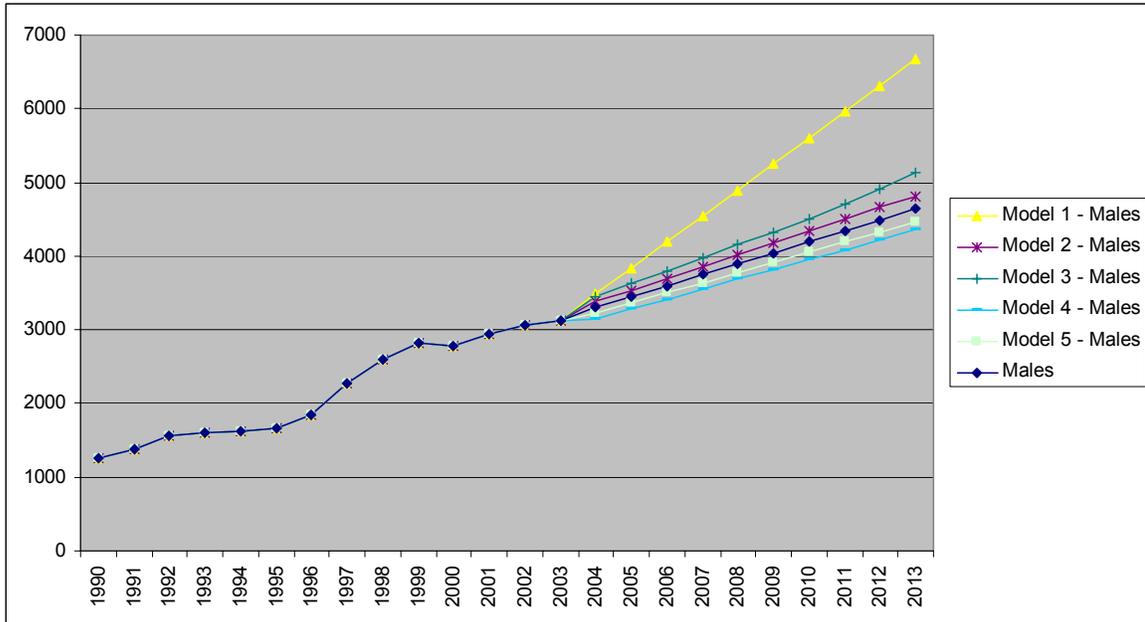
Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Model 1 - ADP Historical % Growth	3,484	3,837	4,191	4,544	4,898	5,251	5,605	5,958	6,312	6,666
Males	3,484	3,837	4,191	4,544	4,898	5,251	5,605	5,958	6,312	6,666
Model 2 - ADP Linear Regression	3,379	3,539	3,698	3,858	4,018	4,178	4,337	4,497	4,657	4,816
Males	3,379	3,539	3,698	3,858	4,018	4,178	4,337	4,497	4,657	4,816
Model 3 - Projected IR	3,454	3,627	3,800	3,976	4,152	4,331	4,510	4,712	4,917	5,125
Males	3,454	3,627	3,800	3,976	4,152	4,331	4,510	4,712	4,917	5,125
Projected Population	1,256,449	1,262,224	1,267,999	1,273,774	1,279,550	1,285,325	1,291,100	1,302,700	1,314,300	1,325,900
Projected Male IR	27	29	30	31	32	34	35	36	37	39
Model 4 - Rate to Projected ADM	3,147	3,281	3,415	3,549	3,683	3,817	3,952	4,086	4,220	4,354
Males	3,147	3,281	3,415	3,549	3,683	3,817	3,952	4,086	4,220	4,354
Projected Male ADM	1,541	1,607	1,672	1,738	1,804	1,869	1,935	2,001	2,067	2,132
2002 Male LOS	745.4									
Model 5 - Rate to Projected ADM	3,228	3,366	3,504	3,641	3,779	3,916	4,054	4,192	4,329	4,467
Males	3,228	3,366	3,504	3,641	3,779	3,916	4,054	4,192	4,329	4,467
Projected Male ADM	1,541	1,607	1,672	1,738	1,804	1,869	1,935	2,001	2,067	2,132
5-Year Avg. Male LOS	764.7									
<b>RECOMMENDED MODEL - Average of Models: 2, 5</b>										
<b>Prison-Males</b>	<b>3,304</b>	<b>3,452</b>	<b>3,601</b>	<b>3,750</b>	<b>3,898</b>	<b>4,047</b>	<b>4,196</b>	<b>4,344</b>	<b>4,493</b>	<b>4,642</b>
Males	3,304	3,452	3,601	3,750	3,898	4,047	4,196	4,344	4,493	4,642

Source: Calculations by Carter Goble Associates. October 2003.

The recommended model takes the average of the results from Models 2 and 5. It projects an overall growth of the male prison population of 48% or an average of 4.8% per year. In 2008 the State could expect a total of 3,898 male prison inmates and a total of 4,642 by 2013. Figure 2-3 presents a graphic illustration of all the models and the selected one.



Figure 2-3  
Prison-Male Baseline Population Projections



**Women’s CCC – Female**

The Women’s CCC holds female prison and some select jail inmates not feasible or safe to be held in their county’s CCC. The tables that follow present the historical data and projected population counts for each of those two subgroups separately. It must be noted that the female jail inmates go through the intake process at the Oahu CCC and are then transferred to the Women’s CCC facility. It was estimated that approximately 36% of the admissions at Oahu CCC are then transferred to the Women’s facility. The ADM counts presented below for the female jail inmates represent 36% of the total Oahu admissions. Figure 2-4 provides a graphic illustration of the trends in ADP for the females at WCCC. Table 2-7 presents historical counts and trends for this facility.



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Figure 2-4  
Women's CCC Historical ADP

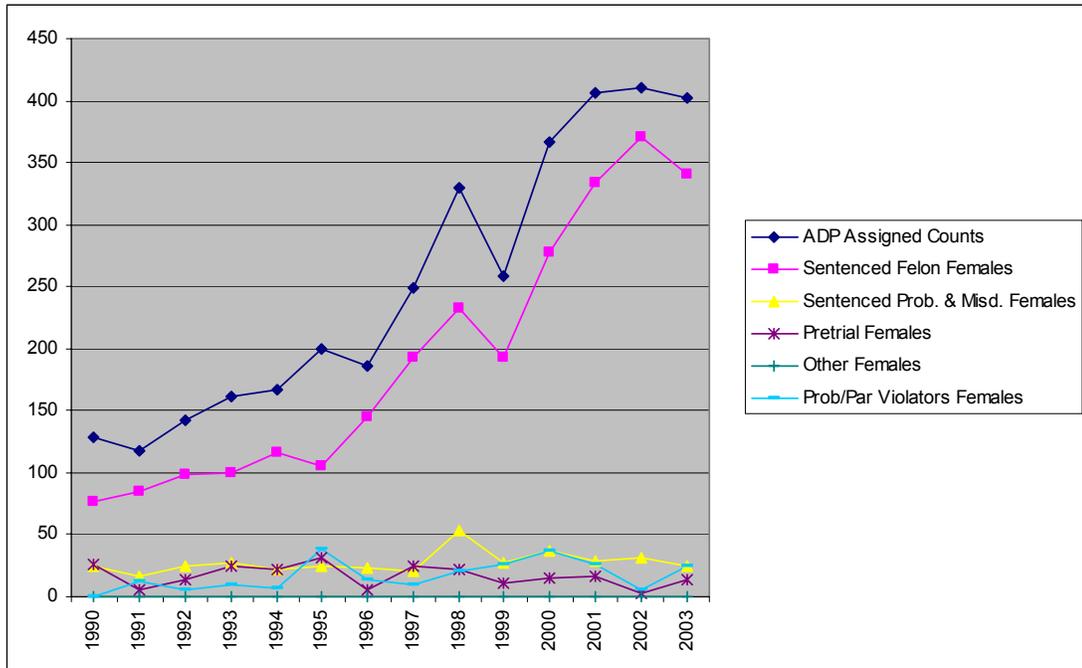


Table 2-7  
Women's CCC Historical Trends

Womens CCC	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
State Population	1,113,491	1,136,754	1,158,613	1,172,838	1,187,536	1,196,854	1,203,755	1,211,640	1,215,233	1,210,300	1,212,670	1,227,024	1,244,898	
ADP Assigned Counts	128	118	142	161	167	200	186	249	329	258	367	406	410	402
Prison Females	77	97	104	110	123	143	158	203	254	219	315	360	376	365
Jail Females	51	21	38	51	44	57	28	46	75	39	52	46	34	37
ADM	na	95	253	287	330	337	348	536	651	503	273	562	495	na
Prison Females	na	73	79	81	114	89	143	162	174	243	273	263	298	na
Jail Females	na	22	174	206	216	248	205	374	477	260	299	197	165	
ALOS	na	453	205	185	217	195	170	184	187	491	264	302	na	
Prison Females	na	485	481	496	394	586	403	457	533	329	421	500	461	na
Jail Females	na	na	80	90	74	84	50	45	57	55	56	63	82	
Incarceration Rate (per 1,000 population)	1.1	1.0	1.2	1.4	1.4	1.7	1.5	2.1	2.7	2.1	3.0	3.3	3.3	na
Prison Females	0.7	0.9	0.9	0.9	1.0	1.2	1.3	1.7	2.1	1.8	2.6	2.9	3.0	na
Jail Females	0.5	0.2	0.3	0.4	0.4	0.5	0.2	0.4	0.6	0.3	0.4	0.4	0.3	na

Source: Public Safety Department. Data compiled by Carter Goble Associates. October 2003.

Following are observations from the trends at the Women's CCC facility:

- The sentenced felons group of inmates has shown the most growth in the past decade, growing a total of 342% from 1990 through 2003. Steady increases between 1990 and 1995 dramatically changed in 1996 with three years of significant growth, followed with three similar annual increases between 1999 and 2002.
- Sentenced probation and misdemeanor inmates and pretrial inmates have shown an overall decrease in counts.



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- The counts in probation/parole violators have fluctuated over the years but overall doubled from a total of 12 in 1991 to a total of 25 recorded in 2003.
- Overall the prison females (sentenced felon and probation/parole violator female categories) have seen an average annual growth rate of 29%.
- Jail population (sentenced probation and misdemeanors, pretrial and other categories) have seen an overall decreasing annual rate of 2%.
- Admissions into prison have seen a growth rate of 28% per annum which equals the prison incarceration rate.
- Jail admissions showed an average annual growth rate of 54%. This is an indication that lower ALOS has been keeping the ADP steady.
- The female prison ALOS did not fluctuate significantly showing a historical average of 461 days and 5-year average of 449 days.
- Jail ALOS has historically averaged 67 days with the more recent 5-year average being 59 days.
- Female incarceration rates have historically been significantly lower than that of males. However, the female inmate population is showing much growth.

Table 2-8 presents the results for the baseline population projections for the females housed at WCCC.

If the female population housed at Women's CCC continued to grow at the current rate of growth, the potential population could reach 1,444. However, before that would happen the State would probably implement some alternatives to incarceration to divert females to community supervision. The average of models 2, 3, and 5 project a total of 648 prison and 50 jail female inmates for the year 2013. This represents 7.8% and 3.6% annual rates of growth for the prison and jail female population respectively. Figure 2-5 provides a graphic illustration of the results and the selected models.



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**Table 2-8**  
**Women's CCC Inmate Projections**

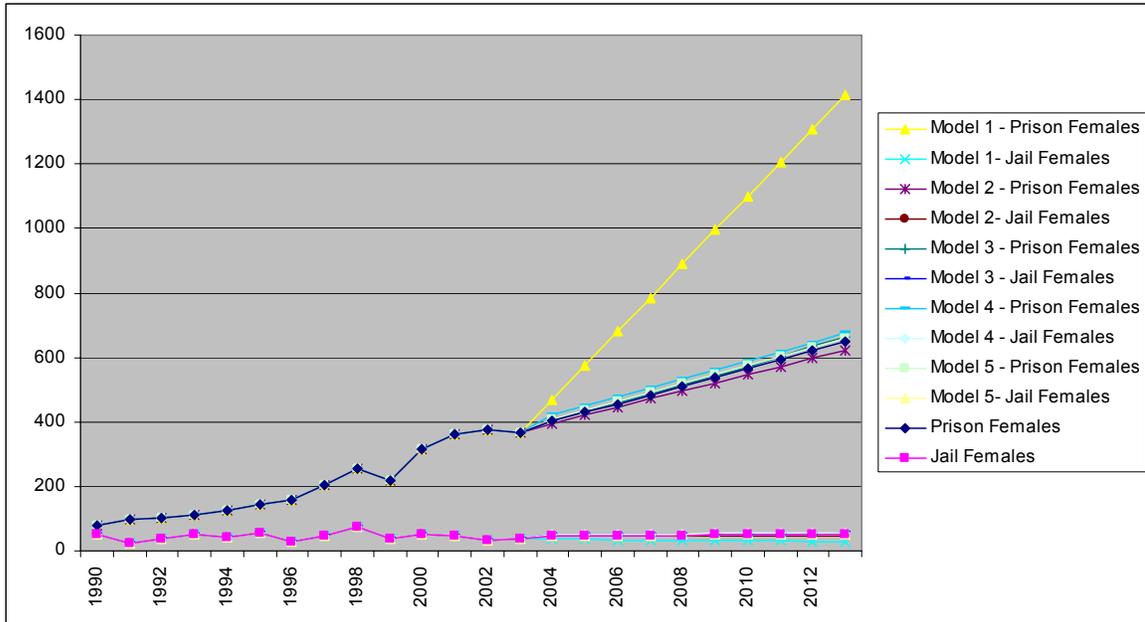
Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Model 1 - ADP Historical % Growth</b>	<b>506</b>	<b>610</b>	<b>715</b>	<b>819</b>	<b>923</b>	<b>1,027</b>	<b>1,132</b>	<b>1,236</b>	<b>1,340</b>	<b>1,444</b>
Prison Females	470	575	680	785	890	995	1,100	1,205	1,310	1,415
Jail Females	36	35	35	34	33	32	32	31	30	29
<b>Model 2 - ADP Linear Regression</b>	<b>441</b>	<b>466</b>	<b>492</b>	<b>517</b>	<b>542</b>	<b>567</b>	<b>593</b>	<b>618</b>	<b>643</b>	<b>669</b>
Prison Females	396	421	446	471	496	521	546	571	596	621
Jail Females	46	46	46	46	46	47	47	47	47	47
<b>Model 3 - Projected IR</b>	<b>453</b>	<b>481</b>	<b>509</b>	<b>536</b>	<b>565</b>	<b>593</b>	<b>622</b>	<b>654</b>	<b>686</b>	<b>719</b>
Prison Females	404	431	459	486	514	542	570	602	633	665
Jail Females	49	49	50	50	51	51	51	52	53	54
Projected Population	1,256,449	1,262,224	1,267,999	1,273,774	1,279,550	1,285,325	1,291,100	1,302,700	1,314,300	1,325,900
Projected Prison Fem. IR	3.2	3.4	3.6	3.8	4.0	4.2	4.4	4.6	4.8	5.0
Projected Jail Fem. IR	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.4
<b>Model 4 - Rate to Projected ADM</b>	<b>472</b>	<b>501</b>	<b>530</b>	<b>558</b>	<b>587</b>	<b>616</b>	<b>644</b>	<b>673</b>	<b>701</b>	<b>730</b>
Prison Females	421	449	477	506	534	562	590	618	647	675
Jail Females	51	52	52	53	53	54	54	54	55	55
Projected Prison Fem. ADM	334	356	378	401	423	445	468	490	513	535
Projected Jail Fem. ADM	298	301	303	306	308	310	312	314	316	318
2002 Prison Female LOS	460.5									
2002 Jail Female LOS	63.0									
<b>Model 5 - Rate to Projected ADM</b>	<b>457</b>	<b>485</b>	<b>513</b>	<b>541</b>	<b>569</b>	<b>597</b>	<b>624</b>	<b>652</b>	<b>680</b>	<b>708</b>
Prison Females	410	438	465	493	520	548	575	602	630	657
Jail Females	47	48	48	48	49	49	49	50	50	50
Projected Prison Fem. ADM	334	356	378	401	423	445	468	490	513	535
Projected Jail Fem. ADM	298	301	303	306	308	310	312	314	316	318
5-Year Avg. Prison Fem. LC	448.6									
5-Year Avg. Jail Fem. LOS	57.8									
<b>RECOMMENDED MODEL - Average of Models: 2, 3, 5</b>										
<b>Womens CCC</b>	<b>451</b>	<b>477</b>	<b>504</b>	<b>531</b>	<b>559</b>	<b>586</b>	<b>613</b>	<b>641</b>	<b>670</b>	<b>698</b>
Prison Females	403	430	457	483	510	537	564	592	620	648
Jail Females	47	48	48	48	49	49	49	50	50	50

Source: Calculations by Carter Goble Associates. October 2003.



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**Figure 2-5**  
**Women’s CCC Baseline Population Projections**



**JAIL / COMMUNITY CORRECTIONAL FACILITIES**

There are four community correctional centers in the State. Each CCC houses sentenced (felons, probation, and misdemeanor), pretrial (felon and misdemeanor), other jurisdiction, and probation/parole violators. Some of those categories are few in number. For example, most sentenced felons would serve their sentence at one of the correctional facilities. However, nearing the last few months of their sentenced those inmates are transferred back to the County facility where the inmate originated from to follow a pre-release transitional program. Historical trends and baseline population projections are presented as follows for each of the CCC facilities by gender.

**Hawaii Community Correctional Center**

The Hawaii CCC holds sentenced and pretrial males and females. With an operating capacity of 226 the facility is currently operating at 123%. Figure 2-6 provides a graphic illustration of the ADP trends for all types of inmates housed at this facility since 1990. Table 2-9 presents this facility's historical trends.



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Figure 2-6  
Hawaii CCC Historical ADP

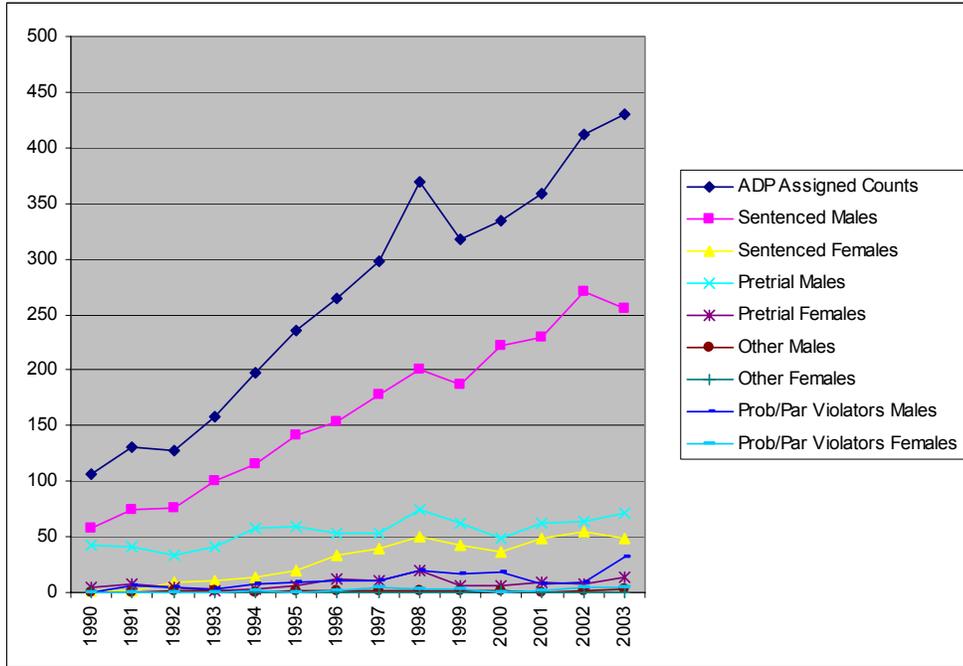


Table 2-9  
Hawaii CCC Historical Trends

HAWAII CCC	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
County Population	121,572	127,266	131,630	135,085	137,713	140,492	141,935	144,445	145,833	146,970	149,261	151,709	154,794	na
ADP Assigned Counts	106	131	128	158	198	235	264	298	369	318	334	358	412	430
Males	100	122	115	146	180	210	217	243	296	267	290	299	345	363
Females	6	9	13	12	18	25	47	55	73	51	44	59	67	67
ADM	na	1,433	1,453	1,670	1,794	1,692	1,493	1,290	1,479	1,622	1,622	na	na	na
Males	na	na	1,286	1,511	1,610	1,482	1,285	1,116	1,224	1,346	1,404	na	na	na
Females	na	na	167	159	184	210	208	174	255	276	218	na	na	na
ALOS	na	33	32	35	40	51	65	84	91	72	75	na	na	na
Males	na	na	33	35	41	52	62	79	88	72	75	na	na	na
Females	na	na	28	28	36	43	82	115	104	67	74	na	na	na
Incarceration Rate (per 1,000 population)	8.7	10.3	9.7	11.7	14.4	16.7	18.6	20.6	25.3	21.6	22.4	23.6	26.6	na
Males	8.2	9.6	8.7	10.8	13.1	14.9	15.3	16.8	20.3	18.2	19.4	19.7	22.3	na
Females	0.5	0.7	1.0	0.9	1.3	1.8	3.3	3.8	5.0	3.5	2.9	3.9	4.3	na

Source: Public Safety Department. Data compiled by Carter Goble Associates. October 2003.

Following are observations from the trends at the Hawaii CCC:

- Since 1990 the sentenced male population has shown the steepest growth at 341% from 58 in 1990 to 256 inmates in 2003.
- Although small in numbers the female sentenced population has grown from 2 in 1990 to 49 in 2003.
- Overall, the male population has shown an annual growth rate of 20% where females have grown at the rate of 78% per annum.



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- Male admissions into the HCCC have followed an oscillating pattern and overall have only shown a 1% increase per year.
- Female admissions have shown a steady increasing trend of 4% per year.
- Rising ALOS for the male population appears to be the driving force behind the increase in ADP. ALOS in 1990 was 33 days which has increased to 75 days as recorded in 2000.
- Historically the male ALOS has been 60 days, but in the most recent 5-years it has averaged 75 days.
- ALOS for the female population has also increased from a low of 28 days in 1990 to 74 days in 2000. ALOS peaked in 1997 at 115 days. Since 1990 the ALOS has averaged 64 days, rising to 89 days averaged in the past 5 years.
- The IR rate that was only 8.7 inmates per 1,000 population has tripled to 26.6 in 2003.

The baseline population projections for the Hawaii CCC are presented in Table 2-10.

Hawaii CCC could expect to be responsible for as many as 476 males and 111 females by the year 2013. These projections represent a 31% and 65% growth for males and females respectively. Overall projected growth for the facility is 37% or 3.7% per year. A graphic illustration of the five models and the recommended result is presented in Figure 2-7.

**Table 2-10  
Hawaii CCC Inmate Projections**

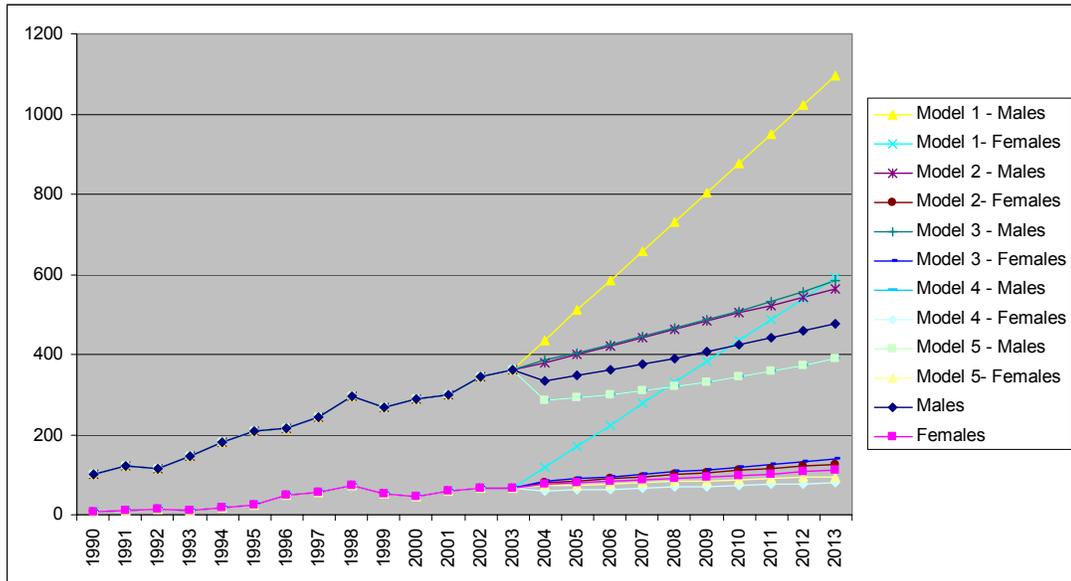
Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Model 1 - ADP Historical % Growth</b>	<b>556</b>	<b>682</b>	<b>808</b>	<b>933</b>	<b>1,059</b>	<b>1,185</b>	<b>1,311</b>	<b>1,437</b>	<b>1,563</b>	<b>1,688</b>
Males	436	510	583	657	730	804	877	951	1,024	1,097
Females	119	172	224	277	329	381	434	486	539	591
<b>Model 2 - ADP Linear Regression</b>	<b>459</b>	<b>485</b>	<b>510</b>	<b>536</b>	<b>561</b>	<b>587</b>	<b>612</b>	<b>638</b>	<b>664</b>	<b>689</b>
Males	381	401	421	442	462	482	503	523	543	564
Females	78	84	89	94	99	105	110	115	120	126
<b>Model 3 - Projected IR</b>	<b>468</b>	<b>494</b>	<b>520</b>	<b>547</b>	<b>573</b>	<b>600</b>	<b>627</b>	<b>658</b>	<b>690</b>	<b>723</b>
Males	385	405	425	446	466	487	508	532	558	583
Females	83	89	95	101	107	113	119	126	133	140
Projected Population	155,996	156,596	157,197	157,798	158,399	158,999	159,600	161,340	163,080	164,820
Projected Male IR	25	26	27	28	29	31	32	33	34	35
Projected Female IR	5	6	6	6	7	7	7	8	8	9
<b>Model 4 - Rate to Projected ADM</b>	<b>344</b>	<b>353</b>	<b>363</b>	<b>375</b>	<b>387</b>	<b>401</b>	<b>416</b>	<b>432</b>	<b>450</b>	<b>468</b>
Males	285	292	300	309	319	330	343	357	373	389
Females	59	62	64	66	68	70	73	75	77	79
Projected Male ADM	1,380	1,412	1,450	1,494	1,544	1,600	1,662	1,730	1,803	1,883
Projected Female ADM	294	305	316	327	338	349	360	371	382	393
2000 Male LOS	75.4									
2000 Female LOS	73.7									
<b>Model 5 - Rate to Projected ADM</b>	<b>357</b>	<b>366</b>	<b>376</b>	<b>388</b>	<b>401</b>	<b>415</b>	<b>431</b>	<b>448</b>	<b>466</b>	<b>485</b>
Males	285	292	300	309	319	331	343	357	373	389
Females	71	74	77	79	82	85	87	90	93	95
Projected Male ADM	1,380	1,412	1,450	1,494	1,544	1,600	1,662	1,730	1,803	1,883
Projected Female ADM	294	305	316	327	338	349	360	371	382	393
5-Year Avg. Male LOS	75.4									
5-Year Avg. Female LOS	88.7									
<b>RECOMMENDED MODEL - Average of Models: 2, 5</b>										
<b>HAWAII CCC</b>	<b>408</b>	<b>425</b>	<b>443</b>	<b>462</b>	<b>481</b>	<b>501</b>	<b>522</b>	<b>543</b>	<b>565</b>	<b>587</b>
Males	333	346	360	375	391	406	423	440	458	476
Females	75	79	83	87	91	95	99	103	107	111

Source: Calculations by Carter Goble Associates. October 2003.



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**Figure 2-7**  
**Hawaii CCC Baseline Population Projections**



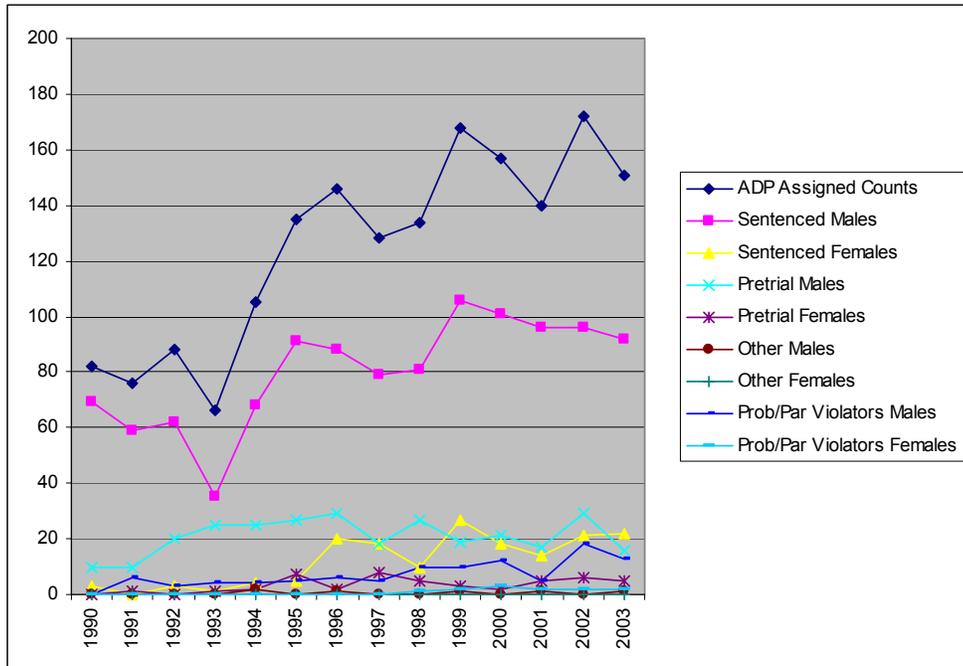
**Kauai Community Correctional Center**

The Kauai CCC as seen in Table 2-3 has an operating capacity of 128 but is currently operating at 121% of capacity. It houses male and female sentenced, pretrial, and few other jurisdiction and probations and parole violators. Recently there were as many as 32 male probation/parole violators. Figure 2-8 provides a graphic illustration of the growth patterns in the ADP at KCCC. Table 2-11 presents the overall historical trends.



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**Figure 2-8**  
**Kauai CCC ADP Historical ADP**



**Table 2-11**  
**Kauai CCC Historical Trends**

KAUAI CCC	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
County Population	51,676	53,379	54,439	55,461	56,478	57,068	57,688	57,712	57,843	58,264	58,560	59,105	59,946	
ADP Assigned Counts	82	76	88	66	105	135	146	128	134	168	157	140	172	151
Males	79	75	85	64	99	123	124	102	118	136	134	119	143	122
Females	3	1	3	2	6	12	22	26	16	32	23	21	29	29
ADM	na	715	708	428	590	667	612	689	724	877	616	na	na	na
Males	na	na	627	378	526	575	518	570	621	712	526	na	na	na
Females	na	na	81	50	64	92	94	119	103	165	90	na	na	na
ALOS	na	39	45	56	65	74	87	68	68	70	93	na	na	na
Males	na	na	49	62	69	78	87	65	69	70	93	na	na	na
Females	na	na	14	15	34	48	85	80	57	71	93	na	na	na
Incarceration Rate (per 1,000 population)	15.9	14.2	16.2	11.9	18.6	23.7	25.3	22.2	23.2	28.8	26.8	23.7	28.7	na
Males	15.3	14.1	15.6	11.5	17.5	21.6	21.5	17.7	20.4	23.3	22.9	20.1	23.9	na
Females	0.6	0.2	0.6	0.4	1.1	2.1	3.8	4.5	2.8	5.5	3.9	3.6	4.8	na

Source: Public Safety Department. Data compiled by Carter Goble Associates. October 2003.

Below are observations for the trends at the Kauai CCC facility:

- In terms of percent growth, the female sentenced category has grown the most from 3 inmates in 1990 to 22 in 2003.
- The facility's ADP has fluctuated significantly.
- The ADP hit a peak in 1996 with 146 inmates, then dropped to 128 the following year, increasing to 168 in 1999, then dropping back down to 140 in 2001. In 2003 the ADP was recorded at 151. All those years, the facility has been operating well over capacity.



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- Overall growth in male offender has been at the rate of 4% per annum, and 67% per annum for female offenders.
- Admissions have dropped in the last twelve years, posting an annual declining rate of 2%. This gives an indication that the ALOS has been driving the growth in ADP.
- Female admissions have only shown a 1% increase per year. Again, indicating that the ALOS has been the driving force behind the increases in ADP.
- For male offenders lengths of stay increased from 49 days in 1992 to 93 days in 2000. The most recent 5-year average is approximately 77 days for male offenders.
- The female ALOS was computed at 14 days in 1992 which has grown to an average of 93 days in 2000. The 5-year average is the same as the males with 77 days.

Table 2-12 presents the baseline population projections for Kauai CCC.

**Table 2-12**  
**Kauai CCC Inmate Projections**

Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Model 1 - ADP Historical % Growth</b>	<b>175</b>	<b>200</b>	<b>224</b>	<b>249</b>	<b>273</b>	<b>298</b>	<b>322</b>	<b>347</b>	<b>371</b>	<b>395</b>
Males	127	132	137	142	148	153	158	163	168	173
Females	48	68	87	106	126	145	164	184	203	222
<b>Model 2 - ADP Linear Regression</b>	<b>180</b>	<b>187</b>	<b>195</b>	<b>202</b>	<b>210</b>	<b>217</b>	<b>224</b>	<b>232</b>	<b>239</b>	<b>246</b>
Males	146	151	156	161	166	171	176	181	185	190
Females	34	37	39	41	44	46	49	51	54	56
<b>Model 3 - Projected IR</b>	<b>193</b>	<b>203</b>	<b>213</b>	<b>223</b>	<b>234</b>	<b>244</b>	<b>255</b>	<b>268</b>	<b>282</b>	<b>296</b>
Males	156	163	170	177	184	192	199	208	218	227
Females	37	40	43	46	49	53	56	60	64	68
Projected Population	61,410	62,141	62,873	63,605	64,337	65,068	65,800	67,040	68,280	69,520
Projected Male IR	25	26	27	28	29	29	30	31	32	33
Projected Female IR	6	6	7	7	8	8	9	9	9	10
<b>Model 4 - Rate to Projected ADM</b>	<b>211</b>	<b>216</b>	<b>221</b>	<b>227</b>	<b>232</b>	<b>238</b>	<b>243</b>	<b>248</b>	<b>254</b>	<b>259</b>
Males	170	173	176	180	183	186	190	193	196	200
Females	41	43	45	47	49	51	53	55	57	60
Projected Male ADM	666	679	692	705	718	731	744	757	770	783
Projected Female ADM	160	168	176	184	193	201	209	217	225	233
2000 Male LOS	93.0									
2000 Female LOS	93.3									
<b>Model 5 - Rate to Projected ADM</b>	<b>174</b>	<b>179</b>	<b>183</b>	<b>188</b>	<b>192</b>	<b>197</b>	<b>201</b>	<b>205</b>	<b>210</b>	<b>214</b>
Males	140	143	146	149	151	154	157	160	162	165
Females	34	36	37	39	41	42	44	46	48	49
Projected Male ADM	666	679	692	705	718	731	744	757	770	783
Projected Female ADM	160	168	176	184	193	201	209	217	225	233
5-Year Avg. Male LOS	77.0									
5-Year Avg. Female LOS	77.2									
<b>RECOMMENDED MODEL - Average of Models: 2, 3, 4, 5</b>										
<b>KAUAI CCC</b>	<b>189</b>	<b>196</b>	<b>203</b>	<b>210</b>	<b>217</b>	<b>224</b>	<b>231</b>	<b>238</b>	<b>246</b>	<b>254</b>
Males	153	157	162	166	171	176	180	185	190	196
Females	36	39	41	43	46	48	51	53	56	58

Source: Calculations by Carter Goble Associates. October 2003.

Kauai although the smallest county in the State, has county population projections which show potential to grow up to 1.5% annually over the next thirteen years (as shown in Table 2-2). The offender population at this facility also shows significant growth potential. The recommended model shows a total of 196 males and 58 females in 2013. This represents a 60% growth for males (or

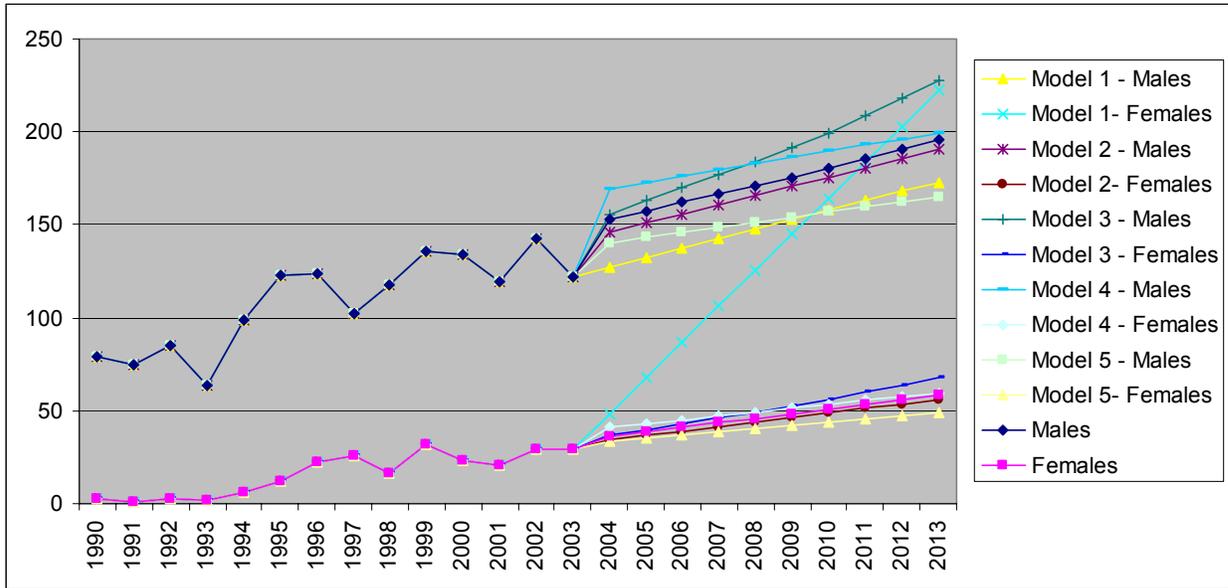


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6% growth per year), and a 101% growth for females (or 10.1% annual growth rate). As such the female count could double from the current 29 to 58 in the 10 year planning horizon.

Figure 2-9 provides a graphic illustration of the results.

**Figure 2-9  
Kauai CCC Baseline Population Projections**



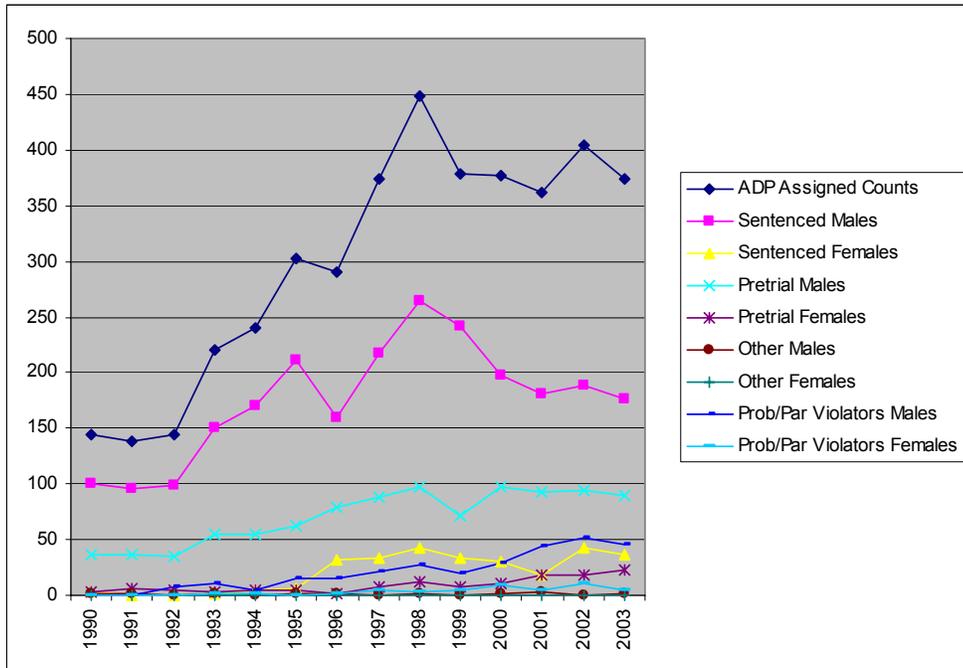
**Maui Community Correctional Center**

The Maui CCC with an operating capacity for 301 inmates is the second largest CCC facility after Oahu CCC. This facility has also been operating over capacity and the historical trends indicate continued growth over the next decade. Figure 2-10 presents historical ADP trends for the different types of inmates housed at MCCC. Table 2-13 presents the facility’s historical trends.



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**Figure 2-10**  
**Maui CCC Historical ADP**



**Table 2-13**  
**Maui CCC Historical Trends**

MAUI CCC	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
County Population	101,709	105,599	108,585	111,944	114,754	117,895	120,689	122,772	124,648	126,160	128,968	132,034	134,139	2003
ADP Assigned Counts	144	138	145	221	240	302	290	374	449	379	377	361	405	374
Males	138	132	141	216	229	291	254	327	392	333	327	321	335	311
Females	6	6	4	5	11	11	36	47	57	46	50	40	70	63
ADM	na	765	739	853	1,051	1,296	1,332	1,564	1,854	1,693	1,804	na	na	na
Males	na	na	682	781	978	1,176	1,181	1,392	1,579	1,450	1,540	na	na	na
Females	na	na	57	72	73	120	151	172	275	243	264	na	na	na
ALOS	na	66	72	95	83	85	79	87	88	82	76	na	na	na
Males	na	na	75	101	85	90	79	86	91	84	78	na	na	na
Females	na	na	26	25	55	33	87	100	76	69	69	na	na	na
Incarceration Rate (per 1,000 population)	14.2	13.1	13.4	19.7	20.9	25.6	24.0	30.5	36.0	30.0	29.2	27.3	30.2	na
Males	13.6	12.5	13.0	19.3	20.0	24.7	21.0	26.6	31.4	26.4	25.4	24.3	25.0	na
Females	0.6	0.6	0.4	0.4	1.0	0.9	3.0	3.8	4.6	3.6	3.9	3.0	5.2	na

Source: Public Safety Department. Data compiled by Carter Goble Associates. October 2003.

Following are the Maui CCC trends summary:

- The largest population groups held at MCCC are sentenced and pretrial males. These two groups of inmates have shown growth rates of 76% and 141% respectively between 1990 and 2003.
- Females, again though small in numbers are a segment of the offender population that is growing rapidly. Sentenced females increased from 3 in 1990 to 36 in 2003 (or 1100%)



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growth). The pretrial female population grew from 3 to 23 between 1990 and 2003 (or 667%).

- In 1990 this facility did not hold any probation or parole violators. It was not until 1992 that MCCC began holding 7 male probation and parole violators. This number has grown in the recent years to between 45 and 50 inmates. In 2002 there were 10 female probation and parole violators housed at MCCC.
- Since 1990 the facility's ADP has grown 12% per year, with males growing at the rate of 10% per year, and females at the rate of 73% per year.
- Male admissions into the facility have grown at a faster rate than ADP at 16% per year.
- Female admissions have increased at the rate of 45% per year.
- ALOS continues to be high for a jail. However, this is due to the large percentage of the inmate population being classified as sentenced. The ALOS for males has remained at 85 days between 1992 and 2000, and 83 days in the last five years.
- The ALOS for females at MCCC historically had been computed at 60 days. In the past most recent 5-years the ALOS increased to 80 days. Again this is due to the increase in female sentenced population.
- Similar to trends in other facilities the incarceration rate of females has been growing fast at a rate of 65% per year (0.6 IR in 1990 and 5.2 in 2002).

Table 2-14 presents the baseline population projections for MCCC.



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**Table 2-14**  
**Maui CCC Inmate Projections**

Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Model 1 - ADP Historical % Growth</b>	<b>450</b>	<b>526</b>	<b>602</b>	<b>678</b>	<b>754</b>	<b>830</b>	<b>906</b>	<b>982</b>	<b>1,058</b>	<b>1,134</b>
Males	341	371	401	431	461	491	521	551	581	611
Females	109	155	201	247	293	339	385	431	477	523
<b>Model 2 - ADP Linear Regression</b>	<b>468</b>	<b>490</b>	<b>513</b>	<b>535</b>	<b>557</b>	<b>580</b>	<b>602</b>	<b>624</b>	<b>647</b>	<b>669</b>
Males	396	413	430	447	464	481	498	515	533	550
Females	72	77	83	88	93	98	104	109	114	120
<b>Model 3 - Projected IR</b>	<b>501</b>	<b>525</b>	<b>548</b>	<b>571</b>	<b>594</b>	<b>618</b>	<b>641</b>	<b>671</b>	<b>701</b>	<b>732</b>
Males	426	443	461	478	496	513	531	554	577	601
Females	76	81	87	93	99	104	110	117	124	131
Projected Population	134,704	134,987	135,270	135,552	135,835	136,117	136,400	137,920	139,440	140,960
Projected Male IR	32	33	34	35	36	38	39	40	41	43
Projected Female IR	6	6	6	7	7	8	8	8	9	9
<b>Model 4 - Rate to Projected ADM</b>	<b>466</b>	<b>484</b>	<b>501</b>	<b>518</b>	<b>534</b>	<b>550</b>	<b>566</b>	<b>581</b>	<b>596</b>	<b>611</b>
Males	390	403	414	425	436	446	456	466	475	484
Females	75	81	87	92	98	104	109	115	121	126
Projected Male ADM	1,839	1,896	1,950	2,002	2,053	2,101	2,148	2,194	2,238	2,282
Projected Female ADM	398	428	458	488	518	548	578	608	638	668
2000 Male LOS	77.5									
2000 Female LOS	69.1									
<b>Model 5 - Rate to Projected ADM</b>	<b>507</b>	<b>526</b>	<b>545</b>	<b>564</b>	<b>582</b>	<b>599</b>	<b>617</b>	<b>634</b>	<b>650</b>	<b>667</b>
Males	419	432	445	457	468	479	490	500	510	520
Females	87	94	101	107	114	120	127	133	140	147
Projected Male ADM	1,839	1,896	1,950	2,002	2,053	2,101	2,148	2,194	2,238	2,282
Projected Female ADM	398	428	458	488	518	548	578	608	638	668
5-Year Avg. Male LOS	83.2									
5-Year Avg. Female LOS	80.1									
<b>RECOMMENDED MODEL - Average of Models: 2, 3, 4, 5</b>										
<b>MAUI CCC</b>	<b>485</b>	<b>506</b>	<b>527</b>	<b>547</b>	<b>567</b>	<b>587</b>	<b>606</b>	<b>628</b>	<b>649</b>	<b>670</b>
Males	408	423	437	452	466	480	494	509	524	539
Females	78	83	89	95	101	107	113	119	125	131

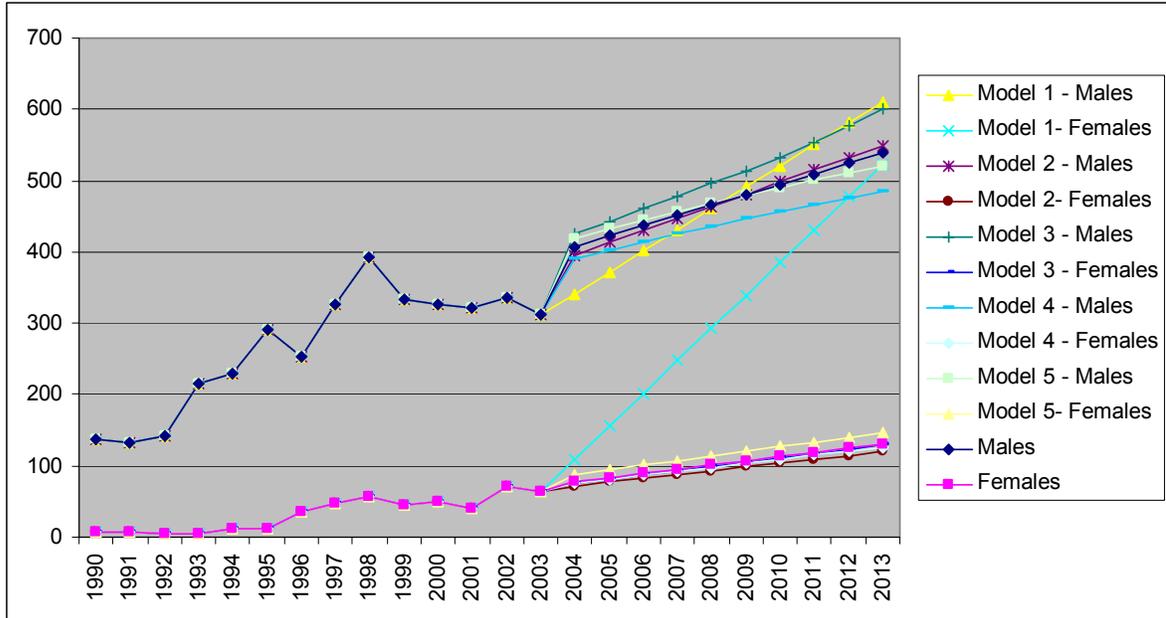
Source: Calculations by Carter Goble Associates. October 2003.

This is the CCC facility that can be expected to experience the most rapid growth rate in the next 10 years. Over the next decade, MCCC inmate population could be expected to grow at the rate of 7.9% per year, with males experiencing a 7.3% and females 10.8% annual growth rates. Figure 2-11 provides a graphic illustration of the models and selected results.



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**Figure 2-11**  
**Maui CCC Baseline Population Projections**



**Oahu Community Correctional Center**

As seen in Table 2-3 Oahu is by far the largest CCC facility with an operating capacity of 954. The island of Oahu, which includes the city and county of Honolulu is the center for business and government for the State as well as the main tourist destination. It thus can be expected to continue to generate the highest demand for correctional services. The facility, currently operating at 109% shows an upward trend in ADP though not as steep as some of the other smaller CCC facilities where the growth ratios can be expected to be higher, but absolute numbers and volumes will remain much smaller. Figure 2-12 shows a graphic illustration of Oahu’s historical ADP. Table 2-15 shows the overall facility’s trends for males and females.



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Figure 2-12  
Oahu CCC Historical ADP

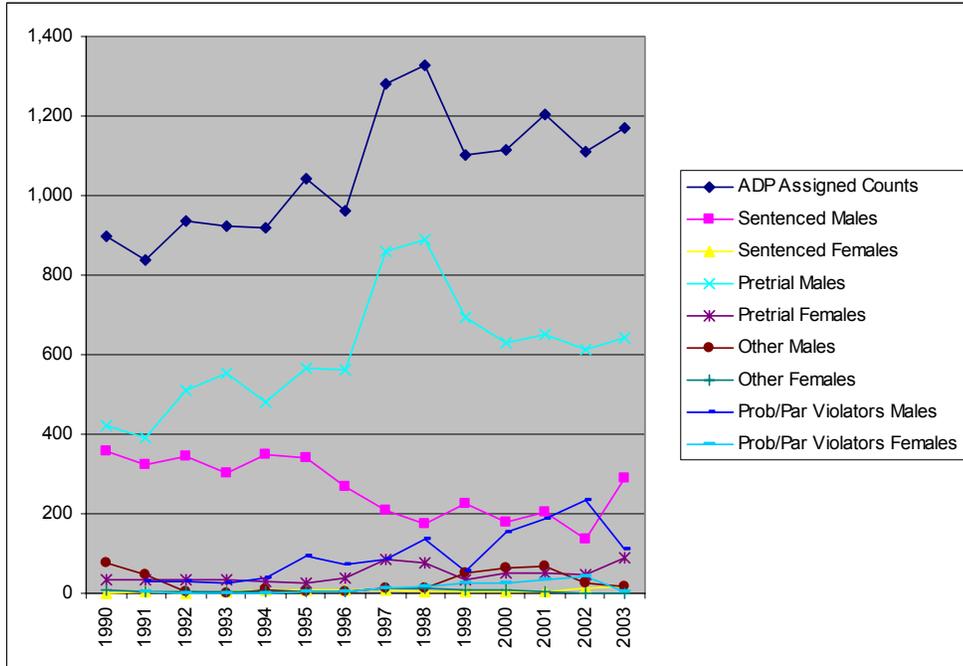


Table 2-15  
Oahu CCC Historical Trends

OAHU CCC	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
County Population	838,534	850,510	863,959	870,348	878,591	881,399	883,443	886,711	886,909	878,906	875,881	884,176	896,019	na
ADP Assigned Counts	897	837	938	924	918	1,044	961	1,282	1,329	1,101	1,115	1,206	1,111	1,170
Males	853	791	892	881	877	1,005	908	1,163	1,213	1,025	1,028	1,115	1,008	1,059
Females	44	46	46	43	41	39	53	119	116	76	87	91	103	111
ADM	na	4,316	4,467	4,829	5,343	5,008	4,816	6,018	6,966	6,166	5,698	na	na	na
Males	na	na	3,873	4,190	4,593	4,357	4,162	5,257	5,997	5,383	5,030	na	na	na
Females	na	na	594	639	750	651	654	761	969	783	668	na	na	na
ALOS	na	71	77	70	63	76	73	78	70	65	71	na	na	na
Males	na	na	84	77	70	84	80	81	74	70	75	na	na	na
Females	na	na	28	25	20	22	30	57	44	35	48	na	na	na
Incarceration Rate (per 1,000 population)	10.7	9.8	10.9	10.6	10.4	11.8	10.9	14.5	15.0	12.5	12.7	13.6	12.4	na
Males	10.2	9.3	10.3	10.1	10.0	11.4	10.3	13.1	13.7	11.7	11.7	12.6	11.2	na
Females	0.5	0.5	0.5	0.5	0.5	0.4	0.6	1.3	1.3	0.9	1.0	1.0	1.1	na

Source: Public Safety Department. Data compiled by Carter Goble Associates. October 2003.

Oahu CCC's historical trends are summarized below:

- Oahu CCC holds primarily pretrial males.
- The next largest population segment housed at this facility is the sentenced males, followed by probation and parole violators. However, the sentenced male population has been on the decline where a total of 357 sentenced male inmates were housed in 1990 compared to only 289 in 2003.
- The "other jurisdiction" male population has also seen a reduction from 76 in 1990 to 17 in 2003.



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- Male probation/parole violators have been increasing over the years. Between 1991 and 2003 this segment of the population experienced a 283% growth or 22% per year.
- Female sentenced population has increased from 1 to 15 between 1990 and 2003, and for the same time period the female pretrial population has increased from 33 to 90.
- The female probation and parole violators has not followed a steady pattern, when in 1990 and 1994 there were no offenders in this classification, increasing to a high of 41 being held in 2002, and only 6 in 2003.
- Overall the population at Oahu has grown approximately 30% or 2% per year, with 2% and 12% per year respectively for males and females.
- Admissions into the Oahu CCC (which include transfers to the Women's CCC, Halawa CF, and Waiawa CF) have been slightly above ADP growth at 32% or 4% per year. For males and females respectively the annual growth rates in admissions have been recorded at 4% and 2%.
- ALOS for the male offenders has been in the decline, parallel to the decline in sentenced population. For the data available the historical ALOS was 77 days, and 76 days in the last five years.
- Females appear to be staying longer at the facility. Between 1992 and 2000 the female population averaged 34 days, and was 43 days between 1996 and 2000.

Table 2-16 provides a summary of the resulting projections models for Oahu CCC.



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**Table 2-16**  
**Oahu CCC Inmate Projections**

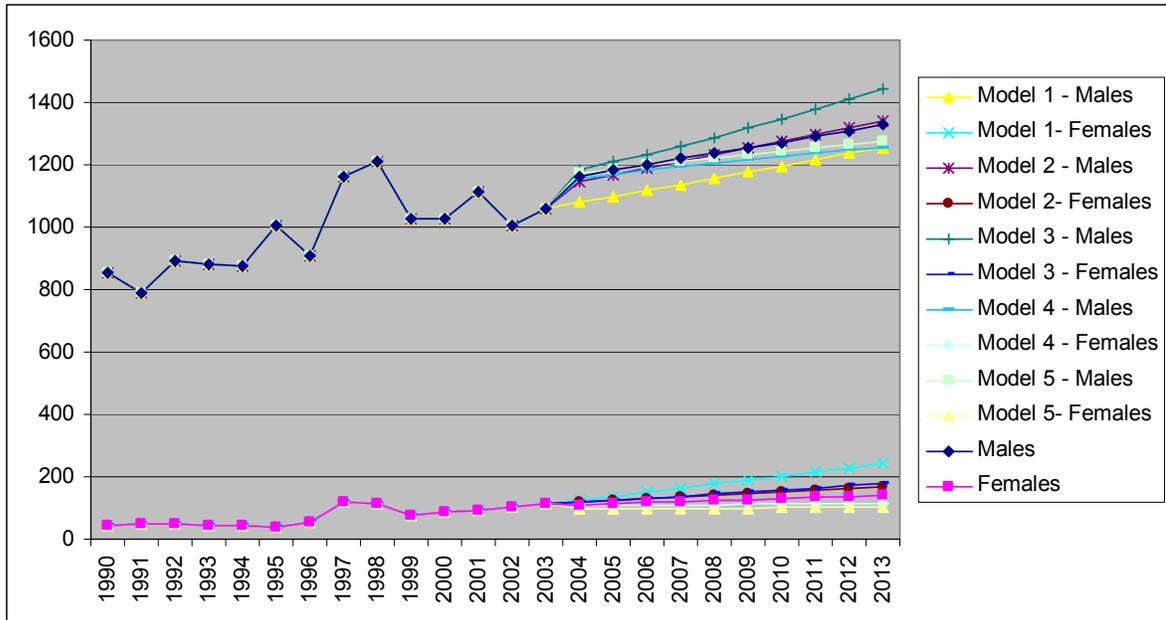
Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Model 1 - ADP Historical % Growth</b>	<b>1,203</b>	<b>1,235</b>	<b>1,268</b>	<b>1,301</b>	<b>1,333</b>	<b>1,366</b>	<b>1,399</b>	<b>1,431</b>	<b>1,464</b>	<b>1,497</b>
Males	1,079	1,098	1,118	1,138	1,157	1,177	1,197	1,216	1,236	1,256
Females	124	137	150	163	176	189	202	215	228	241
<b>Model 2 - ADP Linear Regression</b>	<b>1,264</b>	<b>1,291</b>	<b>1,318</b>	<b>1,346</b>	<b>1,373</b>	<b>1,400</b>	<b>1,428</b>	<b>1,455</b>	<b>1,482</b>	<b>1,509</b>
Males	1,147	1,169	1,190	1,211	1,233	1,254	1,275	1,297	1,318	1,339
Females	117	123	129	134	140	146	152	158	164	170
<b>Model 3 - Projected IR</b>	<b>1,300</b>	<b>1,333</b>	<b>1,366</b>	<b>1,399</b>	<b>1,433</b>	<b>1,467</b>	<b>1,501</b>	<b>1,541</b>	<b>1,580</b>	<b>1,621</b>
Males	1,182	1,208	1,235	1,262	1,289	1,316	1,344	1,376	1,408	1,441
Females	118	125	131	138	144	151	157	165	172	179
Projected Population	904,314	908,462	912,610	916,757	920,905	925,052	929,200	936,320	943,440	950,560
Projected Male IR	13	13	14	14	14	14	14	15	15	15
Projected Female IR	1	1	1	2	2	2	2	2	2	2
<b>Model 4 - Rate to Projected ADM</b>	<b>1,262</b>	<b>1,277</b>	<b>1,291</b>	<b>1,304</b>	<b>1,316</b>	<b>1,328</b>	<b>1,339</b>	<b>1,350</b>	<b>1,360</b>	<b>1,370</b>
Males	1,156	1,169	1,182	1,194	1,206	1,217	1,227	1,237	1,247	1,256
Females	107	108	108	109	110	111	112	112	113	114
Projected Male ADM	5,654	5,721	5,784	5,844	5,900	5,954	6,005	6,055	6,102	6,147
Projected Female ADM	818	826	833	839	846	851	857	863	868	873
2000 Male LOS	74.6									
2000 Female LOS	47.5									
<b>Model 5 - Rate to Projected ADM</b>	<b>1,268</b>	<b>1,282</b>	<b>1,296</b>	<b>1,309</b>	<b>1,322</b>	<b>1,334</b>	<b>1,345</b>	<b>1,356</b>	<b>1,366</b>	<b>1,376</b>
Males	1,172	1,186	1,199	1,211	1,223	1,234	1,245	1,255	1,265	1,274
Females	96	97	97	98	99	100	100	101	101	102
Projected Male ADM	5,654	5,721	5,784	5,844	5,900	5,954	6,005	6,055	6,102	6,147
Projected Female ADM	818	826	833	839	846	851	857	863	868	873
5-Year Avg. Male LOS	75.7									
5-Year Avg. Female LOS	42.7									
<b>RECOMMENDED MODEL - Average of Models: 2, 3, 4, 5</b>										
<b>OAHU CCC</b>	<b>1,273</b>	<b>1,296</b>	<b>1,318</b>	<b>1,340</b>	<b>1,361</b>	<b>1,382</b>	<b>1,403</b>	<b>1,425</b>	<b>1,447</b>	<b>1,469</b>
Males	1,164	1,183	1,201	1,220	1,238	1,255	1,273	1,291	1,310	1,328
Females	109	113	116	120	123	127	130	134	138	141

Source: Calculations by Carter Goble Associates. October 2003.

Oahu CCC is expected to grow at the slowest rate of all other facilities, but will continue to have the second largest inmate count after Halawa CF. Projected growth rates for males and females at Oahu CCC are 2.5% and 2.7% per year respectively. The total assigned inmate population for this facility could be expected to reach 1,361 by 2008 and 1,469 by 2013. Figure 2-13 provides a graphic illustration of the results.



Figure 2-13  
Oahu CCC Baseline Population Projections



**SUMMARY**

A variety of projection models were developed using historical data and information about future trends. Different models were selected to represent the most likely future scenario for each of the prison and jail populations in the State. Based on these projections, the average daily population in the male prison facilities could be approximately 3,898 by 2008 and 4,642 by 2013. Female prison inmates housed at the Women’s CCC are expected to grow to 510 by 2008 and 648 by 2013. The male jail population, housed at the four County CCCs, in the year 2008 could be approximately 2,265 growing to 2,539 by 2013. The female jail segment of the population, housed at the four CCCs and at the Women’s CCC, could reach 409 and 491 by 2008 and 2013 respectively if pre-trial detention is retained at the WCCC in addition to the four county CCCs.

As seen earlier and presented in Table 2-3, the levels of overcrowding in the State of Hawaii’s facilities are apparent, serious, and a threat to the security of both inmates and staff. In general Hawaii’s offender population is growing fast with the female offender population generally having the highest growth ratios. Note that these are baseline projections based on current conditions. A variety of options exist for the justice system to review and alter its incarceration trends. These could include system reviews, accelerating court case processing time, and alternative diversion programs that can be used instead of jail for both pre-trial and sentenced offenders. Capacity expansion of the programs currently available in Hawaii could also potentially reduce the baseline projections. Table 2-17 summarizes the results for the entire system.



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**Table 2-17**  
**State of Hawaii Inmate Population Projections**  
*(all inmates)*

ASSIGNED COUNTS	Actual	ADP BY FISCAL YEAR (ending June 30th)									
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Prison</b>											
Males	3,130	3,304	3,452	3,601	3,750	3,898	4,047	4,196	4,344	4,493	4,642
<b>Women's CCC</b>											
Prison Females	365	403	430	457	483	510	537	564	592	620	648
Jail Females (if retained)	37	47	48	48	48	49	49	49	50	50	50
<b>Jails</b>											
Hawaii CCC		408	425	443	462	481	501	522	543	565	587
Males	363	333	346	360	375	391	406	423	440	458	476
Females	67	75	79	83	87	91	95	99	103	107	111
Kauai CCC		189	196	203	210	217	224	231	238	246	254
Males	122	153	157	162	166	171	176	180	185	190	196
Females	29	36	39	41	43	46	48	51	53	56	58
Maui CCC		485	506	527	547	567	587	606	628	649	670
Males	311	408	423	437	452	466	480	494	509	524	539
Females	63	78	83	89	95	101	107	113	119	125	131
Oahu CCC		1273	1296	1318	1340	1361	1382	1403	1425	1447	1469
Males	1,059	1,164	1,183	1,201	1,220	1,238	1,255	1,273	1,291	1,310	1,328
Females	111	109	113	116	120	123	127	130	134	138	141
<b>TOTALS:</b>											
<b>Prison</b>	<b>3,495</b>	<b>3,707</b>	<b>3,882</b>	<b>4,058</b>	<b>4,233</b>	<b>4,408</b>	<b>4,584</b>	<b>4,759</b>	<b>4,936</b>	<b>5,113</b>	<b>5,290</b>
Males	3,130	3,304	3,452	3,601	3,750	3,898	4,047	4,196	4,344	4,493	4,642
Females	365	403	430	457	483	510	537	564	592	620	648
<b>Jail</b>	<b>2,162</b>	<b>2,403</b>	<b>2,471</b>	<b>2,539</b>	<b>2,606</b>	<b>2,675</b>	<b>2,743</b>	<b>2,811</b>	<b>2,884</b>	<b>2,957</b>	<b>3,030</b>
Males	1,855	2,058	2,110	2,161	2,213	2,265	2,318	2,370	2,426	2,482	2,539
Females	307	345	361	377	393	409	425	441	458	475	491
<b>SYSTEM TOTAL</b>	<b>5,657</b>	<b>6,110</b>	<b>6,353</b>	<b>6,596</b>	<b>6,839</b>	<b>7,083</b>	<b>7,327</b>	<b>7,571</b>	<b>7,820</b>	<b>8,069</b>	<b>8,320</b>

Source: Calculations by Carter Goble Associates. October 2003.

**PSD Internal Projections Comparison** - The State of Hawaii PSD revises their population projections on an annual basis. In September 2003 the Department completed their Jail Population Projections by Jurisdiction through the year 2010. At the same time a separate Sentencing Simulation Model Project (SSMP) was also completed statewide prison population projections.

The difference between the PSD's results and this Master Plan's projections are not significant with the Master Plan being somewhat lower than the PSD. The PSD's projected prison male population for the year 2010 is for 4,596 inmates and for the same year the Master Plan projects a total of 4,196. For the female prison population, however, the PSD projects a total of 494 compared to the Master Plan's projection for 564. The grand total prison population projection for this Master Plan is for 4,759 inmates compared to the PSD projected total of 5,090 for 2010.

The PSD's jail projected population for 2010 is for 2,569 (2,229 males and 340 females) inmates, which is lower than the results in this Master Plan which project a total of 2,811 inmates (2370 males and 441 females). Note that the State's are head counts and the results of this Master Plan are assigned counts (higher counts since they include head counts plus out-counts).

System-wide the 2010 grand total CF + CCC projected population counts for each of the two sets are 7,659 by the PSD and 7,571 by this Master Plan Update. The State's head count results (by



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custody and jurisdiction) are summarized in Table 2-17. This Master Plan Update addresses security level allocations, plus the conversion of ADP population projections to the number of beds needed to accommodate the ADP.

**Table 2-18**  
**Statewide Population Projections – Head Count Only**  
**(SSMP for CFs and PSD for CCCs)**

CUSTODY GROUP	PROJECTED POPULATION BY FISCAL YEAR (ending June 30th)						
	2004	2005	2006	2007	2008	2009	2010
<b>Correctional Facilities</b>							
<b>Males</b>							
Maximum	36	39	41	42	44	45	46
Close	217	234	244	255	262	270	276
Medium	1,661	1,791	1,871	1,951	2,009	2,071	2,114
Minimum	1,516	1,635	1,709	1,782	1,834	1,891	1,930
Community	181	195	203	212	218	225	230
<b>CF MALE TOTALS</b>	<b>3,611</b>	<b>3,894</b>	<b>4,068</b>	<b>4,242</b>	<b>4,367</b>	<b>4,502</b>	<b>4,596</b>
<b>Females</b>							
Maximum	4	5	5	5	5	5	5
Close	4	5	5	5	5	5	5
Medium	207	212	218	213	215	223	232
Minimum	136	140	144	140	142	147	153
Community	88	90	93	91	92	95	99
<b>CF FEMALE TOTALS</b>	<b>439</b>	<b>452</b>	<b>465</b>	<b>454</b>	<b>459</b>	<b>475</b>	<b>494</b>
<b>TOTAL CF</b>	<b>4,050</b>	<b>4,346</b>	<b>4,533</b>	<b>4,696</b>	<b>4,826</b>	<b>4,977</b>	<b>5,090</b>
<b>CCCs</b>							
<b>Males</b>							
Hawaii	281	290	296	303	307	312	316
Kauai	102	107	109	112	115	118	122
Maui	273	281	289	296	301	307	312
Oahu	1,305	1,345	1,377	1,408	1,432	1,458	1,479
<b>CCC MALE TOTALS</b>	<b>1,961</b>	<b>2,023</b>	<b>2,071</b>	<b>2,119</b>	<b>2,155</b>	<b>2,195</b>	<b>2,229</b>
<b>Females</b>							
Hawaii	46	47	47	47	48	49	50
Kauai	19	19	20	20	21	21	21
Maui	51	51	53	52	54	54	55
Oahu	195	200	203	202	205	208	214
<b>CCC FEMALE TOTALS</b>	<b>311</b>	<b>317</b>	<b>323</b>	<b>321</b>	<b>328</b>	<b>332</b>	<b>340</b>
<b>TOTAL JAIL</b>	<b>2,272</b>	<b>2,340</b>	<b>2,394</b>	<b>2,440</b>	<b>2,483</b>	<b>2,527</b>	<b>2,569</b>
Total All Male	5,572	5,917	6,139	6,361	6,522	6,697	6,825
Total All Female	750	769	788	775	787	807	834
<b>SYSTEM TOTAL</b>	<b>6,322</b>	<b>6,686</b>	<b>6,927</b>	<b>7,136</b>	<b>7,309</b>	<b>7,504</b>	<b>7,659</b>

Source: Sentencing Simulation Model Project (SSMP) for prison population projections, PSD for jail population projections.  
September 22, 2003.



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**At-Risk Age Group Alternative Prison Projections** – The at-risk age cohort is defined as the individuals between the ages of 18 and 24 and is often used as a basis for projections since it focuses on that segment of the population which historically has the highest rate of criminal involvement. Using this smaller population definition a set of alternative ADP projections for the prison populations (male and female) were developed. Similar alternative scenarios could not be developed for the Counties since age-cohort data was not readily available by county. The difference in the results for this model was not that significant since only Model 3-Projected Incarceration Rate was dependent upon the growth of the general population (at-risk population in this case). Tables 2-19 and 2-20 present the results from alternative Model 3.

**Table 2-19**  
**Alternative Male Prison Population Projections**

Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Model 1 - ADP Historical % Growth	3,484	3,837	4,191	4,544	4,898	5,251	5,605	5,958	6,312	6,666
Males	3,484	3,837	4,191	4,544	4,898	5,251	5,605	5,958	6,312	6,666
Model 2 - ADP Linear Regression	3,379	3,539	3,698	3,858	4,018	4,178	4,337	4,497	4,657	4,816
Males	3,379	3,539	3,698	3,858	4,018	4,178	4,337	4,497	4,657	4,816
Model 3 - Projected IR	3,564	3,774	4,014	4,261	4,515	4,777	5,046	5,286	5,531	5,781
Males	3,564	3,774	4,014	4,261	4,515	4,777	5,046	5,286	5,531	5,781
Projected Population (At-Risk only)	99,425	101,478	104,150	106,822	109,493	112,165	114,837	116,719	118,601	120,483
Projected Male IR	358	372	385	399	412	426	439	453	466	480
Model 4 - Rate to Projected ADM	3,147	3,281	3,415	3,549	3,683	3,817	3,952	4,086	4,220	4,354
Males	3,147	3,281	3,415	3,549	3,683	3,817	3,952	4,086	4,220	4,354
Projected Male ADM	1,541	1,607	1,672	1,738	1,804	1,869	1,935	2,001	2,067	2,132
2002 Male LOS	745.4									
Model 5 - Rate to Projected ADM	3,228	3,366	3,504	3,641	3,779	3,916	4,054	4,192	4,329	4,467
Males	3,228	3,366	3,504	3,641	3,779	3,916	4,054	4,192	4,329	4,467
Projected Male ADM	1,541	1,607	1,672	1,738	1,804	1,869	1,935	2,001	2,067	2,132
5-Year Avg. Male LOS	764.7									
<b>RECOMMENDED MODEL - Average of Models: 2, 3 &amp; 5</b>										
Prison-Males	3,390	3,560	3,739	3,920	4,104	4,290	4,479	4,658	4,839	5,022
Males	3,390	3,560	3,739	3,920	4,104	4,290	4,479	4,658	4,839	5,022

Source: Calculations by Carter Goble Associates. October 2003. Revised November 26.

The difference between the results for Model 3 presented earlier and in Table 2-19 is an increase of 656 (5781 vs. 5125) for 2013. The overall difference for the recommended models is 380 (5022 vs. 4642). The original model resulted in a 48% growth in the male prison population over the ten year horizon, whereas the results of the alternate model in Table 2-17 has a 60% growth over the same ten year period.

The female population at WCCC resulted in an increase of 83 ADP (or 781 vs. 698) from the earlier results. The difference between the original Model 3 and the revised Model 3 is an increase of 247 (966 vs. 719). In percentages, the original model growth of 74% for the WCCC population increased to 94% with the alternative projection as shown in Table 2-20.

In light of the State’s historic relatively low incarceration rate compared to other states it is the consultant’s recommendation to use the original projections as the basis for the 10-Year Master Plan Update at this time. If in future years the State is not able to maintain the use of diversion and alternative or secondary sanctions to the level that it has historically then staff responsible for the



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PSDs annual projections may want to consider using the higher results that are derived from the use of an age-cohort projection model.

**Table 2-20**  
**Alternative Female Prison Population Projections**

Projections	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Model 1 - ADP Historical % Growth	<b>506</b>	<b>610</b>	<b>715</b>	<b>819</b>	<b>923</b>	<b>1,027</b>	<b>1,132</b>	<b>1,236</b>	<b>1,340</b>	<b>1,444</b>
Prison Females	470	575	680	785	890	995	1,100	1,205	1,310	1,415
Jail Females	36	35	35	34	33	32	32	31	30	29
Model 2 - ADP Linear Regression	<b>441</b>	<b>466</b>	<b>492</b>	<b>517</b>	<b>542</b>	<b>567</b>	<b>593</b>	<b>618</b>	<b>643</b>	<b>669</b>
Prison Females	396	421	446	471	496	521	546	571	596	621
Jail Females	46	46	46	46	46	47	47	47	47	47
Model 3 - Projected IR	<b>527</b>	<b>570</b>	<b>620</b>	<b>671</b>	<b>724</b>	<b>779</b>	<b>835</b>	<b>878</b>	<b>922</b>	<b>966</b>
Prison Females	472	514	562	612	663	717	772	815	858	902
Jail Females	55	56	58	59	60	62	63	64	64	64
Projected Population (At-Risk only)	98,765	100,287	102,772	105,258	107,743	110,229	112,714	113,285	113,855	114,426
Projected Prison Fem. IR	48	51	55	58	62	65	68	72	75	79
Projected Jail Fem. IR (2000 Level)	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6	5.6
Model 4 - Rate to Projected ADM	<b>472</b>	<b>501</b>	<b>530</b>	<b>558</b>	<b>587</b>	<b>616</b>	<b>644</b>	<b>673</b>	<b>701</b>	<b>730</b>
Prison Females	421	449	477	506	534	562	590	618	647	675
Jail Females	51	52	52	53	53	54	54	54	55	55
Projected Prison Fem. ADM	334	356	378	401	423	445	468	490	513	535
Projected Jail Fem. ADM	298	301	303	306	308	310	312	314	316	318
2002 Prison Female LOS	460.5									
2002 Jail Female LOS	63.0									
Model 5 - Rate to Projected ADM	<b>457</b>	<b>485</b>	<b>513</b>	<b>541</b>	<b>569</b>	<b>597</b>	<b>624</b>	<b>652</b>	<b>680</b>	<b>708</b>
Prison Females	410	438	465	493	520	548	575	602	630	657
Jail Females	47	48	48	48	49	49	49	50	50	50
Projected Prison Fem. ADM	334	356	378	401	423	445	468	490	513	535
Projected Jail Fem. ADM	298	301	303	306	308	310	312	314	316	318
5-Year Avg. Prison Fem. LOS	448.6									
5-Year Avg. Jail Fem. LOS	57.8									
<b>RECOMMENDED MODEL - Average of Models: 2, 3 &amp; 5</b>										
<b>Womens CCC</b>	<b>475</b>	<b>507</b>	<b>541</b>	<b>576</b>	<b>612</b>	<b>648</b>	<b>684</b>	<b>716</b>	<b>748</b>	<b>781</b>
Prison Females	426	457	491	525	560	595	631	663	695	727
Jail Females	49	50	51	51	52	53	53	53	54	54

Source: Calculations by Carter Goble Associates. October 2003. Revised November 26.

**BEDSPACE PROJECTIONS**

**Peaking Factor** - As stated earlier the second stage of the capacity needs projection process is the determination of the number of beds necessary to meet forecast demands. The ADP counts alone do not account for day-to-day fluctuations in the inmate count. Prison populations do not fluctuate significantly as those inmates have sentences longer than one year. However, jail populations which include pretrial and sentenced inmates tend to fluctuate much more so. To guard against a shortfall of beds during those periods when a jail's population exceeds the average, a peaking factor is utilized. Peaking is determined by taking an average of those months (within a single year) that exceed the ADP for that year. The peaking rate is the percentage difference of the peaking number and ADP. Jail ADP data was obtained from PSD on a monthly basis for FY2002, FY2003, and the first three months of FY2004. The peaking for the four CCC facilities (by gender) was calculated as the average for FY2002, FY2003, and the first quarter of FY2004.



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Table 2-21 provides the resulting peaking percentages by facility for this Master Plan Update and shows the peaking factors used in the 1991 Master Plan for comparison. Peaking factors used in the 1991 Master Plan were higher than those used in this Update.

**Table 2-21**  
**Peaking Factors for the Jail Populations**

<b>PEAKING FACTORS</b>	<b>1991<sup>1</sup></b>	<b>2003<sup>2</sup></b>
<b>Jails</b>		
Hawaii CCC		
Males	20%	4%
Females	20%	9%
Kauai CCC		
Males	25%	6%
Females	25%	21%
Maui CCC		
Males	10%	8%
Females	10%	11%
Oahu CCC		
Males	5%	6%
Females	-	13%

Source: Public Safety Department. Calculations by Carter Goble Associates. October 2003.

<sup>1</sup> Peaking factor was the average of the four year period peaking factors for 1986-89.

<sup>2</sup> Peaking factor was the average of the two year period peaking factors for FY2002-03 and the first quarter of FY2004.

**Classification Factor** - Bedspace needs also include a “classification factor,” which estimates additional beds needed to permit inmate movement and separations from one housing pod or unit to another. Since designated units (maximum, minimum, mental health, etc.) are needed for custody, programming and treatment separation requirements, the addition of a classification factor help provide enough beds to create logical and properly sized housing pods and units. The availability of additional bedspaces in each unit permits inmates to be classified and placed where they best fit, rather than where there is room. These beds contribute to the security and stability in the facility, by permitting inmate placement and movement as deemed necessary by staff and the classification instrument’s results for rating each inmate’s risk and needs. Thus, in addition to the peaking factor added to the jail populations, a 5% classification factor has been added to both prison and jail population subgroups to derive the estimated future bedspace needs.

Table 2-22 below provides the results of the bedspace needs computations for each of the inmate population subgroups by year based on historic facility assignments.



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**Table 2-22**  
**Estimated Operational Capacity Bedspace Needs**

BEDSPACE NEEDS	Peaking and Classific.	BEDS BY FISCAL YEAR (ending June 30th)									
		2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>CFs</b>											
Males	5%	3,469	3,625	3,781	3,937	4,093	4,249	4,405	4,562	4,718	4,874
<b>Women's CCC</b>											
Prison Females	5%	423	451	479	507	535	564	592	621	651	680
Jail Females	5%	50	50	50	51	51	51	52	52	53	53
<b>CCCs</b>											
Hawaii CCC		448	468	487	508	529	551	574	597	621	645
Males	9%	363	377	393	409	425	443	461	480	499	519
Females	14%	86	90	95	99	104	108	113	117	122	126
Kauai CCC		215	223	231	239	247	255	263	272	281	290
Males	11%	169	174	179	184	189	195	200	205	211	217
Females	26%	46	49	52	55	58	61	64	67	70	73
Maui CCC		553	577	600	623	646	669	691	715	739	763
Males	13%	463	480	496	513	529	545	561	578	595	612
Females	16%	90	97	104	110	117	124	131	138	145	152
Oahu CCC		1,425	1,450	1,475	1,499	1,523	1,547	1,571	1,596	1,620	1,645
Males	11%	1,295	1,316	1,337	1,357	1,377	1,397	1,416	1,437	1,457	1,477
Females	18%	129	134	138	142	146	150	154	159	163	167
<b>TOTALS:</b>											
<b>CFs</b>		<b>3,892</b>	<b>4,076</b>	<b>4,260</b>	<b>4,445</b>	<b>4,629</b>	<b>4,813</b>	<b>4,997</b>	<b>5,183</b>	<b>5,368</b>	<b>5,554</b>
Males		3,469	3,625	3,781	3,937	4,093	4,249	4,405	4,562	4,718	4,874
Females		423	451	479	507	535	564	592	621	651	680
<b>CCCs</b>		<b>2,691</b>	<b>2,767</b>	<b>2,843</b>	<b>2,920</b>	<b>2,996</b>	<b>3,073</b>	<b>3,150</b>	<b>3,232</b>	<b>3,314</b>	<b>3,396</b>
Males		2,290	2,348	2,405	2,463	2,521	2,579	2,637	2,699	2,762	2,825
Females		401	419	438	457	476	494	513	533	552	572
<b>SYSTEM TOTAL</b>		<b>6,583</b>	<b>6,843</b>	<b>7,104</b>	<b>7,364</b>	<b>7,625</b>	<b>7,886</b>	<b>8,148</b>	<b>8,415</b>	<b>8,682</b>	<b>8,951</b>

Source: Calculations by Carter Goble Associates. October 2003.

Adding the peaking and classification factors gives a total approximate need for 7,625 operational beds by the year 2008, of which 4,629 are prison beds (4,093 male and 535 female), and 2,996 are jail (2,521 male and 476 female). By 2013 the system will have an approximate need for 8,951 beds of which 5,554 will be prison beds (4,874 male and 680 female), and 3,396 jail beds (2,825 male and 572 female).

Historic data on prisoners' legal status (pre-trial, sentenced, misdemeanor, felony, etc.) and recent custody groupings are used in Chapter 3, as a means for estimating the number of beds needed by security level by facility. Those projections are used as a basis to develop a 10-year master plan to meet projected capacity needs over two 5-year planning and implementation phases from 2004 to 2008 and 2009 to 2013.

**ALTERNATIVES**

Both the consultant and PSD staff have independently developed future correctional population projections and resulting bed space requirements that exceed the State's projected rate of overall population growth. Historically the State's population grew by 8.9% from 1990 to 2000, whereas its



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prison population grew by 95% for the same decade. By 2010 the State's total population is projected to grow at a slightly slower rate of 6.5%.

Both projections show a significant reduction in the rate of prisoner growth for the next 10 years to between 47.7% and 49.4% respectively. While these rates are approximately half the growth rate of the 1990s they will still require a major increase in the correctional system capacity for between 1,900 and 2,000 more inmates by 2010 than the average number held in FY2003. Moreover, if the goal of returning all 1,400 Hawaii prisoners currently held in mainland prisons is to be achieved by 2013 the system expansion needs are that much more than its natural growth.

Although it is beyond the scope of this facility master plan update a compelling question is could Hawaii implement more systemic alternatives to incarceration to significantly reduce the need for secure beds? If no major changes in the State's law enforcement practices, sentencing laws, or substantially greater use of community-based punishment/treatment/supervision alternatives are possible then the projections show what the magnitude of need is likely to be for secure jail and prison capacity. The projections herein and by PSD staff both utilize a variety of historic data and different variables, which result in a significantly reduced growth rate for incarceration than in the 1990s, but do not assume that more fundamental changes in public safety policy and law enforcement would be made to cause an even further reduction in the projection outcomes. Such a reduction would require efforts and change that go beyond the control of the PSD and its correctional system, which is only the "receiver" of the decisions made within law, public policy, law enforcement, criminal process and the courts.

It is important to note that Hawaii compares very favorably to the average incarceration rate for all 50 states as well as for those 11 states with populations under 2 million. Available comparative incarceration rates for other states (number of sentenced prisoners per capita) indicate that Hawaii uses prison confinement much less on a per capita basis than most other states as follows:

<b>State-sentenced Prisoners per 100,000 Population</b>	<b>1995</b>	<b>2001</b>
Hawaii	151	269
50-state Average	311	373
11-state Average (under 2 million pop.)	245	291

Source: The 2001 Corrections Yearbook, Criminal Justice Institute, Inc.

This statistical comparison indicates that historically Hawaii has tended to utilize diversion and alternative sanctions to a much greater degree than most other states including those similar in size. Although Hawaii has clearly done more than most states in this regard the cost of more jail and prison capacity is an incentive to continue to improve both the coverage and effectiveness of alternatives for pre-trial diversion and offender supervision as well as the choice of community-based treatment and rehabilitative options for non-violent adjudicated offenders. Obviously the State needs to continue such efforts in light of the projection results, which would be even greater if diversions and alternative sanctions were not used as much as possible.

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			<b>3</b>	Capital Improvements Plan
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**Chapter 3  
CAPITAL IMPROVEMENTS PLAN**

**SCOPE AND INTRODUCTION**

This Chapter provides an updated 10-Year Capital Improvements Plan for the entire PSD correctional system that would need to be implemented in order to meet the goals of accommodating both the 1,400 Hawaii prisoners now in mainland prisons as well as the projected growth in prisoners for the next 10 years. This update was also requested to assess the need for a “secure treatment facility” on the Island of Hawaii within the context of the total correctional system. Also, the update is intentionally limited in focus on correctional facility capital improvement needs and does not include an equivalent update of the management and operations plan as was done in 1991 under a much longer schedule and more extensive scope of work. A limited review of the elements included in Chapters 1 and 3 of the 1991 plan is contained in Appendix B only to suggest potential changes to consider within the context of this facilities plan update.

In order to assess the need for any new facility the entire system of existing facilities must be evaluated in relation to the projected needs from Chapter 2. The Capital Improvements Plan begins by updating the status, assessing the conditions of and providing general improvement recommendations for the system’s existing facilities. In the 1991 Corrections Master Plan the Capital Improvements Plan section (Chapter 4) provided an evaluation and Action Plan Recommendations of the then existing eight correctional facilities under their official names at that time as follows:

**State Prisons**



Halawa Special Needs Correctional Facility - Oahu



Halawa Medium Security Correctional Facility - Oahu



Kulani Correctional Facility – Hawaii



Waiawa Correctional Facility – Oahu

**County-Based Jails**



Hawaii Community Correctional Center



Kauai Community Correctional Center



Maui Community Correctional Center



Oahu Community Correctional Center

In 1991 the Women’s Community Correctional Center on Oahu was the subject of litigation while the Department was in the process of negotiating a consent judgment to relocate the facility and decided that it should thus be excluded from the Master Plan at that time. The total operating capacity of the correctional system as found in the 1991 Master Plan (prisons and jails – CFs and CCCs) was 2,473 beds, whereas today the system’s official operating capacity used by the PSD as of this study in October 2003 is 3,473. This latter number is derived from each facility in the Department’s Capacity Study completed in 2001, which then included the Women’s Community Correctional Center. The Capacity Study established quantitative objective capacity ratings based



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on American Correctional Association Physical Plant Standards for each facility that are valid today and are thus an important data base used in this Master Plan Update.<sup>1</sup>

The results of the Department's Capacity Study provide a telling comparison to the actual population counts in the facilities today and confirms the degree to which the entire system is overcrowded. Compared to the PSDs rating of a 3,473-bed capacity, the average annual inmate population from end-of-month "head count" for the fiscal year 2002/03 was 3,857. This means that on average the system operated at 111% of its rated throughout FY2003. *By way of comparison professional practice standards as well as many state prison systems and local jails consider themselves to be full when they reach 95% of their rated capacity in order to allow for standard custody separations, periodic admission fluctuations and daily movements.* Moreover, as is shown later in this chapter the consultant team established a current (October 2003) operating capacity rating of 3,369 beds, which is less than the PSDs 2001 rating, primarily due to our recommendation that the Halawa Special Needs CF needs to be abandoned as soon as possible due to its inadequate conditions. This facility was recommended for replacement in the 1991 master plan and its conditions are only worse today.

To make matters worse the "head count" number does not include the total "assigned count" that includes an additional annual average of another 1,679 Hawaii sentenced inmates who are in the daily "out-count" for all facilities, meaning that they are at temporarily at another location. Today approximately 1,400 of the 1,679 "out-count" prisoners are currently housed in various prisons in mainland states due to lack of space in Hawaii facilities. *Clearly the Hawaii corrections system has reached a level of capacity need that is well beyond the combined capability of its existing facilities.*

#### **FACILITY STATUS, FUNCTIONAL AND CAPACITY CHANGES SINCE 1991**

Following is a summary overview of the major functional and capacity differences found by the consultant's facility inspections in the fall of 2003 for each existing correctional facility as compared to their status and conditions in 1991.

**Women's Prison** – Due to the pending litigation in 1991 against the State regarding conditions of confinement for women the then temporary Women's Community Correctional Center (originally a 1952 juvenile corrections facility) was remodeled and completed in 1994 as the State's primary women's all-custody facility. While the other four County-based Community Correctional Centers both then and now housed pre-trial and locally sentenced females the WCCC is the system's main facility for women and was thus included in the site visits for this update. Any female prisoner who presents a significant management, security or healthcare risk at



<sup>1</sup> Capacity Analysis Study, Hawaii Corrections Population Management Commission, 2001. Since it complies with the ACA physical plant standards for both Adult Correctional Institutions and Adult Local Detention Facilities the results of this study have been used in this master plan update as the source for the official operating capacity of all existing facilities.



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the County CCCs is usually transferred to the WCCC. With the first temporary remodeling in 1991 the facility began with 150 operational beds. In the Department's 2001 Capacity Study the WCCC has a rated capacity by housing and food service of 260 beds; 306 beds by infrastructure; and 232 beds by health care for an overall rating of 232 beds. For fiscal year 2002/03 the facility averaged 324 inmates, which exceeds total rated capacity by 40%.

**Male Prisons** – In October 2003 three male prisons (Halawa Special Needs CF, Kulani CF, and Waiawa CF) provided substantially different correctional functions than they did in 1991. Only the Halawa Medium Security CF was operating similarly to its 1991 mission as a general population medium security prison. In total the combined operating capacity of all four facilities used by the PSD had increased from 1,365 operational beds in 1991 to 1,632 operational beds in 2003. *While the Halawa Special Needs CF had 132 beds used regularly in 2003 the consultant does not consider these beds to be adequate as already noted and are recommended to be abandoned and demolished as soon as possible.*



Excluding the Halawa SNCF 132 beds leaves a rated operating capacity of 1,500 operational male beds, which held an average of 1,795 inmates for fiscal year 2002/03. This average population count is approximately 20% above the total rated capacity of the three facilities combined. Even if the Halawa SNCF 132 beds are included the male facilities still operated at 10% above their combined total capacity.

- Halawa Medium Security CF – It is still the newest and largest prison facility in the system. As was the case in 1991 it is still double-bunked although the original design plans were intended for single bunks to accommodate both medium and maximum custody inmates and allow for 23-hour lockdown. Fortunately the cells were sized at 80 square feet, which is suitable for double-bunking in addition to single bunking and 23-hour confinement. In the Department's 2001 Capacity Study the facility is rated for 992 operational beds, 14 medical beds, plus 44 temporary management cells in its housing. For fiscal year 2002/03 the facility averaged 1,124 inmates, which is more than 13% above its rated capacity.
- Halawa Special Needs CF – Although it is actually a unit under the same command on the same site as the Halawa Medium Security Facility, the Special Needs Facility provides a unique function for the total system. Whereas in 1991 it was known as the High Security Facility designated for high-security risk inmates and the reception and diagnostic function, today its mission is as a Special Needs Facility to include the mentally disordered, close custody, protective custody and parole violators. The R&D function is now contained in a 15-cell pod at Module 1 in the Medium Security Facility. The Special Needs Facility has a 132-bed operational capacity rating, plus 12 temporary management cells. It is dependent on the infrastructure built as part of the Medium Security Facility. For fiscal year 2002/03 the facility averaged 154 inmates, almost 17% above its rated capacity.
- Kulani CF – This minimum security facility remotely located on Hawaii about 20 miles up the Mauna Kea slope from Hilo is very similar to its general physical conditions in 1991 having the same capacity rating of 160 beds. In 1991 Kulani was an honor camp for inmates who were nearing a release date. Today Kulani serves as the system's primary sex offender treatment facility and has a waiting list for those who are in other prisons awaiting a



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treatment slot opening at Kulani. For fiscal year 2002/03 the facility averaged 193 inmates for about 21% more than its rated capacity.

- Waiawa CF - This minimum security facility is located on central Oahu surrounded by large tracts of undeveloped lands that are reportedly trending towards higher economic values from nearby residential and commercial land conversion moving in this direction. Whereas its mission focus in 1991 was on extensive education and vocational training for misdemeanants the implementation of a therapeutic community that year began a change in focus to become a drug treatment facility. The KASHBOX treatment community started in 1991 has become the “heart” of the system’s drug treatment program for convicted felons. In 1998 Waiawa was expanded from its 1991 operating capacity of 134 beds to 348 beds by the addition of two 100-bed dormitories dedicated to the KASHBOX treatment program. For fiscal year 2002/03 the facility averaged 324 inmates making it the only facility to have operated below its rated capacity by about 7%.

**Community Correctional Centers** – As was the case in 1991 the four Community Correctional Centers (CCC’s) still provide the customary county jail function of managing both pre-trial detainees and locally-sentenced misdemeanor offenders and others with a sentence of one year or less. They also provide an important pre-release preparation/transition function for prison system inmates who are transferred back to their county of origin when they have less than a year until scheduled release. Most of these former prison inmates are transferred to a dedicated work furlough unit where they are able to begin working in the community either on supervised work crews or in individual placements as determined by needs and classification assessments and individualized pre-release plans.



Their concept and mission was originally defined in the 1973 Hawaii Corrections Master Plan that resulted in the construction of a CCC in each of the four counties. Consequently, all four share some common original facility design elements that were considered to be appropriate at the time. *One of those commonalities, however, unfortunately is the subdivision of the original secure housing building into very small operationally inefficient units of 3-, 4- or 6-cell clusters. Contemporary designs provide for much larger units (usually 48 to 64 beds each for general population minimum or medium security) that allow many more inmates to be supervised per officer.*

In 1991 the combined operational bed capacity of the four CCC’s was 958, whereas in the Department’s 2001 Capacity Study the same facilities have a combined rated operational capacity of 1,609. With the system’s overcrowding today’s operational capacity of 1,609 beds held an average of 1,777 inmates for fiscal year 2002/03, which is 10% above the total rated capacity of all four facilities combined.

- Hawaii CCC – The original facility opened as a 22-bed facility in 1975 is located in a neighborhood in Hilo and has been expanded substantially since then to be a 226-bed facility. Unlike other CCCs it has a Work Furlough Center remotely located on a site outside of Hilo that was conceived as a possible future location for the entire HCCC. The CCC was



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sited next to the old County jail in a Hilo location that was not then surrounded by residences and schools as it is today. Consequently, local leadership and the Department have discussed the possibility of eventually relocating the facility to an outlying area that would not be at conflict with surround development. The Hali Nani Work Furlough Center site may be a feasible alternate location provided that enough buildable land is available. For fiscal year 2002/03 the facility averaged 286 inmates, which is more than 26% above its rated capacity.

- Kauai CCC – Like the other CCCs Kauai has been expanded substantially from its original opening capacity of 12 medium security beds in 1977 to 46 beds as of the 1991 Master Plan and as of 2003 to a rated capacity of 128 beds. While its location does not conflict with any existing land uses being in an out-of-town area the DOT has completed engineering studies for a new highway corridor that could require the relocation of the facility, depending on the final alignment selected. The facility has “inherited” a number of temporary dormitory structures that are left over from a recent hurricane recovery and are still being used for correctional housing. For fiscal year 2002/03 the facility averaged 148 inmates, almost 16% above its rated capacity.
- Maui CCC – The original 18-bed design from 1978 increased to 90 operational beds by 1991 and is rated at 301 beds as of 2003. A substantial amount of construction has been completed to expand the facility from its original 2-acre site to 5 acres and in 1996/97 another 2.5 acres at the same time that both substantial medium and minimum security housing units were added. Like the Hawaii CCC the Maui CCC was sited in a location on the edge of town but over the years the town of Wailuku has grown around and beyond the CCC. Land values in the immediate area are now undoubtedly much higher than they were 25 years ago. For fiscal year 2002/03 the facility averaged 346 inmates, or 15% above its rated capacity.
- Oahu CCC – The OCCC is still the largest County jail facility in the Hawaii system and can be expected to remain so as it serves the entire Honolulu/Oahu population. From its beginning in 1975 as a part of the county-based Community Corrections system concept called for by the 1973 Master Plan at 456 beds the facility has been expanded even beyond its 16-acre site to include a Work Furlough Center a block away. It had a total operating capacity of 747 beds in the 1991 Master Plan that has reached 954 beds at the time of this study in October 2003. The design of this CCC is substantially different from the other three although it does have design elements that attempt to integrate some “normative” environmental features into a confinement facility as was the trend at the time. Essentially, it is not comparable to the contemporary secure jail designs that are more common today, such as the new Federal Bureau of Prisons Detention Center adjacent to the Honolulu Airport. Here again, like the locations of the Maui and Hawaii CCCs it is obvious that the OCCC site would have a much higher and better economic value for private sector development today than may have been the case when it was originally sited. In all likelihood the State could probably sell the land at a price that would defray a significant amount of cost for building a replacement facility. For fiscal year 2002/03 the facility averaged 997 inmates, or almost 5% above its rated capacity.



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**Summary** – With the total system of prison and jail facilities regularly operating at 111% of its rated capacity and still not even housing another 1,400 sentenced Hawaii prisoners sent to mainland facilities, the system is in critical condition. While some facilities have higher degrees of crowding than others, the general physical plant conditions, safety and security conditions found during this update study only further exacerbate a difficult situation. The staff of the PSD should be commended for being able to “keep the lid on” under these conditions and the State should be thankful to a dedicated staff that a major problem has not occurred at any crowded facility that could lead to serious legal and financial consequences.

It is clear that the degree of crowding has worsened substantially since 1991 when the total system’s “rated” capacity was 2,473 beds and the system’s head count in June 1991 was only 2,379 inmates plus an out-count of only 294 inmates and there was no reliance on renting beds in mainland prisons. The system’s reliance on “renting beds” on the mainland started in 1995 with a contract for 300 male beds that has grown to over 1,350 male and female inmates as of October 2003 . Added prisoner capacity is clearly needed in the Hawaii correctional system.

### **EXISTING FACILITIES CAPACITIES AND IMPROVEMENT RECOMMENDATIONS**

The following section contains master plan development strategy and improvement recommendations for all nine existing correctional facilities based on conditions data and information provided by the PSD staff and the consultant’s inspection of each facility. There are five categories of master plan recommendations for each facility as follows:

1. Recommended Role and Mission
2. Recommended Capacity by Custody Levels
3. Changes and Improvements Needed (A. Still a Need Since 1991 Master Plan, and B. New Needs)
4. Expansion Potential and Continued Use
5. Updated and Space Needs and Site Plan

The updates and recommendations in this section are divided into Part A, which addresses the five existing Correctional Facilities and Part B the four existing Community Correctional Centers. Following this element of the master plan update a computation of the deficit or net number of new beds needed by future years is provided as the basis for expanding existing facilities where feasible and constructing new facilities needed to meet the 10-year projections. As will be seen new facilities are recommended as replacements for the four CCCs that could be built on new sites on each Island, especially in light of the lack of expansion grounds at all but the Kauai CCC site. Also, depending on the results of the expansion potentials assessment of the five correctional facilities (CFs) new facilities are recommended where existing facility expansion is not sufficient to meet existing and projected future needs for specific custody categories.

It should be remembered that one of the goals articulated by the PSD for this master plan update is that Hawaii should plan to eventually return the approximate 1,400 Hawaii prisoners currently held in mainland prisons due to lack of capacity in Hawaii. The projected 10-year capacity needs of Chapter 2 provide one part of the objective equation for the expansion and new facility recommendations in this section while the consultant’s findings from recent staff interviews, facility



inspections and data provided by PSD staff provide the other part. A recommended 10-year implementation schedule and budget estimates are provided in the final section of this Chapter.

### **Part A – Existing Correctional Facilities**

In general with the exception of the Halawa Special Needs Facility, the State's five correctional facilities that provide the traditional prison functions for higher level sentenced offenders (felons) have remaining life and important on-going roles in a comprehensive correctional system. However, there are a number of site and/or infrastructure issues at Halawa, Waiawa and Kulani that could make expansion more costly than normal. As explained in the section on the Halawa Special Needs CF it is an obsolete facility with poor security conditions and is operationally inefficient compared to contemporary designs. It should be demolished and replaced by larger and more comprehensive special needs diagnostic and treatment facility as soon as possible. On the other hand the Halawa Medium Security Facility that covers most of the Halawa site is one of the State's most valuable correctional assets that could offer some expansion capability. Doing so would require both demolishing the Special Needs CF and acquiring some adjacent private foundation land on its eastern boundary and that water and sewer capacity expansions are financially feasible.

Although it is very old the Waiawa CF in Central Oahu plays a very important function for substance abuse treatment, which is a major need common to the vast majority of prison inmates today. Waiawa alone, however, cannot meet those needs, which need to be dealt with in all facilities at all security levels. It however, is located on land that, like three of the CCCs, is in the way of higher value land development trends, which may eventually give the State the opportunity to sell or trade the site to obtain a new site for a replacement facility. Investing in a new facility would also allow the construction of a multi-security facility design with a secure perimeter that would allow placement of a larger population to include medium custody inmates who also need substance abuse treatment instead of only those who qualify for minimum custody. Those substance abuse treatment components now located only at Waiawa CF will need to grow substantially in the coming years based on projections and thus either expansion on the existing site or elsewhere will be needed in any case.

The Kulani CF on Hawaii also plays an important role as the primary facility for sex offender treatment. Its remote location and high elevation, however, present a number of operational difficulties and extra operating costs that limit its expandability. Its remoteness also makes it very difficult for involving families on a regular basis, which is a proven important component of most viable sex offender treatment program designs. That same remoteness also makes it difficult to obtain the treatment specialists needed who currently fly over from Oahu. The location of such a treatment function would be more logical on Oahu where treatment specialists would be more readily available and where family involvement in treatment would be much more feasible.

The Women's CCC is the primary women's correctional facility for the system and thus also has important on-going supportive functions for the four CCCs that are not equipped to handle the custody needs of some female offenders. Although the facility was designed and originally operated as a juvenile correctional facility it is one of the more successful adaptations for a women's prison, due in large part to the substantial amount of indoor activity spaces that are typical for juvenile facilities. Also, the sleeping units appear to function well. Like Waiawa CF and the CCCs, however, the WCCC location on a northeast coast site is adjacent to development and



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increasing land values that could probably be sold or traded to facilitate constructing a purpose-designed women's all-custody facility on another site that has room for growth. Also, while the existing site could accommodate some growth it was reported that the local community is opposed to any capacity expansion of the WCCC. This makes for a difficult situation for the State because females continue to be the fastest growing prison subpopulation and the system's female prison capacity will require substantial growth in the coming years based on the projection results in Chapter 2.



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### Halawa Medium Security Correctional Facility



#### Recommended Role and Mission:

This podular indirect supervision facility is the system's most secure prison and has the capability to manage medium as well as maximum custody inmates by design. However, due to the need for system capacity and the associated double-bunking of all operational cells, its use is and should be restricted by practice to high-medium or close custody inmates eligible for double-bunking. *In that regard and in light of the obsolescence of the adjacent Special Needs Facility the HMSCF and the entire Hawaii system are in need of a more maximum security single-bunked cells.* Land adjacent to the east end beyond the existing recreation yard could be a logical expansion site. Similarly if the adjacent Halawa Special Needs Facility is demolished as recommended that site could also be used for a new unit or facility. The HMSCF should continue as a primary general population prison for medium, high medium and close custody inmates with major prison industries and expanded treatment programs.

#### Recommended Capacity by Custody Levels:

(992 operational beds)

- 992 operational beds for 744 medium security and 248 high-medium security (Module A) general population inmates in 496 double-bunked cells
- 44 temporary management beds in 44 single bunked cells for short- or long-term segregation
- 14 temporary management beds in medical infirmary

#### Changes and Improvements Needed:

##### B. Still a Need Since 1991 Master Plan

1. Approximately 14,000 square feet of shell space is still available under the maximum security cell block that would be suitable for correctional industries or other inmate programs.
2. Since the advent of double-bunking at this facility the support and inmate program components have remained undersized as the original design was sized for 496



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beds rather than 992. The use of the shell space as noted above would help this situation.

3. The armory location is still vulnerable at the base of one of the towers and should be relocated either just in or outside of the secure perimeter.
4. Visual supervision from the housing control rooms remains limited due to window design and bar grill placements.

**C. New Needs**

1. Insufficient routine and preventive maintenance and deferred repairs have increased HVAC repair frequency.
2. Roof leaks are reported and repairs are needed for some housing unit roofs.
3. The permanency of double-bunking has taxed all building systems requiring more frequent repairs and short system life cycles. The undersized dining room capacity requires unusually short dining times.
4. Attempt to recruit private sector industries to establish inside industries that would pay inmates at least close to a minimum wage. This concept has proven very successful in other state prisons and jails in making free world employment much more attainable upon release and in substantially reducing recidivism.
5. Some recreation yards observed had major cracking of the concrete floor.

**Expansion Potential and Continued Use:**

Capacity expansion of this facility would only be feasible by the addition of land as noted above with the accompanying expansion of space for support services and inmate programs. If the ground space of the existing Special Needs Facility was made available probably another 250 to 300 cells, plus support and activity spaces could be designed to fit that site. A similar expansion could probably be accommodated on additional land northeast of the recreation field. One of the benefits of expansion at the Halawa site is that rather than locating a new site and building a totally new free-standing prison the expansions could be units under the HMSCF command thus gaining some efficiencies in staffing, support services and infrastructure. Given the non-conflicting surrounding land use conditions and potential land availability at this area accommodating system growth here is likely to be much less objectionable than at a new site on Oahu. The limitation of the area's sanitary sewer capacity is likely to require a major capacity expansion at least in the collection lines, lift stations and main line feeding into the system from the Halawa site. If the cost of such was extremely high then locating another site on Oahu without such infrastructure limitations may be preferable for building new capacity rather than expansion on this site.

Due to the on-going quarry operation that involves periodic blasting on the hill above the Halawa site any new investment in expansion should be properly designed for such seismic disturbances.



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Updated Space Needs and Site Plan:

<b>HALAWA MEDIUM SECURITY CORRECTIONAL FACILITY</b> Hawaii Public Safety Department					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	21,226	22	18	4	<b>3,968</b>
Program Services	122,428	124	112	12	<b>11,904</b>
Support & Operations	90,062	91	120	(29)	<b>(28,768)</b>
Inmate Housing	111,232	112	200	(88)	<b>(87,296)</b>
<b>992 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(100,192)</b>

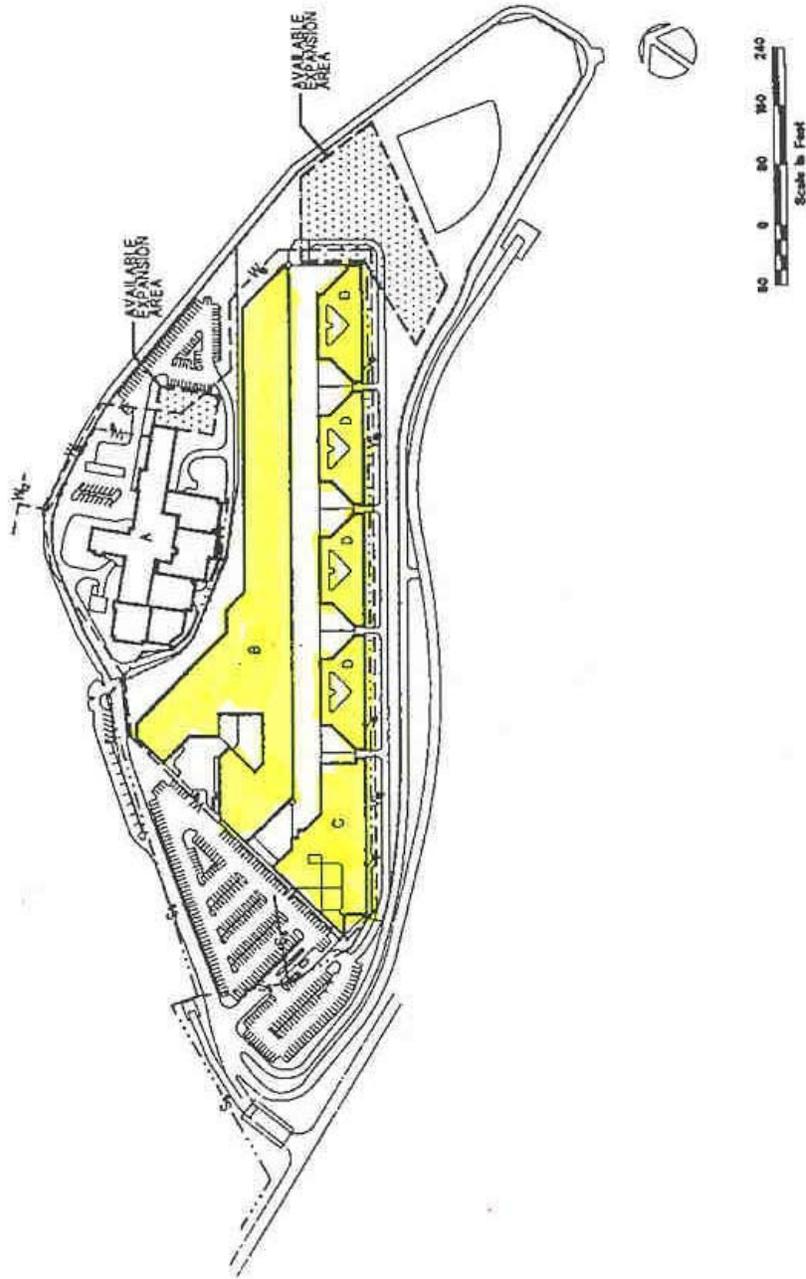
Recommendations:

- Support & Operations and Inmate Housing are both too small for the facility operating capacity. To meet recommended guidelines, Support & Operations requires an additional 28,768 GSF of area.
- Existing shell space should be considered for use by Support & Operations.



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Figure 3-1  
Halawa Medium Security Correctional Facility





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### Halawa Special Needs Correctional Facility



#### Recommended Role and Mission:

This facility has exceeded its useful and cost-effective life as a correctional facility. It should be replaced by a unit or facility that is more operationally and staff efficient with some larger housing pods, plus more effective security and control conditions typical of contemporary special needs treatment facilities and maximum security facilities. This facility should be demolished once the inmates are temporarily or permanently relocated and the site should be reused for new correctional capacity if possible. As discussed under the recommendations for the HMSCF this site could either be used to either: (1) fill the support and program space needs deficits of the HMSCF and expand its capacity; or (2) build a new secure special needs treatment facility. The current functions provided by the HSNCF (mentally disordered, violent, protective custody) would be more logically split between a correctional special needs treatment facility and a maximum security unit.

#### Recommended Capacity by Custody Levels: (132 operational beds)

As demolition is recommended as soon as possible the recommended operating capacity should be used only as long as this facility must remain open as follows:

- 48 operational beds maximum custody in single-bunked cells
- 84 operational beds medium security in double-bunked cells
- 12 temporary management beds in single-bunked cells
- 0 beds temporary management medical observation/isolation

#### Changes and Improvements Needed:

This facility is recommended for closure and demolition.

##### A. Still a Need Since 1991 Master Plan:

- A. Medical area spaces are inadequate and difficult to supervise when inmates are present unless a correctional officer is immediately present.



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- B. The cells are only large enough for single-bunking although most are double-bunked.
- C. Visual supervision capability from control rooms and cells with closed doors is totally inadequate and into dayrooms is marginal.
- D. Dayroom floor space is undersized for the number of inmates.
- E. Damaged and distorted glazing between control rooms, pedestrian sally port doors and dayrooms impairs visual supervision.
- F. Housing control room space is too small and lighting is inadequate for checking instruments/monitors and writing reports.
- G. The design of the maximum security wing and the absence of CCTV monitors does not allow control room staff to view inmates in their cells and requires officers to go to the cell to make checks, which is staff inefficient and not acceptable for high custody inmates needing continuous monitoring.
- H. The facility's vehicle entry gate lacks an interlocked sally port.
- I. The facility's parking area is not monitored from its central control room or other staff post, which should be done at any high security facility.
- J. Showers located on the lower tiers in Modules A and B cannot be visually supervised from the housing control room.

**B. New Needs:**

- 1. The cramped medical services spaces are reflective of the inability of this facility to provide a system-wide diagnostic and treatment role and capacity for special needs inmates and for any significant healthcare needs.
- 2. Reportedly the sanitary sewer system is at its maximum capacity.
- 3. Wall and floor tiles in the kitchen need repair.
- 4. The general conditions of the building and building systems are showing their age and the lack of a continuous preventive and routine maintenance program. It would appear that this facility has had a significant amount of deferred maintenance, which only increases operating cost over time.
- 5. Those cells that have an interior plumbing chase are not suitable for inmates needing a custody supervision level of high-medium or above as evidenced by a recent escape from one of those cells. From a physical security standpoint they could only be rated as medium and below due to this condition. Even then there is still an escape risk present.
- 6. Some of the cells observed lacked complete grouting in concrete joints.
- 7. The recreation yards have major cracking of the concrete floor. Reportedly this has resulted in closure of certain yards.

Expansion Potential and Continued Use:

As already discussed the HSNCF should be demolished as soon as possible and the site reused as feasible for system capacity expansion to accommodate either: (1) filling the program and support space deficits of the HMSCF and expanding its operating capacity; or (2) a new special needs treatment facility. As applicable to the Expansion Potential recommendations for the HMSCF any reuse of the Special Needs Facility site for capacity expansion would be conditioned on the area's sanitary sewer system ability to allow additional capacity in an affordable manner.



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Updated Space Needs and Site Plan:

<b>HALAWA SPECIAL NEEDS FACILITY</b> <b>Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
Component	Existing Conditions		Recommended GSF/Inmate	Surplus (Shortfall)	
	Total GSF	GSF/Bedspace		GSF/Bedspace	Total GSF
Administration	0	0	18	(18)	<b>(2376)</b>
Program Services	10,148	77	112	(35)	<b>(4,620)</b>
Support & Operations	18,948	144	120	24	<b>3,168</b>
Inmate Housing	16,272	123	200	(77)	<b>(10,164)</b>
<b>132 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(13,992)</b>

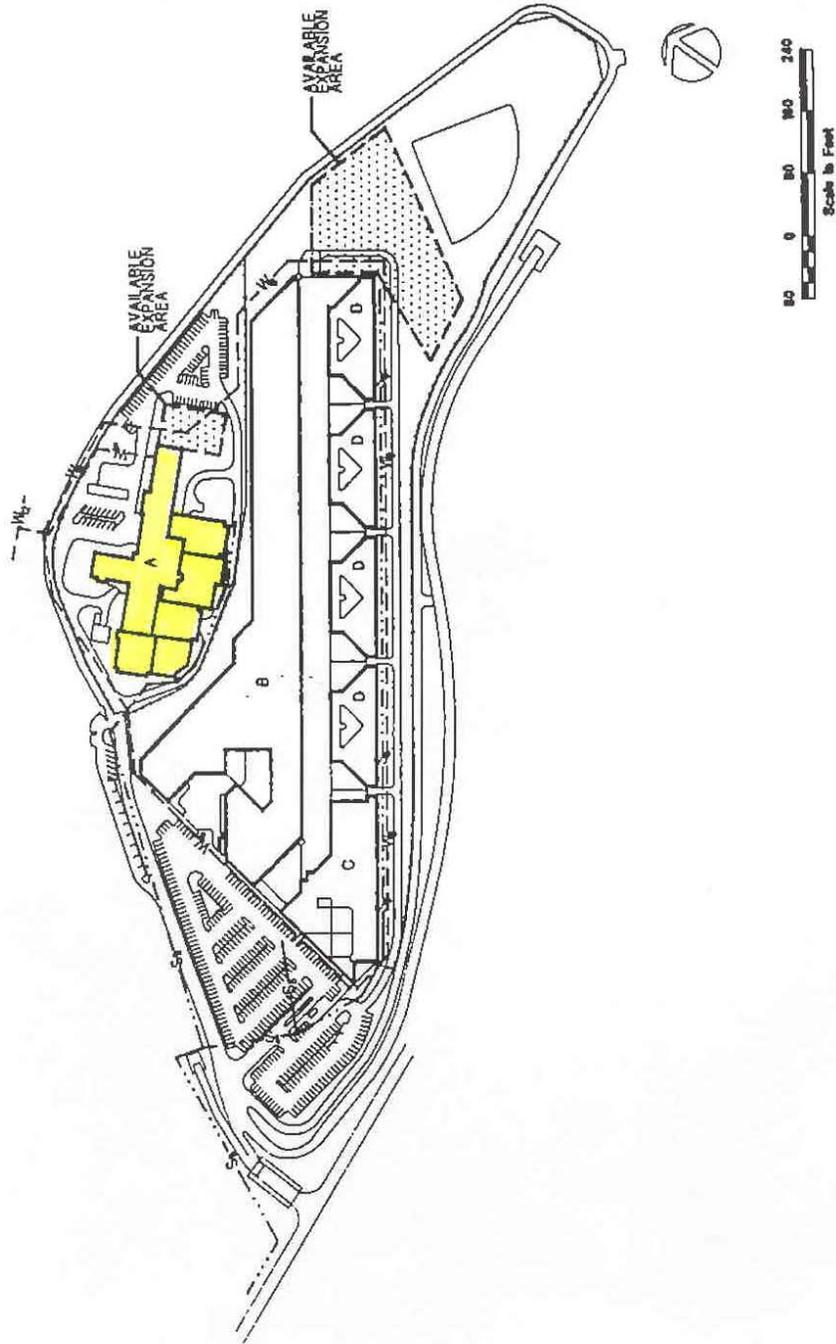
Recommendations:

- With the exception of Support & Operations, all components are undersize for the current operating capacity.
- Administration functions are centralized for this facility with those for the Halawa Medium Security Correctional Facility on contiguous property; however, at the least, a minimal satellite administrative capability should be provided locally at the SNF itself. A minimum of 2,376 GSF of space would be needed for this component.
- Because of the special needs of this inmate population, an additional 4,620 GSF of program space is required.
- The condition of this facility warrants its demolition rather than attempting to remodel and expand it for all the new spaces that would be needed to meet standards. It would be more economical to meet these needs in a new and larger special needs secure treatment facility.



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Figure 3-2  
Halawa Special Needs Correctional Facility





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### Kulani Correctional Facility



#### Recommended Role and Mission:

To the extent that this facility remains economical to maintain and operate it can continue to provide a viable minimum security work camp type of environment. At issue in this regard is the continuing extraordinary cost of water supply due to the facility's high elevation on the Island requiring the use of a combination of catchment reservoirs and tank trucks for hauling water during dry season. Its current function as the system's primary location for sex offender treatment is viable as long as the Department finds that appropriate treatment resources and programs can be made available at this remote location. However, reliance on this facility alone for sex offender treatment is not sufficient as it means that treatment is only provided to inmates eligible for minimum security and thus only near the end of their sentence. If sex offender treatment were also provided at another facility reducing the need at KCF it could increase its number of other general population inmates eligible for outside non-secure work assignments.

#### Recommended Capacity by Custody Levels: (160 operational beds)

- 160 operational beds minimum security in open dormitories without a secure perimeter
- 8 temporary management single-bunked holding cells
- 0 temporary management beds medical observation/isolation

#### Changes and Improvements Needed:

##### A. Still a Need Since 1991 Master Plan:

1. The medical services area remains undersized for waiting, medical supplies and pharmacy storage.
2. Inmate property storage is undersized for the population.
3. The dining hall does not have compliant access for fire escape and the surrounding locked fence is inappropriate for a minimum security facility.
4. The temporary holding cells lack a master key override.

##### B. New Needs:



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1. The domestic water supply and sewage treatment capacities limit the expansion potential of this facility. The Department's planned replacement of existing cesspools by 2005 would allow for up to 300 inmates at this facility, but only if the equivalent of the laundry water consumption could be eliminated. Otherwise additional catchment reservoirs would be needed. Expansion could be facilitated by arranging for the HCCC to handle this facility's laundry needs.
2. The access road to Kulani is in need of resurfacing for most of its 20-mile length except for a 2-mile stretch recently repaved by inmate work crews.
3. The use of heat pumps for heating at this facility should be evaluated for the life cycle cost savings potential of conversion to another method.

Expansion Potential and Continued Use:

Due to the relative expense of providing fresh water supply to Kulani and the extra care needed for sewage treatment its expansion capability is limited. The Department should continue to monitor the extra operating cost associated with these extraordinary requirements to help determine when the benefit/cost of continued operation would suggest that a replacement facility should be constructed at another location. As noted above, if laundry could be provided remotely such as at the HCCC in Hilo expansion could be feasible for approximately 140 more beds as has been planned by the PSD. In light of the substantial growth in the system's sex offender population the addition of capacity at this facility would be helpful as long as it remains a location for sex offender treatment.

Updated Space Needs and Site Plan:

<b>KULANI CORRECTIONAL FACILITY</b> <b>Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
Component	Existing Conditions		Recommended GSF/Inmate	Surplus (Shortfall)	
	Total GSF	GSF/Bedspace		GSF/Bedspace	Total GSF
Administration	2,125	13	18	5	<b>800</b>
Program Services	26,174	164	112	52	<b>8,320</b>
Support & Operations	40,090	291	120	171	<b>27,360</b>
Inmate Housing	16,840	105	200	(95)	<b>(15,160)</b>
<b>160 Beds of Operating Capacity</b>				<b>Total:</b>	<b>21,320</b>

Recommendations:

- Facility expansion is constrained by infrastructure limitations, especially potable water supply and waste treatment capacities.
- Construction of the education building and the library has generated additional program space, which continues to be adequate for the facility.
- Even with the demolition of the old sawmill and the warehouse, sufficient support space is provided.





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## Waiawa Correctional Facility



### Recommended Role and Mission:

Waiawa's current mission as the Department's primary substance abuse treatment facility is an important one especially with the growth in the variety and prevalence of substance abuse in the State. Based on the age of the buildings and infrastructure and land conversion trends nearby it would be logical to continue its status as a minimum security facility rather than considering a costly upgrading of the security level. However, at some future date it is likely that the market value for this land could make it advantageous for the State to sell the 192-acre site for private sector development and use the proceeds for funding the construction of a replacement facility. If such an opportunity emerged the Department should consider making Waiawa's replacement a medium security facility with an attached minimum unit so that more inmates could be given a treatment placement, rather than just those who are near the end of their sentence and/or qualified for minimum security.

### Recommended Capacity by Custody Levels:

(348 operational beds, but limited to 334 until wastewater improvements made)

- 348 operational beds minimum security in open dormitories without a secure perimeter
- 2 temporary management single-bunked cells at the facility's central control
- 2 temporary management medical observation/isolation beds in one room

### Changes and Improvements Needed:

#### A. Still a Need Since 1991 Master Plan:

1. As the original structures and some site infrastructure were built as a military reservation in the 1940s, their age and condition has deteriorated further since the 1991 study. Non-compliant fire and handicapped accessibility conditions are still widespread. Maintenance costs associated with this complex are at a relatively high level for a minimum security facility.
2. The layout of the older housing buildings makes visual supervision difficult even in a minimum security environment, which impacts overall staffing efficiency.
3. Upgrading of the sanitary sewer system would be required for any capacity expansion and to utilize the 348-bed rating instead of 334 as noted above.



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4. Internal roads need maintenance and repair.
5. Although the addition of the KASHBOX housing units included new electrical system additions making that area adequate the older area and buildings still need electrical system upgrading.

**B. New Needs:**

1. The 500 KVA generator is reportedly too small for the facility’s emergency power needs and is substantially corroded.
2. Maintaining separation of different inmate groups is a difficulty due to the layout of the facility, which further limits the classification and type of inmate suitable for placement here.

Expansion Potential and Continued Use:

Due to the combination of water and sewer infrastructure limits, facility age and condition, and the likely continued increasing land values and land conversion potential in this area, replacement at another site would be preferable to expansion. As noted above the sale or trade of this acreage could help pay for a new facility elsewhere that would also provide improved building designs, site layout and improved building operating and maintenance costs. In the event that this facility is not replaced for several years it is likely that significant capacity expansion would be essential to be able to accommodate more prisoners needing substance abuse treatment prior to release. Reliance on only one facility for treatment and only near the end of sentence is not adequate compared to a continuum of treatment throughout the prisoner’s stay as recommended in the 1991 master plan.

Updated Space Needs and Site Plan:

<b>WAIAWA CORRECTIONAL FACILITY Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	3,226	9	18	(9)	<b>(3,132)</b>
Program Services	8,683	25	112	(87)	<b>(30,276)</b>
Support & Operations	16,044	46	120	(74)	<b>(25,752)</b>
Inmate Housing	37,877	109	200	(91)	<b>(31,668)</b>
<b>348 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(90,828)</b>

Recommendations:

- All components are undersized with respect to minimum recommended GSF per inmate standards, and must be expanded to meet these standards. Specific additional areas

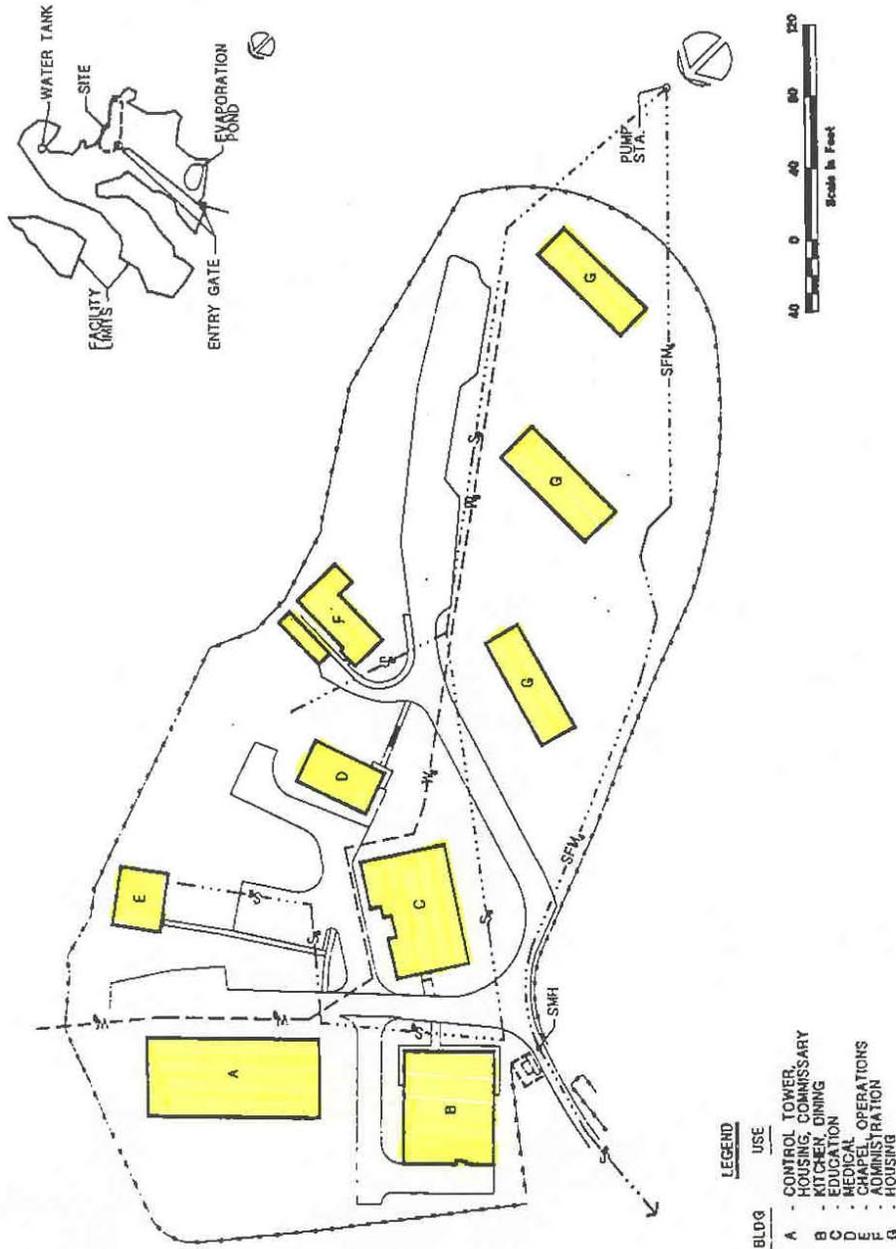


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required: Administration – 3,132 GSF; Program Services – 30,276 GSF; and Support & Operations – 25,752 GSF.

- Although there is adequate land available for expansion, infrastructure deficiencies limit growth opportunities. Infrastructure expansion/improvements would be required for any facility expansion.

Figure 3-4  
Waiawa Correctional Facility





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### Women's Community Correctional Center



#### Recommended Role and Mission:

As long as this site and facility are usable the WCCCs mission should essentially remain the same being the system's primary female correctional facility. Although the buildings were originally designed as a juvenile facility their adaptation as an adult female facility appears to have been relatively successful. Similar to some other PSD facilities land development and increasing land value trends in this northeast coast area could provide an opportunity for the State to sell or trade the 129-acre tract to help afford the cost of a new purpose-built women's facility on less valuable land. The design of a secure women's prison today has different requirements compared to juvenile or adult male correctional facilities and needs to include designated spaces for family-involved activities, treatment, mother/child bonding for new mothers with related daycare spaces, and a different type and level of medical clinic space. A transitional pre-release unit is also important for those who need such additional preparation prior to transfer to a CCC for community level supervision.

#### Recommended Capacity by Custody Levels:

(260 operational beds)

- 206 operational beds minimum security in seven dormitories
- 20 operational beds community/transitional security in one dormitory
- 12 operational beds maximum security in single-bunked cells for mentally disordered
- 22 operational beds maximum security in single-bunked cells (therapeutic community)
- 13 temporary management beds maximum security in single-bunked cells used for administrative and disciplinary segregation and protective custody
- 6 temporary management medical infirmary beds in 2 single cells and a 4-bed ward

#### Changes and Improvements Needed:

1. The original design as a juvenile has been adapted quite well within the structural limits of the existing buildings; however, the lack of dayroom/living room space adjacent to each sleeping dormitory is a disadvantage. If this facility is to remain as the State's principal women's correctional facility for several years to come then an indoor dayroom/living room



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type space should be constructed adjacent to each dorm using some of the outdoor ground space in the central courtyard of each housing building.

- The addition of a family visitation unit with a children’s play room and an efficiency apartment type arrangement with a small kitchenette should be considered as a possible addition to this facility if it is to remain as the State’s primary women’s prison for several years. Such a unit has been shown successful in other State’s (e.g. Washington’s Gig Harbor Women’s Prison) in order to facilitate more sustained family involvement and parent/child bonding for new mothers in confinement. The placement of such a unit should be carefully located to be separated from most other housing and activity buildings. Such a unit should also be readily accessible from the front gate so that community volunteers and family members would be able to enter regularly to provide parenting counseling and babysitting assistance.

Expansion Potential and Continued Use:

Although the site appears capable of accommodating some housing expansion, the broader issue noted above regarding local land development trends and values may make the acquisition of a new site and replacement facility feasible. Also, it is reported that the local community is opposed to any capacity expansion at this site. The design of a new women’s facility would be quite different than the existing facility and would provide spaces more conducive to small group rehabilitative activities. A similar size site should be sought for a new facility.

Updated Space Needs and Site Plan:

<b>WOMEN’S COMMUNITY CORRECTIONAL CENTER (KAILUA) Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	4,104	16	20	(4)	<b>(1,040)</b>
Program Services	19,181	74	65	9	<b>2,340</b>
Support & Operations	11,830	46	70	(24)	<b>(6,240)</b>
Inmate Housing	19,682	76	165	(89)	<b>(14,685)</b>
<b>260 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(19,625)</b>

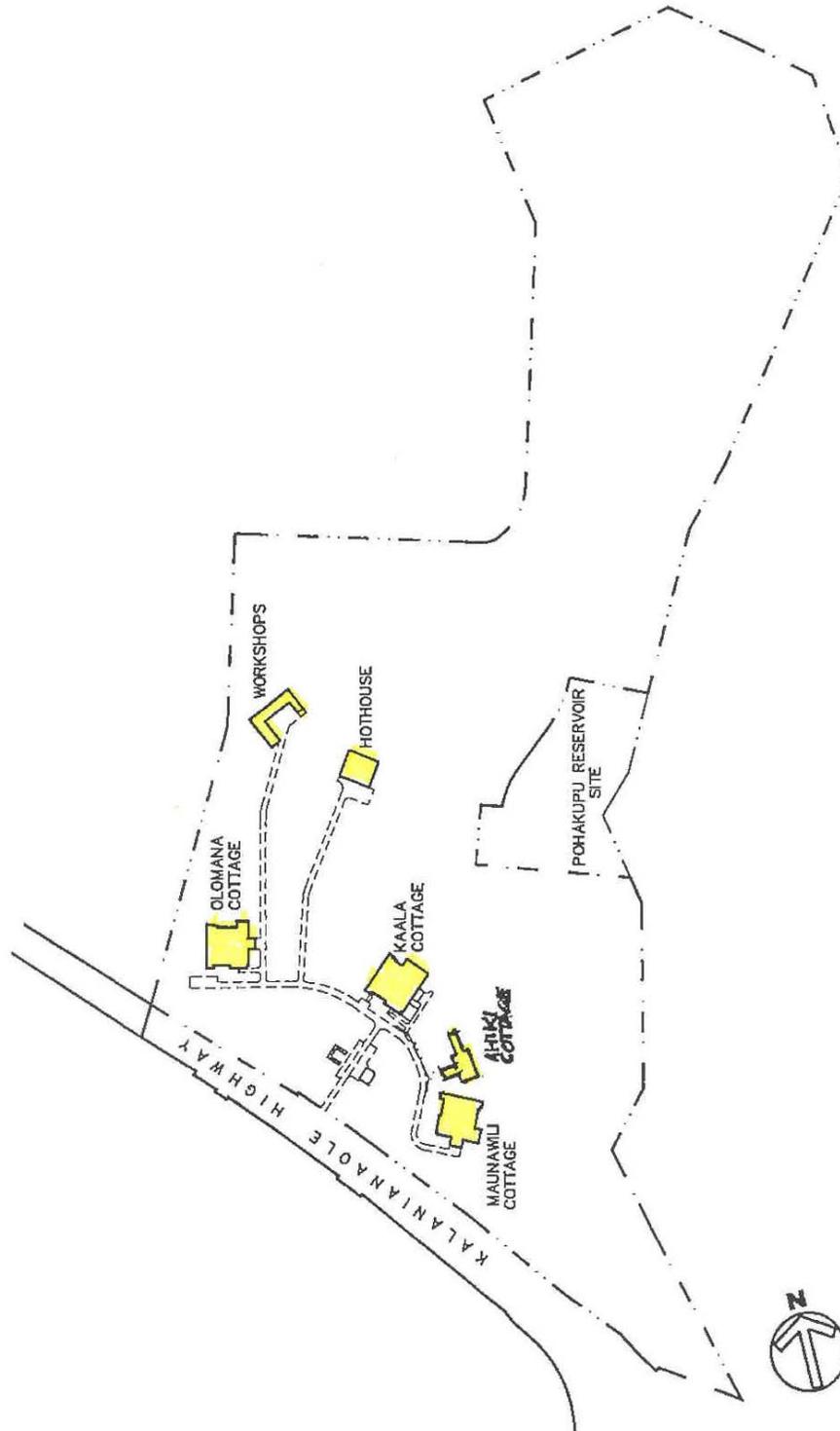
Recommendations:

- Program Services is the only component that meets recommended space standards, and Administration (1,040 GSF) is approximately 25% undersized. Support & Operations (6,240 GSF) is significantly lacking in required area.
- Addition of a family visitation unit with playroom and apartment is desirable to facilitate sustained family and parent-infant relationships.



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Figure 3-5  
Women's Community Correctional Center





## **Part B – Existing Community Correctional Facilities**

### **General Findings and Long-range Outlook**

While the following sections offer recommendations on ways to improve each of the four CCCs it is the consultant's finding and general recommendation that it is time for Hawaii to embark on a phased replacement plan for all four facilities. In reviewing the findings and recommendations that follow it will be noted that the all the CCCs that were started in the mid- to late-1970s are characterized by a substantial amount of overcrowding, obsolescence, and a "patchwork" condition of various buildings of different ages and designs that collectively result in relatively high maintenance and annual building operating expense.

Staffing required in the pre-trial jail housing units is more than would be necessary with a contemporary design. The layouts have become so complicated and maze-like that safety and security is diminished as is staffing and operational efficiency, which results in more annual operating expense than needed compared to a unified multi-security detention center design. Typically, the original housing pods are very small with only 6-, 8-, or 12-beds per pod or unit. Today the design of most general population housing units in jails range from 48 to 64 beds each, which allows one housing officer to effectively supervise many more inmates. Only the maximum security and special management cells, which should be no more than 10% to 20% of the total beds needed, would tend to be in smaller units such as 24 to 32 single-bunked cells. These sizes are still far more staff efficient than the existing units that were designed to be single-bunked cells, but have been double- or triple-bunked in some cases because of overcrowding.

Another major factor to consider is the land value and adjacent conflicting land uses at three of the sites, which may result in an opportunity for the State to trade or sell the land to help reduce the cost of replacement facilities. While each CCC is somewhat different in size, shape and conditions three (Hawaii, Maui, and Oahu) are located on sites that are likely to have a much higher free market economic use value than was the case when they were first built. The Hawaii CCCs Hale Nani Work Furlough Center is located on a site separate from the main complex, which may be large enough to accommodate a new CCC campus. The fourth CCC at Kauai does not have the same adjacent urban development pressures and conflicts as the others, but is in the path of at least two or three alternate highway corridors being studied by the DOT that would require taking of at least part of the site. Also, Kauai suffers from the same state of aging, obsolescence and deterioration as the other three in addition to still having some temporary hurricane relief housing buildings that do not comply with standards. The deficiency of conditions at Kauai are very poor and although it is a much smaller facility should also be given consideration for replacement as soon as possible.

The following sections describe in more detail what the conditions, needs, potentials and recommended dispositions are for these existing facilities that must continue to carry out their county-based community corrections functions until a replacement is feasible.



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## Hawaii Community Correctional Center



### Recommended Role and Mission:

While its mission as a county-based jail, community corrections and reintegration center should be continued the conflicts with the surrounding residential neighborhood, nearby schools and churches that have grown around it will continue to be problematic. The HCCC is a “land locked” facility that needs a larger site for both current conditions and future growth. The facility should be relocated to a larger site where land use and development conflicts will not be an issue. The satellite location of the Hale Nani Work Furlough Center outside of Hilo may be feasible, but would need to be confirmed by detailed site and design studies. Also, if in the long-range a 2<sup>nd</sup> Hawaii facility in the Kona area was constructed then the future growth needs at the Hilo location would be reduced, which may make the Hale Nani site feasible in size for the main complex.

### Recommended Capacity by Custody Levels:

(226 operational beds)

- 40 operational beds minimum security in open dormitories (female unit)
- 22 operational beds maximum security in single-bunked cells
- 64 operational beds medium security in 32 double-bunked cells
- 3 temporary management beds in 2 holding cells
- 0 temporary medical observation/isolation beds
- 100 operational beds community custody in two open dormitories (Hali Nani facility)

### Changes and Improvements Needed:

#### A. Still a Need Since 1991 Master Plan:

1. The administrative offices, work stations and records storage spaces are too small for current operations.
2. The booking/intake area is too small for current operations and circulation cross traffic is still a security problem.
3. Programs, counseling, treatment and inmate activity spaces are lacking and undersized for the bed capacity.
4. The Punhele Special Needs Unit multipurpose room is now programs only and the dayroom has been converted to a sleeping area, which further detracts from daytime activity and treatment needs.



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5. The medical services storage and examination area remains undersized and waiting space is still lacking to keep those inmates separated from circulation corridors. The facility lacks temporary medical isolation/observation beds.
6. The main facility in Hilo still has no staff dining area.
7. The laundry area remains undersized for the bed capacity.
8. Storage for all needs was undersized in the original design and thus creates an even worse condition in 2003.
9. Original janitors closets are still being used for storage rather than their intended use.
10. Secure visiting for attorneys is still lacking.
11. Dayrooms continue to be used for beds to accommodate overcrowding.
12. All single-bunk cells that are not even large enough for double-bunks were double-bunked in 1991 and have been triple-bunked in 2003 making the habitual overcrowding even worse than in 1991.
13. Blind spots are still a problem fundamental to the older housing units design and layout that is an even greater security problem in 2003 due to greater overcrowding.
14. Proper custody and security separations of inmates remains impossible and is worse than in 1991 due to the degree of overcrowding.
15. The 55-bed detention unit recommended for Kona in 1991 has not been constructed.

**B. New Needs:**

1. The old Hilo Jail, storage and maintenance sheds are obsolete expensive to maintain buildings that should be demolished.
2. Handicap accessibility is extremely limited at this facility and would be expensive to bring up to full compliance.
3. Due to population growth original multi-purpose/program rooms and a recreation room have been converted to hold both dining and programs, which further detracts from the facility's programming and treatment capability.
4. The original vehicle sally port was earlier converted into a records office and now includes the transport unit, which leaves the current sally port as a very small space.
5. Some roofs and other building systems need repair or replacement.
6. In general the crowding at the main facility in Hilo is worse than was the case in 1991, which only makes the conditions for inmate management, safety, security and treatment programs effectiveness in this facility worse.

Expansion Potential and Continued Use:

The capacity needs projection for Hawaii is almost three times the facility's current operating capacity. Given the need for a substantial capacity increase the main facility of the HCCC in Hilo should be replaced at another location with a contemporary multi-security jail design. The Hale Nani Work Furlough Center just outside Hilo is a sound and effective facility that should have substantial future life and if the unused ground space at that site were found to be large enough by preliminary design studies this may be a logical location for a building a new main complex to consolidate all east County facilities.

As recommended in the 1991 master plan the idea of locating a second facility in the Kona area near the courts is even more valid today with the projected growth needs and since west Hawaii continues to be the highest growth area of the County. From a life-cycle cost standpoint the capital



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investment in a west County facility would save the State in the long-run by eliminating the operation of daily court transport between Hilo and the courts in Kona. If this were developed as a totally new facility a turnkey design/build/finance/operate scheme could be feasible to consider, which could also serve as a test case for the concept in Hawaii.

Updated Space Needs and Site Plan:

<b>HAWAII COMMUNITY CORRECTIONAL CENTER</b>					
<b>Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	800	4	20	(16)	<b>(3,616)</b>
Program Services	2,386	11	65	(44)	<b>(9,944)</b>
Support & Operations	4,125	18	70	(52)	<b>(11,752)</b>
Inmate Housing	14,793	66	195	(129)	<b>(29,154)</b>
<b>226 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(54,466)</b>

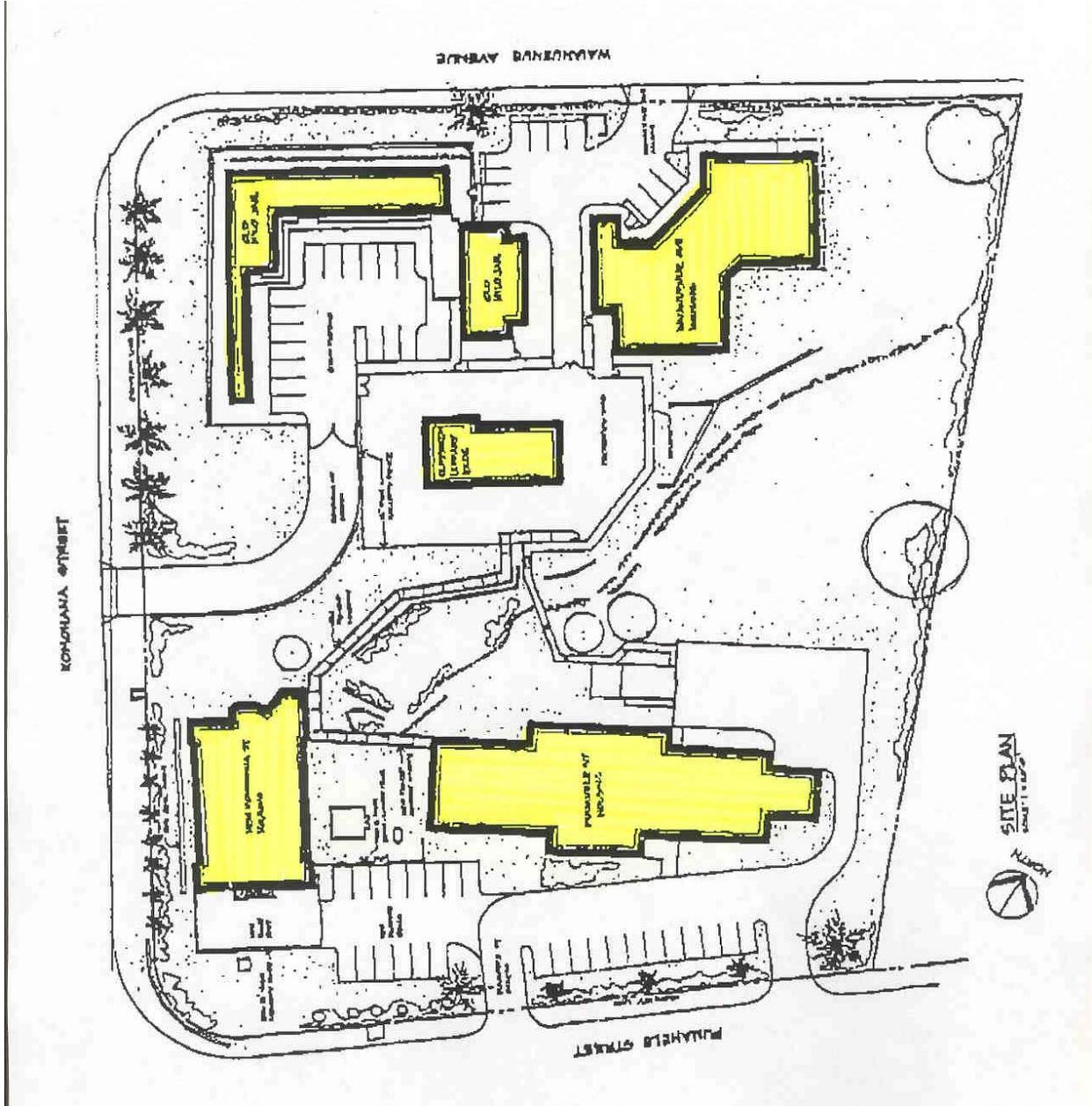
Recommendations:

- Space shortfalls for all components are even worse today than in 1991, and expansion on the present site of the main complex in Hilo is not a viable option.
- All existing components at the Hilo main complex need considerably more space to meet recommended space standards: Administration – 3,616 GSF; Program Services – 9,944 GSF; and Support & Operations – 11,752 GSF.
- Replacement of the main facility at another site would be more economical than trying to expand at the Hilo site.



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Figure 3-6  
Hawaii Community Correctional Center – Hilo Main Complex

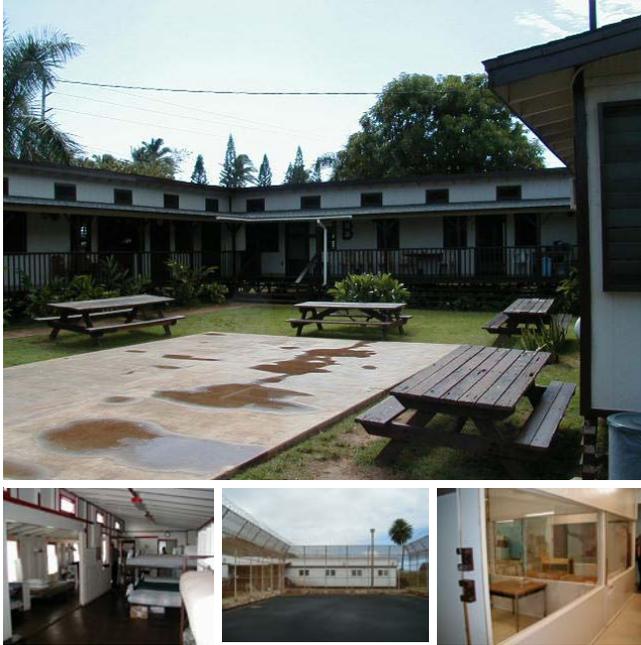






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### Kauai Community Correctional Center



#### Recommended Role and Mission:

The role and mission of the Kauai CCC is an important one for providing a county-based jail, community corrections and offender reintegration, which obviously needs to be continued either at its present location or in a new contemporary facility at an alternate location. Reportedly the DOT has been studying alternate highway realignment corridors that would require taking at least a part of the land currently occupied by the CCC complex. State owned land that is reportedly available adjacent to the airport would provide a convenient location that should not conflict with other land uses. More importantly much of the original design and incremental additions made over the years to cope with growth now result in a facility that is much less cost efficient to operate than a new design would be both from a staffing standpoint and from a building systems, energy management and maintenance standpoint.

#### Recommended Capacity by Custody Levels:

(128 operational beds/ average of 10 females fluctuates with no designated unit)

- 24 operational beds medium security in 12 double-bunked cells originally designed as single-bunked cells (just under ACA standard needed for unencumbered space compliance – 78 NSF instead of current 75 NSF)
- 24 operational beds low-medium security beds in six 4-bed cells
- 80 operational beds minimum security in two 40-bed dorm pods in one building
- 3 temporary management holding cells large enough to hold 8 persons total
- 0 temporary medical observation/isolation beds

#### Changes and Improvements Needed:

##### A. Still a Need Since 1991 Master Plan:

1. The facility lacks a controlled entry gate to the property.
2. Medical services and exams are still provided in a single room located between the administrative office and the intake area.
3. Holding cells originally designed for intake are now used for both segregation and temporary medical isolation.



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4. The reception counter at the front office is still the only physical barrier between staff and the public who enter the lobby.
5. Records and files are still overflowing into hallways and janitors closets.
6. There is no provision for non-contract visiting.
7. Proper separation by classifications is still compromised by overcrowding.

**B. New Needs:**

1. The loading dock is not secured and inmates could easily leave the facility via that area.
2. The temporary dormitories used for 1993 hurricane recovery efforts will need to be replaced with standards compliant dormitories if they are to be continued in use. These beds are not included in the recommended capacity by custody levels above.

Expansion Potential and Continued Use:

Similar to the other CCCs it is recommended that this facility be replaced with a more secure and operationally cost efficient contemporary multi-security facility. Since engineering studies by the DOT have identified part of the CCC property for a new highway corridor it is recommended that a new facility be built at another location, which also would be less complicated than trying to rebuild on the same site or even adjacent land when a new highway appears likely in any case. Although this CCC does not have the same adjacent land use conflicts from surrounding residential development as the Maui and Hawaii CCCs, the “patch-work” of buildings at this CCC are obsolete and inefficient to operate as already noted. Also, a well designed replacement facility would save the State on annual building operating and staffing costs, especially with a projected bed need that is almost twice the current operating capacity within the next 10 years.

Updated Space Needs and Site Plan:

<b>KAUAI COMMUNITY CORRECTIONAL CENTER</b> <b>Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	644	5	20	(15)	<b>(1,920)</b>
Program Services	3,367	26	65	(39)	<b>(4,992)</b>
Support & Operations	5,647	44	70	(26)	<b>(3,328)</b>
Inmate Housing	7,580	59	195	(136)	<b>(17,408)</b>
<b>128 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(27,648)</b>

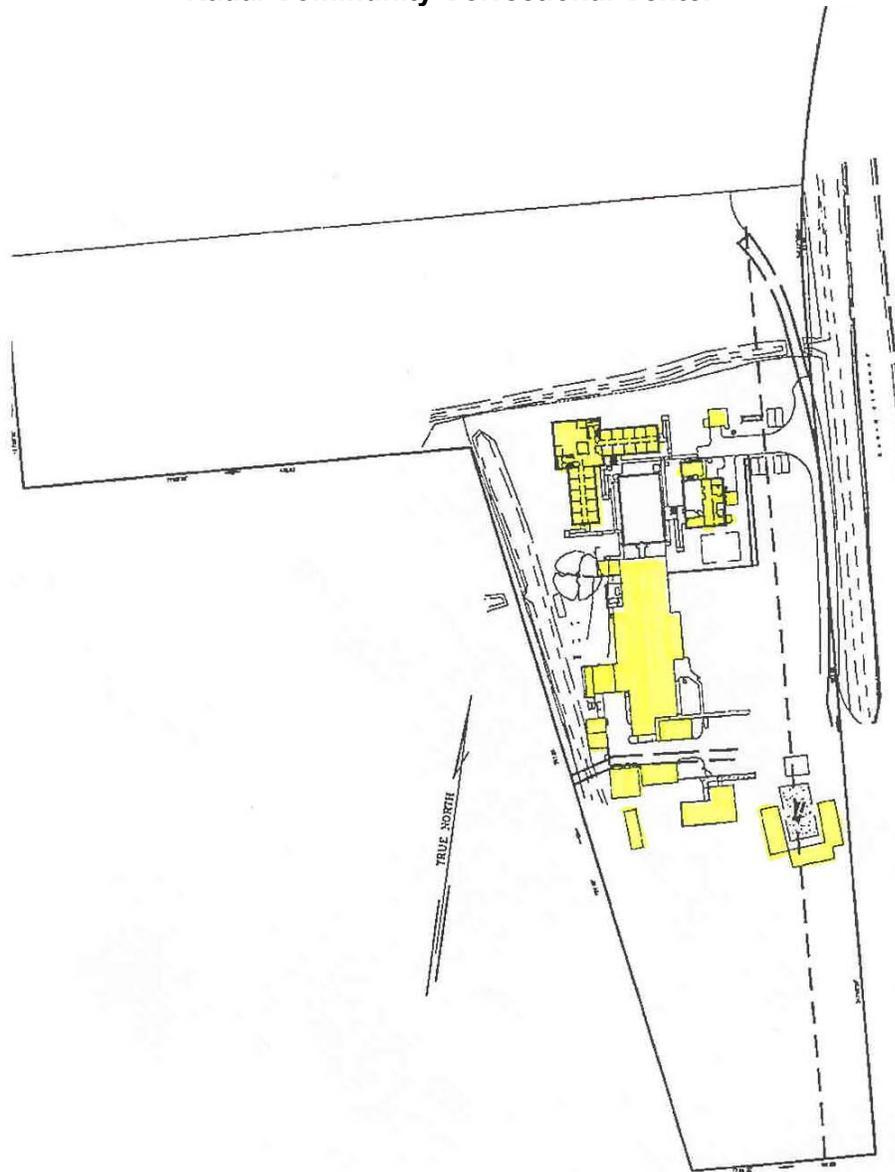


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#### Recommendations:

- The temporary hurricane housing dormitories are not code-compliant and otherwise do not meet acceptable standards. If this facility continues in operation, these modules need to be replaced. Some inmates are being triple-bunked in other housing units that are not even big enough for double-bunking.
- All non-housing components are lacking in required space as follows: Administration – 1,929 GSF; Program Services – 4,992 GSF; Support & Operations – 3,328 GSF.

Figure 3-8  
**Kauai Community Correctional Center**





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### Maui Community Correctional Center



#### Recommended Role and Mission:

Like the other three CCCs the Maui CCC provides the essential jail, community corrections and prisoner reintegration functions for its county, which clearly needs to be continued. Somewhat similar to the Hawaii CCC location situation Maui is now surrounded by residential development that has created higher land conversion values than was the case when the CCC was originally located in 1978 on the grounds of the old Maui jail. Although Maui does have a useful major medium security cell housing expansion that added 102 cells in 1994 along with support spaces it appears that planning for a replacement facility at another site would be preferable when funding is available.



#### Recommended Capacity by Custody Levels: (300 operational beds)

- 14 operational beds medium security single-bunked cells (2 female units)
- 184 operational beds minimum security in seven open dormitories (32 female beds in dorms 4 and 5)
- 96 operational beds high-medium security 48 double-bunked cells
- 6 operational beds maximum security single-bunked cells
- 6 temporary management maximum security single-bunked segregation cells
- 4 temporary management holding single cells
- 0 temporary management beds medical observation/isolation

#### Changes and Improvements Needed:

##### A. Still a Need Since 1991 Master Plan:

1. The administrative offices remains crowded with overflow of materials and furniture into circulation areas.
2. Staff services areas are still lacking for dining, training and a break area. Staff toilets are available only in the public entry lobby, control room and the open air locker room, which is minimal for such this size facility with its separated buildings. The staff dining room can only accommodate 18 persons seated, which is still too small for this facility.



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3. Inmate intake processing is still done in one undersized room and an added room constructed by inmates has been used to accommodate records and property for nine years.
4. Storage space for separating clean and dirty laundry and chemicals is still undersized.
5. The control room is cramped for the various functions that it contains.
6. The same poor visual supervision condition and operating inefficiencies exists here with the prototype 1978 CCC housing unit found at all four CCCs.
7. Fire escape egress from the older housing buildings is still inadequate.

**B. New Needs:**

1. The frequency of maintenance and repair needs has reportedly increased substantially in recent years with the continued aging of the original buildings. Although the roofs had a major repair and resurfacing since 1991 several leak points were noted on the tour. As evidence of the deficient maintenance situation the facility maintenance manager submitted a list of 33 repair needs during the consultant's inspection. Some of the more notable needs included:
  - Hot water heaters inadequate and need replacement
  - Laundry capacity is undersized
  - Telephone system is overloaded
  - Either a sewage grinder or separator is needed for the lift station to prevent repeated blockages and repairs
  - Existing chillers and air handlers rust very quickly
  - Outdoor night lighting fixtures need replacement with weatherproof units
  - Sufficient plumbing shutoff valves are lacking to be able to isolate repair areas
  - PVC pipe at fire hydrants has shifted and blown off twice due to sandy soils interaction and shifting with PVC
  - The vehicle sally port gates have been damaged repeatedly due to the space being too small for garbage trucks to maneuver
  - Upstairs handicapped showers only have access by stairs
  - Storage is lacking in all departments
  - The perimeter fence mesh is severely rusted
  - Air registers too close to the ceiling are causing mold and mildew
  - Temperature control valves at showers and lavatories cannot be adjusted to deliver proper temperature
  - Shower area floors are structurally weakened in dorms 1 and 2 due to water damage.
2. The conversion of a former housing area to provide a medical services area was a drastic move that still results in very cramped spaces for this function.
3. Although the sewer and water supply systems have been improved since 1991 the fresh water supply experiences frequent periodic reductions today.



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Expansion Potential and Continued Use:

Since the 1991 master plan the Maui site has been expanded twice, first from its original two acres to 5 acres and finally to 7.5 acres with the addition of a 2.5 acre tract on its south boundary where the work furlough center was constructed. As noted above given the adjacent land development trends to higher value residential uses in conjunction with the deficiencies of this complex it is recommended that the facility be replaced at another location and that any further expansion at this site should be avoided. The facility is already operating well beyond its rated capacity, which shows in the state of recurring repair and maintenance problems. Like other counties Maui's growth projection for the next 10 years would require more than doubling its current capacity, which is not feasible at its current site.

Updated Space Needs and Site Plan:

<b>MAUI COMMUNITY CORRECTIONAL CENTER</b> Hawaii Public Safety Department					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	1,254	4	20	(16)	<b>(480)</b>
Program Services	15,186	51	65	(14)	<b>(4,200)</b>
Support & Operations	14,532	49	70	(21)	<b>(6,300)</b>
Inmate Housing	40,279	134	165	(31)	<b>(9,300)</b>
<b>300 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(20,280)</b>

Recommendations:

- All non-housing components are deficient to varying degrees: Administration – 480 GSF; Program Services – 4,200 GSF; and Support & Operations – 6,300 GSF.
- Although the space shortfall is not as great as some of the other facilities included in the study, the deteriorating condition, on-going maintenance problems and limited expansion space surrounded by residential areas makes continued use of MCCC at this location problematic.





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## Oahu Community Correctional Center



### Recommended Role and Mission:

Like the other three CCCs Oahu plays a key role for three critical local and State detention/ corrections functions as a county jail, community corrections center, and reintegration facility for prison inmates who will be released back on their home county. Also, like the other CCCs Oahu has a design, site layout and patch-work of additions, even on separated parcels, that make its operation relatively costly for both annual staffing and building operational costs, and is not as safe and secure as a contemporary multi-security facility design would be. While these functions obviously need to continue the long-term viability of this complex at this site is questionable in light of the likelihood of a higher and better free market economic use of the land in addition to its correctional operations shortcomings and lack of expansion space. A new site that could accommodate all three correctional functions together would be preferable and may be affordable, especially if the existing site were sold to the private sector to help offset the cost of a new facility. Alternately, a site close to the County court building would be ideal for pre-trial detention and low custody community-based housing units could be located elsewhere on lower cost land.

### Recommended Capacity by Custody Levels:

(954 operational beds)

- 516 operational beds medium security in double-bunked cells in 11 pods
- 80 operational beds minimum security in two joined 40-bed open dormitories (female unit)
- 114 operational beds minimum security in a 3-level structure of three dormitories
- 50 operational beds minimum security in one dormitory (Annex 1)
- 24 operational beds minimum security in one dormitory
- 24 operational beds minimum and community custody in a two joined open dormitories
- 50 operational beds community custody in one dormitory
- 96 operational beds community custody work furlough in three 32-bed dormitories (remote site)
- 36 temporary management holding cells
- 3 temporary management medical beds in one ward



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Changes and Improvements Needed:

A. Still a Need Since 1991 Master Plan:

1. Records storage and the administrative office areas remain overcrowded.
2. Executive staff offices still lack enough space for small group meetings.
3. Housing unit laundry areas remain undersized.
4. Counseling rooms only accommodate individual counseling and are not large enough for small group counseling.
5. Intake and release of inmates are still managed in the same area and both functions still share the same holding cells.
6. Male and female inmates still cannot be separated in the infirmary.
7. The medical clinic waiting area remains too small.
8. The non-contact visiting booths still cannot be properly supervised by one officer remaining at a fixed post.
9. Cells designed for single bunking are either double- or triple-bunked.
10. The dining room is still undersized at half the current population.
11. The dayrooms are undersized for the current operating capacity.
12. Pre-trial inmates are still confined with sentenced inmates.
13. The intercoms in housing areas still do not work properly.
14. A recommended new administration has still not been constructed.

B. New Needs:

1. Community custody beds have been triple-bunked in dorm spaces that should only be double-bunked.
2. The areas of recent escapes were not visible from the facility's towers.
3. The room used for video arraignments is too small.
4. The five non-contact booths are not an adequate number for this size pre-trial unit.
5. The maximum capacity of 27 inmates at one time in contact visitation is undersized for a facility this size.
6. The medical records area is out of space.

Expansion Potential and Continued Use:

As already noted this facility should not be expanded and its fair market value may provide a significant contribution towards the cost of a new facility. Over the next 10 years Oahu is projected to need twice the capacity that this facility can currently provide. It is recommended to be replaced at a new Honolulu area site, ideally close to the County court building. If such a central area site is not financially feasible to accommodate the entire system the location of all pre-trial, special needs and high security housing should be prioritized for a location close to the court building. The other community-based housing units could be developed on a lower cost site elsewhere.



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Updated Space Needs and Site Plan:

<b>OAHU COMMUNITY CORRECTIONAL CENTER Hawaii Public Safety Department</b>					
<b>Space Evaluation</b>					
<b>Component</b>	<b>Existing Conditions</b>		<b>Recommended GSF/Inmate</b>	<b>Surplus (Shortfall)</b>	
	<b>Total GSF</b>	<b>GSF/Bedspace</b>		<b>GSF/Bedspace</b>	<b>Total GSF</b>
Administration	6,910	7	20	(13)	<b>(12,402)</b>
Program Services	50,270	53	65	(12)	<b>(11,448)</b>
Support & Operations	61,870	65	70	(5)	<b>(4,770)</b>
Inmate Housing	71,384	75	165	(90)	<b>(85,860)</b>
<b>954 Beds of Operating Capacity</b>				<b>Total:</b>	<b>(114,480)</b>

Recommendations:

- All components are deficient in meeting the recommended space standards. Support & Operations is the least deficient (4,770 GSF), but Program Services (11,448 GSF) and Administration (12,402 GSF) require additional space to meet standards.
- The original design of the facility, as well as subsequent additions, created a site layout that inhibits visual surveillance from the towers as well as on the ground, which compromises security.
- The facility is landlocked, making it unsuitable for necessary support space additions as well as meeting future growth needs.
- A centralized health care unit to provide direct support of Oahu facilities is a useful idea that has been proposed in the past. Since the Honolulu and Oahu County will continue to need the largest correctional capacity in the Hawaii system its sheer size warrants more substantial support, treatment and program spaces than any single facility.





## RECOMMENDED CAPACITY PLANNING GUIDELINES

### Net Projected Bed Capacity Needs

Table 3-1 summarizes the net shortfall in bed spaces in the Hawaii system by gender and general facility categories projected for 2004 through 2013. The projections used are from the recommended model in Chapter 2 of this master plan update and the 2003 Operational Capacities used are from the recommended capacity for each of the State's nine existing facilities as specified in the previous section of this Chapter.

Table 3-1  
**Projected Operational Bed Capacity Shortfall**

Category of Beds	2003 Existing Facilities Operational Capacities	Operational Bed Shortfall by Existing Capacity & Bed Projection									
		2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
<b>Males</b>											
Correctional Facilities	1,500	1,969	2,125	2,281	2,437	2,593	2,749	2,905	3,062	3,218	3,374
Community Correctional Facilities	1,432	858	916	973	1,031	1,089	1,147	1,205	1,267	1,330	1,393
<b>Females</b>											
Correctional Facilities	260	163	191	219	247	275	304	332	361	391	420
Community Correctional Facilities	177	224	242	261	280	299	317	336	356	375	395
<b>All Inmates</b>											
Correctional Facilities	1,760	2,132	2,316	2,500	2,685	2,869	3,053	3,237	3,423	3,608	3,794
Community Correctional Facilities	1,609	1,082	1,158	1,234	1,311	1,387	1,464	1,541	1,623	1,705	1,787
<b>Total All Facilities</b>	<b>3,369</b>	<b>3,214</b>	<b>3,474</b>	<b>3,735</b>	<b>3,995</b>	<b>4,256</b>	<b>4,517</b>	<b>4,779</b>	<b>5,046</b>	<b>5,313</b>	<b>5,582</b>

Note: The above shortfall computations are based on Operational Bed Projections, which add a 5% classification separation factor to the population projections for correctional facilities and the same plus an actual peaking factor average found for community correctional facilities.

Source: Projections and capacity ratings by Carter Goble Associates, Inc., October 2003.

It should be noted that the 2003 operational capacities recommended in this chapter and used in Table 3-1 are taken from the PSDs Capacity Study with some limited modifications by CGA for strict compliance with ACA sleeping area sizes. Clearly the State has a substantial need for correctional bed capacity. While the approximate 1,400 Hawaii Prisoners held in mainland facilities represent the largest amount of need there were another 745 prisoners held in-state in 2003 in overcrowded conditions. This computation is based on a PSD "End of Month Population Report" for September 30, 2003, which gave a current system "head count" of 4,114 inmates.

As suggested near the end of Chapter 2 a two-part planning horizon is proposed that uses the years 2008 and 2013 for the phasing of the expansions needed for the entire 10-year projection period. The total bed needs projection from Chapter 2 yields a net need by 2008 for 4,256 more beds than current operating capacity and 5,582 beds more than the 2003 operating capacity by 2013 by deducting the existing capacities shown in the 2<sup>nd</sup> column of Table 3-1. As noted at the bottom of the table the difference between the Chapter 2 Population Projection and the Operational



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Bed Projection focused on for planning purposes is in the addition of a 5% classification separation factor for all facilities, plus the addition of an average peaking factor for all four CCCs.<sup>2</sup>

### Prisons

The Bed Projections will be used for the 10-year master plan update, but the Chapter 2 population projections may also be useful for comparisons with actual head count results in future years. The next step is to apply a custody/security level breakdown by gender and general facility type. To do so a 3-year sample of the PSD "assigned count" by security level for males and females in prison was obtained for 2001, 2002 and 2003. The consultant used this data in conjunction with recent samples of 11 other mainland systems and recommends the custody ratios as noted in Table 3-2 for use in this master plan.

Table 3-2  
**Recommended Prison Planning Security Distribution Ratios**  
(percentage of classified population)

<b>Prison Custody Group</b>	<b>6-State Average – Sm.</b>	<b>5-State Average – Med.</b>	<b>Hawaii 2001-03 Average</b>	<b>Recommended for Master Plan</b>
<b>Males</b>				
▪ Super Max	.9	2.3	0	0
▪ Maximum	6.8	6.2	1	2
▪ Close	21.1	11.3	5	5
▪ Medium	48.4	30.7	44	40
▪ Minimum	22.8	49.5	43	43
▪ Community	0	0	7	10
<b>Females</b>				
▪ Super Max	5	.3	0	0
▪ Maximum	5.2	3.8	1	1
▪ Close	10.2	5	1	1
▪ Medium	45.3	28	44	36
▪ Minimum	34.3	62.9	26	32
▪ Community	0	0	28	30

Source: Hawaii PSD and Directory Adult and Juvenile, American Correctional Association, 2002 issue for five medium systems and 2003 issue for five small systems, February 2002 and February 2003 respectively. The six small systems included Alaska, Maine, Minnesota, Nebraska, Utah and West Virginia and the five medium systems included Georgia, Missouri, Oklahoma, South Carolina and Tennessee.

In addition to the 5- and 6-state comparative distributions in Table 3-2 the consultant also examined 2000 data for the six smaller systems as provided in the 2001 Corrections Yearbook. In this

<sup>2</sup> The classification factor allows for adequate extra beds needed for custody separations within each gender for both prisons and jails. The peaking factor is applied only to the CCCs due to their jail function which typically has peaks each month and sometimes weekly as born out by historic monthly headcount data analyzed for each CCC.



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tabulation community corrections allocations were reported that ranged from 2% to 11%. Also, the medium and minimum custody distributions averaged 47% and 24% respectively. This data base was not used any further, however, as it did not provide breakdowns by gender.

**Community Corrections Centers**

Table 3-3 provides recommended custody distribution ratios for the four CCCs, and the jail component of the WCCC which are quite different from the prisons since they provide: (1) pre-trial detention; (2) confinement for misdemeanor offenders sentenced to “local time” instead of prison; (3) outside work crew assignments for eligible inmates; and (4) community-based work furlough for prison inmates near the end of their sentence. *While this reflects current practice and historic data it is recommended that a shift should be made eventually to keep all jail/detention functions in the CCCs and retain all prison functions in the CFs. This would primarily affect the WCCC since it currently has some mixed functions with some inmates performing daytime work in community (from one 20-bed dorm). In this 10-year plan the future growth recommendations will provide for all community custody functions to be located at the CCCs, just as all male felons are currently transferred to CCC work furlough units when they have a year or less prior to release. In the consultant’s experience this is an important and effective pre-release/transitional component of a correctional system and has been proven to reduce failure rates compared to inmates being released directly from high security facilities. Achieving this goal will require enhancing the capacity and capabilities of the CCCs and at the same time free up valuable CF beds.*

**Table 3-3  
Recommended CCC Planning Security Distribution Ratios**  
(percent of classified population)

CCC Custody Group	Oct. 2003 Average All CCCs		Recommended for Master Plan	
	Male	Female	Male	Female
<b>Four CCCs</b>				
▪ Maximum	.6	0	5	4
▪ Close	.2	0	5	4
▪ Medium	36.5 - 48	23 - 27	40	25
▪ Minimum	27 - 40	23 - 56	25	27
▪ Community	22.7 – 25	17 - 54	25	40

Note: In addition to the single-bunked cells for operating capacity a 5% addition of single-bunked cells for special management is also recommended.

Source: PSD database October 2003 with recommended allocations by CGA, Inc., October 2003.

Currently the PSD classifies all pre-trial detainees as medium custody. This, however, usually results in an over-classification and the use of higher cost medium security space that is not needed for all pre-trial detainees. The recent system averages shown in the table are taken from the PSD database of monthly population reports both by custody levels and offender category (i.e. sentenced felon-probation, pre-trial misdemeanor, pre-trial felon, etc.). Table 3-3 recommends a



new custody group breakdown for jails (CCCs) that would be applied to help determine the amount of new beds needed in different security construction levels.

### **Security and Custody Level Ratios**

The American Correctional Association 3<sup>rd</sup> Edition Standards for Adult Local Detention Facilities recommend that 1/3 of all beds in a detention facility should be in single-bunked cells and that medium custody inmates housed in multiple occupancy cells or rooms require “direct supervision.” Some states have adopted the ACA standards verbatim like New Jersey and others have something similar like Virginia, which is even stricter with a 50% single-bunk cell requirement. In the consultant’s experience the use of such standards need to be applied with care on a case-by-case basis in light of the actual custody and security conditions that are somewhat unique in each environment. As Hawaii has managed its populations for some time without a substantial number of single bunked cells a smaller ratio would be suitable, especially if a provision is added at all facilities for a 5% ratio of special management single-bunked cells in addition to a limited number for the general populations as suggested in Tables 3-2 for the CFs and 3-3 for the CCCs

In the case of Hawaii’s CCCs the historical data bears this out and consequently a lower ratio of single-bunked cells and double-bunked cells should be feasible along with a significant amount of minimum security dormitories. As a rule in most jails approximately 90% of all pre-trial misdemeanants are non-violent and usually qualify for a minimum custody dormitory. The other 10% will need either a single-bunked or double-bunked cell, either permanently or temporarily (in a special management cell) depending on their ability to adjust their behavior for congregate living.

For pre-trial felons, approximately 90% should be given a double-bunked medium security cell and the remaining 10% will require a single-bunked maximum security cell. Part of this need would be handled by a recommended 5% additive of single-bunked cells included to provide a sufficient number of temporary management beds (not part of the operational bed count) for administrative segregation, disciplinary segregation, protective custody, temporary special observation and medical observation/recuperation. These general guidelines for CCCs along with the previously described prison security ratios will be used in developing recommendations for both facility expansions and new facilities.

### **Special Needs Offenders and Treatment Needs**

In addition to a general population of males and females correctional and detention facilities also need to accommodate a variety of “special needs” inmates who require special custody, diagnostic and treatment services either temporarily or throughout their prison term. Special needs populations include those with a substance abuse dependency, the mentally disordered, developmentally disabled, sex offenders, and those with co-occurring substance abuse and mental disorders. Based on prevalence studies elsewhere and data from the Hawaii system it can be expected that up to 10% of the corrections population at any one time could have severe and/or chronic mental disorders. Statistically a majority of these individuals are also likely to have co-occurring substance abuse disorders. Another 15% to 20% will be likely to require some form of psychiatric intervention during their confinement. Probably one of the most troublesome statistics is that criminal offenders who have mental disorders tend to have recidivism rates that exceed 70%.



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Substance abuse and dependency alone has become commonplace among most jail and prison populations today. In Hawaii for fiscal year 2003 the PSD reports that by operational assignment it has 230 "level III" substance abuse treatment beds for males and 50 for females and another 106 "level II" treatment beds for males and 38 for females. During FY 2003 alone a total of 591 males and 103 females were assessed as needing "Level III" treatment and another 136 males and 10 females needing "Level II" treatment. Understandably due to capacity limits the PSD provides treatment only near the end of an inmate's sentence. While end-of-stay transitional treatment is critical in any case it does not provide the comprehensive level of sustained treatment throughout and inmates prison term that has been proven to be more effective than either end of stay or periodic treatment. Greater treatment capacity is clearly needed.

As previously discussed the Halawa Special Needs CF is totally inadequate and obsolete as a special needs treatment facility or as a high security facility. Moreover, the facility does not provide adequate space for meeting healthcare needs of any type of prisoner. Also, the Kulani CF, which is the system's only sex offender treatment facility is an open minimum custody work camp environment, which is not acceptable for those needing a higher level of security confinement. Also, Kulani's capacity is currently limited to 160 inmates until planned water and sewer capacity expansions are made. With a sex offender population that grew from 275 males in April 1992 to 671 by 2001 and 677 as of October 2003 the need for a higher security level treatment facility is obvious.

In light of these realities it is important that today's correctional facilities be designed and equipped to handle such offenders who unfortunately have become commonplace in detention and correctional facilities. To do so it is recommended that approximately 10% of each CCCs operational housing capacity be planned as a special needs pod or unit and that the same ratio of prison system operational capacity be provided in a dedicated special needs facility. In addition to those needing temporary or long-term assignment in a special needs or high security facility, the majority of offenders with substance abuse treatment needs should still be able to receive treatment while they live in a general population unit at any CF or CCC.

A true dedicated treatment facility must provide treatment designs that are intended to help the vast majority of inmates to become capable of living in a general population prison rather than expecting that they should remain in a special needs facility for their entire stay. Experience has proven that even those offenders with a significant mental disorder can be treated with a combination of medications and behavioral management education and training that will enable them to successfully co-exist in a general population facility. Only in this way will the dedicated special needs treatment facility be able to continually make bed space available for both relapse cases and for new arrivals who need specialized treatment before they are ready for a general population CF or CCC.

#### **Two-Phase 10-Year Planning Term and Capacity Targets**

As already noted a 10-year planning term was requested by the PSD for this update. Also, as suggested earlier the consultant has recommended that the 10-year term be broken into two 5-year planning, design and construction phases. The specific end years of each phase at 2008 and 2013 thus allow up to approximately five years for all adopted projects to be completed within each phase. For completely new facilities each 5-year term is intended to allow for up to two years to



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complete site selection studies/acquisition if needed, detailed facility planning and design and the subsequent three years for construction completion and move-in. In the case of expansion for existing facilities a shorter term of up to three years should be feasible allowing one year to complete planning and design and up to two years for construction completion.

Using the Net Bed Need Projections from Table 3-1 and the *existing system* security allocation ratios provides the resulting computations for added new beds by security level that would be needed for each of the two proposed development phases of 2008 and 2013. The calculated number of new added beds needed assume the existing rated operational capacities as found in October 2003 and used in the previous tables. *It is important to remember that these numbers are not yet the numbers of recommended beds rather what would be under current security level allocations.. The eventual recommendations for new beds and facilities must be a rational plan that accounts for the additional variables of existing facility conditions, obsolescence, overcrowding, land economics, and the totality of needs and opportunities for a comprehensive correctional system. The recommended security level ratios of Tables 3-2 and 3-3 will be used for the recommended plans*

The security level ratios used in Table 3-4, which follows are based on PSD historic records. Since the same data was not available for the CCCs as for the CFs an estimate was developed based on the system's current practice. To do so for the CCCs the following correlations were used with PSD historic data for the annual average head counts found for fiscal year 2002-2003. In all cases it is also assumed that all CCCs have or will have a secure perimeter building wall and/or fence system that will deter escape, irrespective of an inmate's type of housing and location inside the facility.

- Medium security = pre-trial felons, inmates from other jurisdictions and ½ of all probation and parole violators
- Minimum security = sentenced felon-probation, ½ of all sentenced misdemeanants, pre-trial misdemeanants, and ½ of all parole and probation violators
- Community Custody = sentenced felons (presumed to have completed incarceration in a CF and are in a transitional status preparing for release), and ½ of all sentenced misdemeanants

The new added target number of beds needed are distributed by general facility type and gender for the recommended Phase 1 planning horizon of 2008 and Phase 2 by 2013. As noted at the bottom of the table a major shift in the allocation of community custody beds is made by the formulas used which deletes community custody as a category from CFs and allocates that entire custody level to the CCCs. This reflects the reality that State prison inmates who are transferred to the CCC in their county of release approximately one year before their scheduled release are in fact in the custody and full-time supervision of the CCCs not the CFs. PSD data records currently count those inmates as prison system inmates even though they are assigned to community level housing at a CCC. While this may be a legal requirement, it does not relate to the actual location where capacity needs to be planned and thus at least for this master plan update those needs must be accurate with respect to the county location.

The Table 3-4 projections do not represent a "recommended or planned allocation" but rather simply a simulation of what would happen if allocations were made by the existing capacity constrained placements. In other words the results will reflect total need under the current system conditions, but not what would be a more ideal allocation by security level in line with the ratio guidelines recommended in Tables 3-2 and 3-3.



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Table 3-4  
**Projected Total Beds Needed by Phase and Security Level**  
(Using Existing Security Levels NOT Recommended Ratios)

Type Facility	Phase 1 - 2008 Total Beds Needed							
	Operational Beds						Special Mgt. Beds @ 5%	Totals
	Maximum	Close	Medium	Minimum	Community	Totals		
<b>Correctional Facilities</b>								
Males	205	82	1637	1760	0	3,684	184	3,868
Females	5	5	193	171	0	375	19	394
<b>CF Totals</b>	<b>210</b>	<b>87</b>	<b>1,830</b>	<b>1,931</b>	<b>0</b>	<b>4,059</b>	<b>203</b>	<b>4,262</b>
<b>Community Corr. Facilities</b>								
Hawaii - male	4	4	196	111	161	476	24	500
Hawaii - female	0	0	27	27	76	130	6	136
Kauai - male	2	2	87	49	70	210	10	220
Kauai - female	0	0	14	14	39	68	3	72
Maui - male	5	5	243	137	181	572	29	601
Maui - female	0	0	29	29	81	140	7	147
Oahu - male	14	14	634	358	653	1,672	84	1,755
Oahu - female	0	0	50	51	197	298	15	313
<b>Male Totals</b>	<b>25</b>	<b>25</b>	<b>1,160</b>	<b>655</b>	<b>1,065</b>	<b>2,930</b>	<b>147</b>	<b>3,077</b>
<b>Female Totals</b>	<b>1</b>	<b>1</b>	<b>121</b>	<b>122</b>	<b>393</b>	<b>636</b>	<b>32</b>	<b>668</b>
<b>CCC Totals</b>	<b>26</b>	<b>26</b>	<b>1,280</b>	<b>777</b>	<b>1,458</b>	<b>3,566</b>	<b>178</b>	<b>3,745</b>
<b>GRAND TOTALS</b>	<b>236</b>	<b>113</b>	<b>3,110</b>	<b>2,709</b>	<b>1,458</b>	<b>7,625</b>	<b>381</b>	<b>8,006</b>
Type Facility	Phase 2 - 2013 Additional Beds Needed							
	Operational Beds						Special Mgt. Beds @ 5%	Totals
	Maximum	Close	Medium	Minimum	Community	Totals		
<b>Correctional Facilities</b>								
Males	39	16	312	336	0	702	35	738
Females	1	1	52	46	0	101	5	106
<b>CF Totals</b>	<b>40</b>	<b>17</b>	<b>364</b>	<b>382</b>	<b>0</b>	<b>804</b>	<b>40</b>	<b>844</b>
<b>Community Corr. Facilities</b>								
Hawaii - male	1	1	43	24	34	104	5	109
Hawaii - female	0	0	5	5	18	28	1	30
Kauai - male	0	0	13	7	12	32	2	34
Kauai - female	0	0	4	4	11	18	1	19
Maui - male	1	1	38	21	30	91	5	96
Maui - female	0	0	8	8	23	40	2	42
Oahu - male	1	1	46	26	81	155	8	163
Oahu - female	0	0	5	5	42	53	3	56
<b>Male Totals</b>	<b>3</b>	<b>3</b>	<b>140</b>	<b>79</b>	<b>157</b>	<b>382</b>	<b>19</b>	<b>401</b>
<b>Female Totals</b>	<b>0</b>	<b>0</b>	<b>23</b>	<b>23</b>	<b>94</b>	<b>140</b>	<b>7</b>	<b>147</b>
<b>CCC Totals</b>	<b>3</b>	<b>3</b>	<b>162</b>	<b>102</b>	<b>252</b>	<b>521</b>	<b>26</b>	<b>548</b>
<b>GRAND TOTALS</b>	<b>44</b>	<b>20</b>	<b>527</b>	<b>484</b>	<b>252</b>	<b>1,325</b>	<b>66</b>	<b>1,392</b>

Note: A shift of all projected CF community custody beds shown in Table 2-18 was made here to instead allocate them to the CCCs since those transitional pre-release inmates should all be housed and managed at the CCCs, except for a small retained unit at the WCCC..

Source: Carter Goble Associates, Inc., October 2003

*As noted in the text just before the table, it is important to remember that the above 5- and 10-year projection results should be viewed as a "what if" scenario to see what recent historic security levels would yield if continued. That outcome, however, is very much a function of the overcrowding condition of the entire system and thus should not be considered as an ideal to be continued. It*



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*does suggest though that the Hawaii system and obviously dedicated professional staff have shown an ability to manage inmates safely with far fewer maximum security cells than many systems.*

For this master plan the actual number of recommended beds to be added will differ from the Table 3-4 scenario based on logical facility and housing unit sizing schemes and recommended improved security ratio allocations. The new recommended distribution to create a higher number of single-bunked cells, especially for CCCs, will be in line with the recommended security level ratios as shown in Tables 3-2 for CFs and 3-3 for CCCs. The following section will recommend expansions for selected existing facilities and the construction of new facilities over the 10-year planning and implementation period using the total projected new bed needs for each phase as general targets.

## RECOMMENDED 10-YEAR CAPITAL IMPROVEMENTS GROWTH PLAN

### Overall Strategy

From the Chapter 2 capacity needs projections and the preceding existing facilities assessments and improvement recommendations it is clear that the Hawaii correctional system is in need of a major expansion just to meet existing needs let alone projected future growth. Furthermore, the return the 1,400+ Hawaii inmates currently housed in mainland prisons was given as a master plan goal by the PSD at the start of this planning effort. Compounding the situation at the same time for the various reasons and conditions as previously described several of the facilities need to be replaced and several are either not physically capable of or are not financially infeasible for expansion. Thus a combination of major facility expansions and replacements with totally new correctional facilities (CFs) and community correctional centers (CCCs) will be needed. The recommended expansions and new facilities will be phased over the 10-year term to correspond to the timing of need so that new capacity is on-line when needed but not so early as to incur significant vacancies and so that the multiple projects could be financed over several years rather than all at once.

The most prevalent deficiencies found were: (1) lack of sufficient preventive and routine maintenance and timely repairs leading to added building and infrastructure deterioration and higher operating costs; (2) surrounding land development with higher value land conversions and in several cases blocking CF or CCC site expansions; (3) obsolete and operationally inefficient correctional space designs and layouts; and (4) inadequate spatial conditions that limit staffing efficiency and effective security and inmate supervision. Resolving these needs will require a combination of expanding those existing facilities worth retaining, making some interim or short-term capacity additions, and building some entirely new facilities. A capacity growth plan scheduled to meet the projected 10-year bed needs should include the following expansion components:

#### 1. Expand Existing Facilities for Long-range Use

- Halawa Medium Security CF
- Kulani CF



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2. Expand Existing Facilities in Phase 1 2004-2008 for Short-term or Temporary Use (unless recommended total replacements can be made before the end of Phase 2)
  - Waiawa CF
  - Women's CCC
  
3. Build New Facilities in Phases 1 and 2 Over 10 years – 2004-2013
  - Build a new Secure Special Needs Treatment CF – Phase 1
  - Demolish Halawa Special Needs CF – Phase 1
  - Replace Kauai, Maui and Oahu CCCs – Phase 1
  - Build new West Hawaii CC in Kona – Phase 1
  - Replace Hawaii CCC (except Hale Nani WFC) – Phase 2
  - Replace Waiawa CF – Phase 2
  - Replace Women's CCC – Phase 2
  - Build a new medium security CF – Phase 2
  - Build two new minimum security CFs – Phase 2
  
4. Development Option of CF Correctional Complex on One Site on Oahu (instead of six sites)
  - To contain: New Special Needs Treatment CF; WCF replacement; WCCC replacement; new medium security CF; 2 new minimum security CFs; central production kitchen, RAD/Intake unit, medical clinic and warehousing.

Implementing this strategy plan will obviously require major capital investment, which if scheduled in two phases over 10 years would be less demanding financially than attempting to fix everything at once or continuously.

**Scheduling** – A 10-year incremental expansion plan is recommended using the two 5-year completion horizons of 2008 and 2013 as previously discussed for the general capacity needs targets to be on-line by the end years of those two terms. As explained earlier each 5-year term would allow as much as two years for completing planning, site selection and design and up to the following three years for completing construction. While some elements of the plan, especially expansions, would certainly be able to be completed more quickly (two to three years), these two terms should allow sufficient time for both site and environmental studies and acquisition where needed and a conventional design/bid/build delivery method for any large expansions or entirely new facilities on new sites.

Some methods such as a turnkey design/build/finance procurement or design-build/construction manage at-risk could possibly speed up the time, but in the consultant's experience it is best to at least plan for a conventional approach, which would likely be the most time consuming. Also, if a privatization scheme was considered for any new facility that approach could also result in a quicker delivery time in addition to a shift of the State's cost burden from capital project funding to annual operating expense via contracted per diem payments per prisoner housed.

**Master Planning Concept Guidelines** – For a system-level master plan, as compared to individual facility planning and architectural programming broad general estimators must be used such as those that were used in the 1991 master plan. For this master plan update the gross square foot



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per bed estimators used in 1991 are also used herein along with others as shown in Appendix A in detail and summarized as follows:

- Housing Expansions = 200 SF/single cell, 130 SF/double bunk cell, 200 SF/dorm bed
- New Correctional Facilities = 450 SF/single cell, 350 SF/double bunk cell, 300 SF/dorm bed
- New CCCs = 350 SF/single cell, 250 SF/double bunk cell, 250 SF/dorm bed
- Bed security level conditions:
  1. Maximum security – single-bunked cells (needed for both general population capacity and for non operating capacity special management cells)
  2. Close custody – single- or double-bunked cells depending on custody needs and physical security conditions available. Such cells should be a minimum of 80 NSF so that both double-bunking and/or 23-hour single-bunk confinement is suitable when needed within ACA space standards.
  3. Medium security – double-bunked cells
  4. Low-medium security – multiple occupancy dormitories with fixed privacy partitions for every four inmates with the same medium security outer wall construction as a medium security cell unit, but with no cell fronts.
  5. Minimum to low-medium security – multi-occupancy dormitories with privacy partitions (with or without a security perimeter fence or building envelope)
  6. Community security – multi-occupancy dormitories with or without privacy partitions and less heavy construction than a minimum security dormitory (usually without a confining security perimeter) that could be at a CCC site or located separately in the community.
  7. Community residential – non-secure residential small group housing that by design could be close to or in a residential or other area that would fit with the character of its surrounds and also serve as a day reporting and counseling center.
- Housing pod or unit recommended sizes:
  1. Multiples of 8, 16, 32, and 64 beds for cell housing either single- or double-bunked. The smallest cell units are used for higher security and special management units and the larger sizes for general populations usually of medium or minimum security. The smallest size units of 8 and 16 beds should be minimized due to their relatively low operational staff ratio. Also, a select number of general population maximum security 64-bed single-bunked cells can also be safe and efficient for general population maximum custody groups and have even proven so in special needs treatment facilities for mentally disordered inmates and substance abuse treatment. While variations exist at the high end such as 48- and 56-bed cell units a 64-bed cell unit is recommended due to its greater construction and operating efficiency and proven success elsewhere.
  2. Open dormitories should have a maximum of 50 beds. The American Correctional Association Physical Plant Standards for both prisons and jails recommend that open dormitories should not exceed 50 inmates and should have privacy partitions. The consultant has found this to be a sound guideline from both a security and operating efficiency standpoint.



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- Approximately 10% of the operating bed capacity should be provided as a dedicated special needs treatment unit in each CCC and at the same ratio for the entire prison system as a dedicated special needs facility supporting the entire system.
- All correctional facilities should have the equivalent of approximately 5% of their operating bed capacity as additional non-operational capacity beds for use as temporary special management single-bunked cells, holding rooms and medical observation/recuperation beds.

**Facility Staffing Guidelines** – The Hawaii system currently has one of the lowest ratios of the number of total institutional staff to inmates of any system in the U.S. For example in the 2001 Corrections Yearbook, which has the latest available computations of the ratio of inmates to institutional staff where Hawaii and most all states reported data, Hawaii had a ratio of 1:1.9 compared to a Nation-wide average of 1:3.1. For correctional officers only the ratio was 1:3.7 for Hawaii versus 1:5.4 Nationally. Minnesota recognized as being one of the Nation’s model corrections systems having one of the lowest incarceration rates of any state had ratios of 1:2.1 for all staff and 1:3.9 for correctional officers. The Federal Bureau of Prisons reported a 1:4.1 ratio for all staff and 1:9.7 for correctional officers.<sup>3</sup>

From the standpoint of inmate supervision and the ability to provide corrective, rehabilitative and treatment services by staff Hawaii would appear to be in an enviable position. For example, Hawaii reported in the same Yearbook a ratio of 1:17 mental health staff, whereas the National average was 1:73. When, however, the some 1,400 Hawaii inmates currently held in mainland prisons are returned to Hawaii prisons the question will be can the annual operating expense to the State for such a level of staffing be sustainable.

Jail Versus Prison Staffing – If and when the PSD reaches a point when funding for facility staffing becomes more constrained there are two guidelines that may be useful to consider or at least reference as benchmarks. In the ACAs 2002 – 2004 National Jail and Adult Detention Directory of 44 states reporting that did not have combined jail and prison systems like Hawaii the average ratio of staff to inmates was 1:5.3.<sup>4</sup> However, in light of the system’s existing low ratio the PSD may want to consider an initial staff to inmate target ratio of 1:3, which is found frequently to be prevalent in successful jails that provide programs, some degree of treatment and work opportunities.

For the correctional facilities the variations will be substantial from the recommended “Special Needs Correctional Treatment Facility,” which can be expected to have a ratio that approaches 1:1 to minimum security facilities that should be closer to 1:5. It is recommended that given the system’s current relatively low staffing ratio that a reasonable target ratio goal for all prisons combined may be 1:2.1 similar to Minnesota as compared to Hawaii’s current 1:1.9.

Ultimately, as some of the new minimum and medium security prisons are activated, which should have a much higher ratio of staff to inmates than the existing facilities, the ratio should be able to reach 1:2.5 for all prisons combined, which would still be significantly below the reported national average of 1:3.1. Accordingly, initial target benchmarks for planning purposes are recommended for any new CF or CCC as follows, but are varied for special custody facilities. For recommended expansions variations on these ratios are used depending on the size and scope of the addition.

<sup>3</sup> The 2001 Corrections Yearbook, Criminal Justice Institute, Inc., Middletown, Connecticut.

<sup>4</sup> National Jail and Adult Detention Directory 2002 – 2004, American Correctional Association.



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For example, where a small addition of one or a few housing pods are added the ratio will be relatively high since the need will be primarily for housing officers. For large additions, on the other hand, which sometimes are as large as a facility the ratios will be smaller due to the need for adding support services and programs staff.

<b>New CFs Staffing Target Ratios</b>	<b>New CCCs Staffing Target Ratios</b>
<ul style="list-style-type: none"> <li>▪ Correctional Treatment Facility = 1:1.2</li> <li>▪ Medium Security Facilities = 1:3</li> <li>▪ Minimum Security Facilities = 1:4</li> </ul>	<ul style="list-style-type: none"> <li>▪ CCC = 1:3 (initial target be improved as new facilities prove successful)</li> </ul>

**Plan Description**

**Existing Facilities Continued Use at 2003 Rated Capacities** – Table 3-5 presents a recommended use plan for the system’s existing facilities and beds as rated for ACA standards-compliant capacity by the PSDs 2001 Capacity Analysis Study and by the consultant’s review during this master plan update study. Obviously the current facilities and their recommended rated operational bed capacities should be used as long as needed and cost/beneficial to do so for their combined 3,369 operational capacity. As can be seen in Table 3-5 the existing facilities (excluding the Halawa Special Needs Facility recommended for demolition in Phase 1) provide an operational and special management bed capacity as rated in October 2003 and summarized as follows:

<b>Beds Available in 2003</b>	<b>Correctional Facilities</b>	<b>Community Correctional Facilities</b>	<b>Total Beds</b>
Male Ops. Beds	1,500	1,432	2,932
Female Ops. Beds	260	177	437
<b>Ops. Totals</b>	<b>1,760</b>	<b>1,609</b>	<b>3,369</b>
Special Mgt. Beds	89	52	141

**Expansions and New Facilities** – The 10-year development plan recommends: (1) permanent expansions to existing prisons where feasible (Halawa MSCF and Kulani CF), (2) short-term interim expansions at WCF and WCCC; and (3) replacement where desirable (Halawa SNCF in Phase 1, Waiawa CF and WCCC in Phase 2). As noted above the Halawa Special Needs CF is recommended for demolition in Phase 1. A new much larger “Special Needs Secure Treatment Facility” is recommended as a top priority in Phase 1. Also it is recommended that all four CCCs eventually be replaced as funding availability permits (recommend Kauai, Oahu, and Maui in Phase 1, plus a new west Hawaii CC in Kona; and the existing Hawaii CCC in Hilo during Phase 2) due to the combination of their overcrowding and lack of sufficient adjacent land for expansion; poor



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security conditions, operational efficiency and effectiveness; declining state of repair and building operating cost efficiency; and increasing adjacent land and private sector development values.

Table 3-6 summarizes the recommended growth plan for the additional new CF beds needed by gender, security level and by phase. For the new CCC beds needed the recommendations are also given by county in addition to gender, security level and phase. However, the operational bed counts shown for the four counties are for their total CCC bed needs, rather than just the additional beds, since their total replacement is recommended. Thus, with this recommended 2-phase 10-year plan all new correctional beds will be added by a combination of permanent expansions at Kulani CF and Halawa MSCF with demolition of the Halawa SNCF; short-term interim expansions for the Waiawa CF and WCCC assuming that they cannot be replaced in Phase 1; and three CCCs in Phase 1 and one in Phase 2. Both the Waiawa CF and WCCC are recommended for total replacement at new locations in Phase 2 unless sufficient funding was available in Phase 1. Table 3-7 and Figures 3-11 and 3-12 summarize the recommended 10-year growth plan by phase.



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Table 3-5  
Existing Facilities Recommended Bed Allocations

Existing Facility	Existing Beds by Security Level Classification									
	Operational Beds						Special Management Beds			
	Maximum	Close	Medium	Minimum	Community	Totals	Seg./Spc. Mgt.	Temp. Holding	Medical	Totals
<b>Correctional Facilities</b>										
Halawa Medium Security		248	744			992	44		14	58
Kulani				160		160		8		8
Waiawa				348		348		2	2	4
Womens CCC	34			206	20	260	13		6	19
<b>Totals Male</b>	0	248	744	508	0	1,500	44	10	16	70
<b>Totals Female</b>	34	0	0	206	20	260	13	0	6	19
<b>TOTALS</b>	<b>34</b>	<b>248</b>	<b>744</b>	<b>714</b>	<b>20</b>	<b>1,760</b>	<b>57</b>	<b>10</b>	<b>22</b>	<b>89</b>
<b>Community Corr. Facilities</b>										
Hawaii - male	22		64		100	186		3		3
Hawaii - female				40		40				
Kauai - male			38	80		118		8		8
Kauai - female			10			10				
Maui - male	6		96	52	100	254	6	4		10
Maui - female	15			32		47				
Oahu - male			516	188	170	874		36	3	39
Oahu - female				80		80				
<b>Totals Male</b>	28	0	714	320	370	1,432	6	51	3	60
<b>Totals Female</b>	15	0	10	152	0	177	0	0	0	0
<b>TOTALS</b>	<b>43</b>	<b>0</b>	<b>724</b>	<b>472</b>	<b>370</b>	<b>1609</b>	<b>6</b>	<b>51</b>	<b>3</b>	<b>60</b>
<b>GRAND TOTALS</b>	<b>77</b>	<b>248</b>	<b>1468</b>	<b>1186</b>	<b>390</b>	<b>3,369</b>	<b>63</b>	<b>61</b>	<b>25</b>	<b>149</b>

Source: Carter Goble Associates, Inc., October 2003.



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Table 3-6  
Recommended New Beds by Phase and Security Level

Security Level	(Prisons) Correctional Facilities			(Jails) Community Correctional Centers										
	Male	Female	Total CF	Hawaii		Kauai		Maui		Oahu		Total		Total CCC
				Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
<b>Phase 1 - 2004 - 2008</b>														
Maximum	128	8	136	16	4	16	4	32	8	64	16	128	32	160
Close	128	8	136	16	4	16	4	32	8	64	16	128	32	160
Medium	896	192	1,088	128	16	96	32	224	32	640	64	1,088	144	1,232
Minimum	500		500	75	25	50	25	150	50	450	50	725	150	875
Community			0	25	50	75	25	150	75	450	150	700	300	1,000
<b>Operational Total</b>	<b>1,652</b>	<b>208</b>	<b>1,860</b>	<b>260</b>	<b>99</b>	<b>253</b>	<b>90</b>	<b>588</b>	<b>173</b>	<b>1,668</b>	<b>296</b>	<b>2,769</b>	<b>658</b>	<b>3,427</b>
Special Management	96	10	106	12	4	12	4	32	8	88	16	144	32	176
<b>Phase 2 - 2009 - 2013</b>														
Maximum		8	8	16	4							16	4	20
Close		8	8	16	4							16	4	20
Medium	544	256	800	128	16			32		96		256	16	272
Minimum	1450	240	1690	75	25			25		25		125	25	150
Community			0	25	25			25		25	50	75	75	150
<b>Operational Total</b>	<b>1994</b>	<b>512</b>	<b>2,506</b>	<b>260</b>	<b>74</b>	<b>0</b>	<b>0</b>	<b>82</b>	<b>0</b>	<b>146</b>	<b>50</b>	<b>488</b>	<b>124</b>	<b>612</b>
Special Management	100	24	124	12	4			0	0	0	0	12	4	16
<b>Operational Grand Total</b>	<b>3,646</b>	<b>720</b>	<b>4,366</b>	<b>520</b>	<b>173</b>	<b>253</b>	<b>90</b>	<b>670</b>	<b>173</b>	<b>1,814</b>	<b>346</b>	<b>3,257</b>	<b>782</b>	<b>4,039</b>

Note: The recommended new beds for Correctional Facilities are to be added to the 2003 stock of 1,760 operational beds and 89 special management beds. However, in the case of the Community Correctional Centers the recommended new beds are the total needed (except for the retention of the 100-bed Hale Nani WFC on Hawaii) to replace the existing four centers currently rated at 1,609 operational beds and 52 special management beds.

Source: Carter Goble Associates, Inc., October 2003.



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Table 3-7  
10-Year Capital Improvement Growth Plan Summary

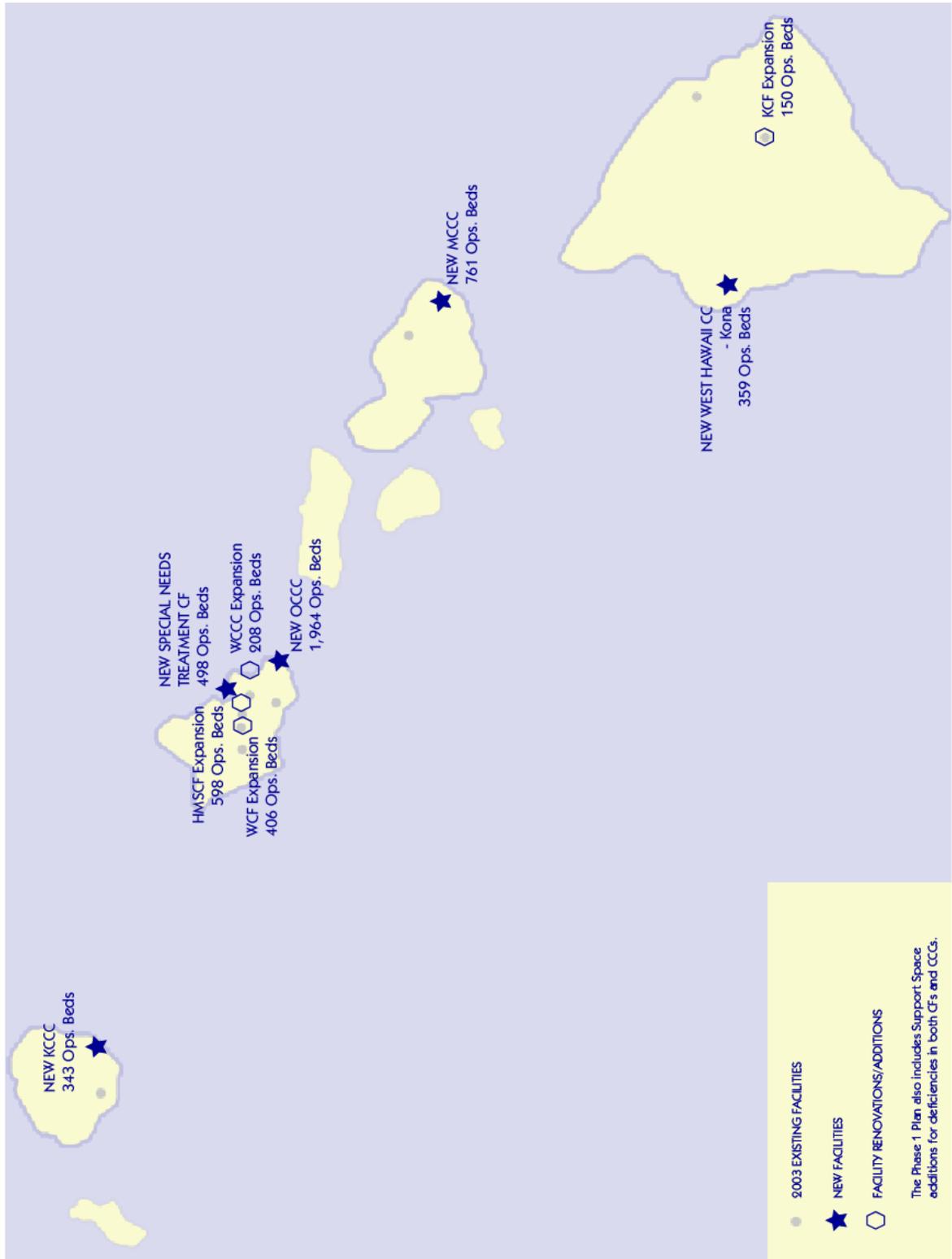
<p><b>PHASE 1 – 2003 – 2008</b> (build 1,860 CF ops. beds &amp; 3,427 CCC ops. beds)</p>	<p><b>PHASE 2 – 2009 – 2013</b> (build 2,570 CF ops. beds &amp; 612 CCC ops. beds)</p>
<p><b>Facility Expansions</b> 1,362 CF ops. beds</p> <ol style="list-style-type: none"> <li>1. Unless affordable to replace in Phase 1, add a 256-bed medium unit, 150-bed minimum unit, 32 spc. mgt. cells at Waiawa CF with needed support improvements (<i>short-term</i>).</li> <li>2. Unless affordable to replace in Phase 1, add 8 maximum, 8 close, 192 medium beds, 10 spc. mgt. cells at WCCC with needed support improvements (<i>short-term</i>).</li> <li>3. Add 150 minimum security beds, 8 spc. mgt. cells at Kulani CF with needed support improvements.</li> <li>4. After new treatment facility available demolish HSNCF and reuse site for HMSCF expansion for 448 medium security beds, 150-bed minimum security unit, 32 spc. mgt. cells.</li> </ol>	<p><b>Facility Expansions</b> 64 CF ops. beds <i>contingency</i>, 278 CCC ops. beds</p> <ol style="list-style-type: none"> <li>1. Add ONLY if recommended new Women’s CF is not funded: a 64-bed medium unit at the WCCC.</li> <li>2. Add 82 male ops. beds at the Maui CCC.</li> <li>3. Add 146 male ops. beds and 50 female ops. beds at the Oahu CCC.</li> </ol>
<p><b>New Facilities</b> 498 CF ops. beds, 3,427 CCC ops. beds</p> <ol style="list-style-type: none"> <li>1. 498-bed correctional special needs treatment facility, 24 spc. mgt. cells, either at a new Oahu site or at Halawa complex.</li> <li>2. 1,964 ops. bed CCC on Oahu, 104 spc. mgt. cells (1,364 ops. beds jail near court and 600 community custody ops. beds other locations)</li> <li>3. 761-bed CCC on Maui, 40 spc. mgt. cells</li> <li>4. 343-bed CCC on Kauai, 16 spc. mgt. cells</li> <li>5. 359-bed West Hawaii correctional center near Kona courts, 16 spc. mgt. cells</li> </ol>	<p><b>New Facilities</b> 2,506 CF ops. beds; 334 CCC ops. beds</p> <ol style="list-style-type: none"> <li>1. 334-bed Hawaii CCC on new site near Hilo, plus 16 spc. mgt. cells and retention of the 100-bed Hale Nani Work Furlough Center.</li> <li>2. 613-bed medium security CF with 288 medium and 325 minimum security beds, 32 spc. mgt. cells.</li> <li>3. 350-bed minimum security CF with 16 spc. mgt. cells.</li> <li>4. Replace WCCC @ 512 ops./24 spc. mgt. cells.</li> <li>5. Replace WCF @ 756 ops./36 spc. mgt. cells.</li> <li>6. 275-bed minimum security CF, 16 spc. mgt. cells</li> </ol>

Note: “Short-term” temporary additions are due to entire facility replacement being needed by 2013. Also, 144 HMSCF close custody double-bunked cells are recommended to be reclassified as 144 maximum security single-bunked cells. Source: Carter Goble Associates, Inc., October 2003.



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Figure 3-11  
10-Year Capital Improvement Plan - Phase 1





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Figure 3-12  
10-Year Capital Improvement Plan - Phase 2





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**PHASE 1 – 2004 - 2008** (build 1,860 CF operational beds and 3,427 CCC operational beds)

1. **Reduce Operating Counts** – As recommended new beds are added and new facilities completed and activated during Phase 1 the 2003 actual operational bed counts should be reduced at all existing facilities to correspond to the rated capacities as recommended by in Table 3-5. This should include reclassifying 144 close custody cells at the HMSCF to 144 single-bunked maximum security general population cells once new space is available to relocate 144 close custody inmates.
2. **Fund and Implement a Preventive and Routine Maintenance Program** – A preventive and routine maintenance plan for all facilities should be designed, fully funded, staffed and implemented in 2004. At a minimum all “Changes and Improvements Needed” as recommended for each existing facility in the “Existing Facilities Capacities and Improvement Recommendations” section of this chapter should be corrected or in process within 12 months. This program should include the provision of adequate maintenance staffing at each facility and a Department Maintenance Director with one technical assistant at the headquarters level. The Maintenance Director should assist local maintenance supervisors to develop annual maintenance plans and budgets; carry out independent periodic monitoring and evaluation checks on maintenance and repair status at each facility; and make recommendations to each local Maintenance Supervisor and Warden and when needed to the PSD Director in regard to sustaining an adequate preventive and routine maintenance program at all facilities.

**Phase 1 – Expansion of Existing Facilities**

3. **Waiawa CF Short-term Expansion** – Unless the replacement of the WCF could be accelerated to Phase 1 instead of waiting until Phase 2 at a new site, there is still need for some significant capacity expansions for substance abuse treatment to accommodate both current needs and projected growth. Given the immediacy of the need the option of using lower cost temporary structures could be considered until complete replacement is financially feasible. The WCF plays a critical role in the system as the primary location for male substance abuse treatment, which must be continued and expanded as soon as possible, not just at the WCF but at all correctional facilities. The expansion of substance abuse treatment will require both expansions at the WCF and other existing facilities as well as the addition of new facilities in order to implement a “continuum of treatment” as was originally recommended in 1991. As noted previously providing treatment to inmates with a substance abuse dependency throughout their stay is much more effective than providing it only near the end of sentence or just periodically.

Some infrastructure improvements (water and sewer) and support services expansions will also be needed at the WCF as noted in the “Existing Facilities Capacities and Improvements Recommendations” section. The WCF expansions should include operational capacity additions of 256 low-medium security dorm beds and 150 new minimum security dorm beds as follows:



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- Construct a 256-bed low-medium security unit of four 64-bed two-tiered dorm pods with a secure perimeter. This is intended to enable additional prisoners besides minimum custody inmates needing substance abuse treatment to be transferred to the WCF.
- Add a 150-bed minimum security dormitory subdivided into three 50-bed dorm wings to accommodate additional minimum security inmates needing substance abuse treatment.
- Add 32 single-bunked cells non-operational count special management beds to include a 24-cell segregation unit as part of the new medium security unit construction inside its secure perimeter and 8 new medical observation/ recuperation cells.

Preliminary Added Staffing Estimate @ 1:4 = 110

**4. WCCC Short-term Expansion** – Similar to the WCF the WCCC is recommended for eventual replacement in Phase 2, but will need to have some short-term temporary expansions in order to accommodate growth projections unless replacement by a larger women’s prison could be made immediately. In the existing facility the primary need is for medium security beds with a small number of maximum and close custody cells as follows:

- A 16-bed high security unit consisting of 8 maximum security single-bunked cells and 4 double-bunked close custody cells to serve as a transitional unit both for inmates prior to returning to the general population and for assessment and observation prior to placement in the maximum unit if needed. This pod may also be useful as an initial intake unit for those new arrivals who need further assessment and testing prior to making a housing assignment.
- 192 medium security beds in double-bunked cells that would be organized in two separate units of three 32-bed housing pods. Three of the 32-bed pods should be designated as the “female special needs unit” for those with mental disorders and co-occurring substance abuse and mental disorders who would be disruptive in general population without treatment. This unit would serve a comparable function as the recommended new Special Needs Secure Treatment CF for male inmates. The other 3-pod unit would be for general population inmates who need a cell assignment, but not to the extent of a maximum or close custody cell. The 3<sup>rd</sup> pod could serve as a more normative intake unit as needed in conjunction with the few cells in the maximum/close unit, plus handle occasional overflow.
- 10 single-bunked cells as a non-operational count special management pod for special observation, protective custody, administrative and disciplinary segregation.

Preliminary Added Staffing Estimate @ 1:3 = 73

**5. Kulani CF Expansion** – Kulani CF plays an important role in providing sex offenders the treatment and behavior management training that is critically needed prior to their release and especially reinforced near the end of a long-term sentence. Like the WCF it also provides an important pre-release/transitional environment for other non-sex offender inmates as well after completing a long-term sentence in a higher security facility, but before they move to community custody or a work furlough assignment at a CCC. Assuming that the 2005 planned upgrades to the sewer system are implemented and that an economical



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solution for increasing water supply is possible, a 150-bed expansion should be made in order to expand the system's sex offender treatment capacity due to the substantial growth in the number of sex offenders since 1991 with a treatment waiting list that continues to grow. The Kulani expansion should include:

- 150-bed minimum security dormitory of three 50-bed wings.
- 8 non-operational count special management single-bunked cells for temporary holding and segregation to replace existing temporary holding cells.

Preliminary Added Staffing Estimate @ 1:4 = 40

In the event that the annual operational cost of assuring an adequate fresh water supply and sanitary sewage treatment at Kulani begins to exceed an affordable benefit/cost ratio the PSD should consider the construction of a new facility at another location. The role played by Kulani is important for the treatment of sex offenders who will be released some day, as well as other non-sex offender inmates who also need a transitional environment toward the end of a long-term sentence. However, the same functions could be provided at a lower annual facility operating cost at another location. *In the long-run the sex offender treatment program could also be included as a separate unit in a medium security prison, which would allow many more inmates not eligible for minimum security to participate in treatment.*

**6. Halawa MSCF Expansion** – After the Halawa SNCF is demolished that site adjacent to the HMSCF should be used for the expansion of the HMSCF with a new medium security unit and a new minimum security unit along with any support and program services spaces needed for the entire facility at the expanded capacity. The new units should be joined to the existing facility in a manner that inmate movement to services, industries and other program spaces is readily facilitated. An architectural program should be completed during Phase 1 to confirm the exact distribution of housing units needed as soon as the demolition of the Halawa SNCF is begun, which should follow the opening of the recommended new 498-bed Special Needs Treatment CF either at a new site or at the Halawa complex.(new land due east of the current recreation yard). The total Halawa MSCF expansion should add approximately 448 medium security beds, 150 minimum security beds and 32 special management cells as follows:

- 448-bed medium security double-bunked cells consisting of six 32-cell 64-bed pods and two 16-cell 32-bed pods with one serving as an intake unit and the other for protective custody.
- 150-bed minimum security dormitory with three 50-bed wings to serve as a transitional unit for HMSCF inmates prior to transfer to a lower security or community assignment. Some of these minimum security inmates would be assigned from other facilities if needed to provide a sufficient number of work crews for both inside and outside facility maintenance and support service operations.



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- 32 non-operational count special management single-bunked cells to include: one 24-cell pod for administrative and disciplinary segregation and one medical observation/recuperation pod of 8 cells.

Preliminary Added Staffing Estimate @ 1:4 = 158

It is important to note that according to Chief of the Wastewater Branch of the State Department of Health's Environmental Management Division the addition of sanitary sewer collection capacity is likely to be needed for any expansion of bed capacity at the Halawa site. If the cost of expansion is found to be extremely high the option of locating a new large site on Oahu that could hold several new facilities as a correctional complex could be a more economical development strategy compared to acquiring separate sites for each new facility.

### Phase 1 – New Facilities

- 7. New Correctional Special Needs Treatment Facility** – The new Special Needs Treatment CF could either be located at another site on Oahu or on available land at the Halawa complex. If located at Halawa the land due east of the MSCF recreation yard should be acquired to facilitate construction of a new Special Needs Treatment Facility that would replace the existing Halawa Special Needs Facility. This new special needs treatment facility should provide the special inmate management and a continuum of treatment design needed for inmates with acute, moderate and chronic mental disorders who would either be disruptive and/or not capable of living in a general population facility without treatment. The facility would also serve other special needs inmates including the developmentally disabled, inmates with co-occurring substance abuse dependencies and mental disorders and those needing substance abuse treatment or sex offender treatment who also need a higher level of security with treatment than is possible at the Kulani CF, Waiawa CF or any other facility. This facility should provide evaluations, diagnosis, stabilization and treatment that would include medication coupled with a treatment design that teaches behavioral and medication compliance as well as activity and treatment program compliance. Any inmate in the Hawaii system found to at least temporarily not be safely manageable in their current facility could be transferred to this facility for diagnosis, treatment and development of an individualized long-range treatment plan that to enable them to eventually return to a lower security facility and eventually a community assignment prior to release.

The overall mission of this facility should be as a transitional one to equip inmates with the treatment, education, and behavior management skills needed to allow them to be non-disruptive and successful in a general population prison and to help equip them for a successful transition and eventual release. In this way the facility should have a constant turnover of inmates with those who are successfully transferred to another general population facility being continually replaced by inmates in need of assessment, diagnosis and treatment, which would include some inmates who will relapse in other facilities or the community. All inmates of this facility should have individualized treatment plans in which they participate in formulating with professional treatment staff.



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The facility should have a maximum security perimeter due to the nature and classification of some of the inmates assigned. However, the internal housing design and construction would be multi-custody in order to provide for a continuum of housing units commensurate with the continuum of care and treatment design that should be typical of a special needs treatment facility. Architectural programming for this specialty type of design should commence in early 2004 for an approximate 498-bed correctional special needs treatment facility to confirm the specific size, custody breakdowns and various spaces needed for the operation of the treatment designs to be developed by the PSD. The proposed size is equivalent to approximately 11% of the 2013 projected number of male CF beds needed, but should have ground space reserved for long-term future expansion as well. Based on the consultant's and other treatment specialists experience with planning special needs treatment facilities an initial housing security group breakdown is suggested as follows for planning and budgeting purposes:

- 128 single-bunked maximum security cells consisting of four 32-cell pods (one for RAD intake and a classification).
- 128 close custody double-bunked cells consisting of four 16-cell 32-bed pods (three pods serving as step-down/ step-up units between maximum and medium security and one as a RAD intake/diagnostic unit).
- 192 medium security double-bunked cells consisting of three 32-cell pods with two serving as this facility's general population transitional units prior to transfer to a general population facility and one serving as part of the RAD intake/diagnostic unit.
- 24 non-operational count special management cells to include one 12-cell pod for administrative and disciplinary temporary segregation and one 12-cell medical infirmary observation/recuperation single cells.
- One 50-bed minimum security dormitory for inmates capable of assignment to a work crew to support the operation of this facility for both inside and outside facility operational and maintenance needs. This could either be used as a minimum step-down transitional unit or for a separate assigned work crew of non-special needs inmates, depending on the availability of enough minimum security inmates.

Preliminary Staffing Target @ 1:1.75 = 298

As noted elsewhere according to State staff the addition of sanitary sewer collection capacity is likely to be needed for any expansion of bed capacity at the Halawa site. If the cost of expansion is found to be extremely high the option of locating a new large site on Oahu that could hold several new facilities as a correctional complex could be a more economical development strategy compared to acquiring separate sites for each new facility.

**8.-10. Three New CCCs and One New Regional Correctional Center** – Based on the combination of the severity of existing conditions and the projected volume of need three new replacement CCCs should be built on Kauai, Maui and Oahu as soon as possible. Also, on Hawaii due to its geographic size and the high growth trend on the western side at Kona a new 2<sup>nd</sup> correctional center is recommended (this was also recommended in the 1991 master plan). The design of these facilities should provide a contemporary flexible



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design concept for a multi-security jail (maximum, medium and minimum security housing units) with an adjacent community custody unit and a day reporting center. The latter two units could be on separate sites from the secure detention facilities if preferred, but would be more economical to operate if co-located with their respective jails.

Table 3-3 is used as a general guide to develop the distribution of beds by a security levels. The exact numbers to be designed and built would be determined during the development of the architectural program for guiding the design of each facility. Accordingly, the four new facilities by county should have the following approximate total number of beds by security levels:

The preliminary recommendation for apportioning the new West Hawaii County Regional CC capacity between it and the County CCC in Hilo is based on recent arrest data supplied by the HCCC Warden that showed approximately 50% of the County's arrestees come from west Hawaii and 50% from the Hilo and east Hawaii area.

### **West Hawaii County Regional CC at Kona**

#### Males (260 operational beds)

- 16 beds maximum security in single-bunked cells
- 16 beds close custody in single-bunked cells
- 128 beds medium security double-bunked in two 32-cell pods
- 75 beds minimum security in one 50-bed and one 25-bed dormitory wing
- 25 beds community custody in one dormitory
- 8 beds non-ops. capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 4 beds non-ops. capacity for medical observation/ recuperation

#### Females (99 operational beds)

- 4 beds maximum security in single-bunked cells
- 4 beds close custody in single-bunked cells
- 16 beds medium security double-bunked in one 16-bed pod
- 25 beds minimum security in one dormitory
- 50 beds community custody in one 50-bed dormitory
- 2 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 126

### **Kauai County CCC**

#### Males (253 operational beds)

- 16 beds maximum security in single-bunked cells
- 16 beds close custody in single-bunked cells
- 96 beds medium security double-bunked in one 32-cell pod and one 16-cell pod



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- 50 beds minimum security in one dormitory
- 75 beds community custody in one 50-bed dormitory and one 25-bed dormitory
- 8 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 4 beds medical observation/ recuperation

Females (90 operational beds)

- 4 beds maximum security in single-bunked cells
- 4 beds close custody in single-bunked cells
- 32 beds medium security double-bunked in one 16-cell pod
- 25 beds minimum security in one dormitory
- 25 beds community custody in one dormitory
- 2 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 120

**Maui County CCC** (Phase 1 totals only except all sp. mgt. cells in Phase 1 – some operating bed expansion needed in Phase 2)

Males (588 operational beds)

- 32 beds maximum security in single-bunked cells
- 32 beds close custody in single-bunked cells
- 224 beds medium security double-bunked in three 32-cell pods and one 16-cell pod
- 150 beds minimum security in three 50-bed open dormitory wings
- 150 beds community custody in three 50-bed open dormitory wings
- 24 beds non-ops. capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 8 beds non-ops. capacity for medical observation/ recuperation

Females (173 operational beds)

- 8 beds maximum security in single-bunked cells
- 8 beds close custody in single-bunked cells
- 32 beds medium security double-bunked in one 16-cell pod
- 50 beds minimum security in one open dormitory
- 75 beds community custody in one 50-bed and one 25-bed dormitory
- 6 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 267



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**Oahu County CCC** (Phase 1 totals only except all sp. mgt. cells in Phase 1 – some operating bed expansion needed in Phase 2)

Males (1,668 operational beds)

- 64 beds maximum security in single-bunked cells
- 64 beds close custody in single-bunked cells
- 640 beds medium security double-bunked in ten 32-cell pods
- 450 beds minimum security in nine 50-bed open dormitory wings
- 450 beds community custody in nine 50-bed open dormitory wings
- 72 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 16 beds medical observation/ recuperation

Females (296 operational beds)

- 16 beds maximum security in single-bunked cells
- 16 close custody in single-bunked cells
- 64 beds medium security double-bunked in two 16-cell pods
- 50 beds minimum security in one open dormitory
- 150 beds community custody in three 50-bed dormitories
- 8 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 8 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 690

**PHASE 2 – 2009 - 2013** (build 2,506 CF operational beds and 612 CCC operational beds)

**Phase 2 – Expansion of Existing Facilities**

1. **WCCC Housing Addition** (*Contingency Option*) – This addition would only be needed if the recommended new women's CF was not funded for design and construction during Phase 2. This addition to the old WCCC would then be needed after 2009 in order to meet the female beds projected by the end of Phase 2. As an addition to the WCCC this unit should include:

- 64 female beds medium security double-bunked in one 32-cell pod

Preliminary Added Staffing Estimate @ 5 FTE/Pod = 5

2. **MCCC Housing Addition** – Assuming that the new Maui CCC was completed and opened during Phase 1 at its initial size there would be a need to add 82 operational beds by 2013. Provided that the new facility's site master plan that would have been completed in Phase 1



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as part of the facility's original design documents included expansion ground space the following additions may be a feasible breakdown:

- 32 male beds medium security double-bunked in one 16-cell pod
- 25 male minimum security beds on one dormitory
- 25 male community custody beds in one dormitory

Preliminary Added Staffing Estimate @ 1:5 = 16

- 3. OCCC Housing Additions** – Based on the 10-year projected bed need the new Oahu CCC built and opened in Phase 1 would need to have a Phase 2 196-bed housing expansion completed by 2013. Similar to the MCCC this housing expansion should be provided for in the facility's site master plan that would have been completed in Phase 1 as part of the facility's original design documents. If current trends continue the new beds could include:

- 96 male beds medium security double-bunked in one 32-cell pod and one 16-cell pod
- 25 male beds minimum security in one dormitory
- 25 male beds community custody in one 25-bed dormitory
- 50 female beds community custody in one 50-bed dormitory

Preliminary Added Staffing Estimate @ 1:5 = 40

## Phase 2 – New Facilities

- 4. New Hawaii County CCC** – Construction of a new CCC to replace the original complex at Hilo on a new site in east Hawaii is recommended as explained in the individual facility assessments and improvement recommendations section. The new Hawaii CCC would still include the existing Hale Nani Work Furlough Center located outside Hilo. This site is an optional location for building the new HCCC since the west County CC in Kona as recommended in Phase 1 would reduce the capacity requirements for the new CCC by just over 50%. The preliminary recommendation for apportioning the County's capacity needs between an east County CCC in the Hilo area and the recommended west County CC in Kona is based on recent arrest data supplied by the HCCC Warden that showed approximately 50% of the arrestees coming from west Hawaii and 50% from the Hilo and east Hawaii area. The HCCC will retain its original functions and the new west county facility could either be administratively subordinate to the HCCC or developed as a separate privatized operation as may be preferred. As a general guide Table 3-3 is used to develop the distribution of beds by a security levels. Accordingly, the new HCCC should have the following approximate total number of beds by security levels, assuming that the west County facility was developed in Phase 1:

Males (260 operational beds + Hale Nani WFC retained at 100 beds)

- 16 beds maximum security in single-bunked cells
- 16 beds close custody in single-bunked cells
- 128 beds medium security double-bunked in two 32-cell pods



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- 75 beds minimum security in on 50-bed and one 25-bed dormitory
- 25 beds community custody in one dormitory (plus 100 beds retained at the Hale Nani WFC)
- 8 beds non-ops. capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 4 beds non-ops. capacity for medical observation/ recuperation

Females (74 operational beds)

- 4 beds maximum security in single-bunked cells
- 4 beds close custody in single-bunked cells
- 16 beds medium security double-bunked in one 8-cell pod
- 25 beds minimum security in one dormitory
- 25 beds community custody in one dormitory
- 2 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 2 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 118 (new sections only – excludes Hale Nani)

- 5. Build New Medium Security CF** – A new medium security facility with 613 medium and minimum security beds is recommended based on the projected capacity needs for 2013 for both security levels. While the facility's perimeter system should be a medium security dual fence system, the facility would be a multi-custody facility, which based on projections by security level should include 288 medium security beds and a 325-bed minimum security unit.

*This facility could also be designed and expanded to become an eventual replacement for the Kulani CF. If so, the sex offender population and treatment programs should be included as a separate unit within the compound due to the need for a focused dedicated treatment program for those inmates, without interruption from non-participants. One of the benefits of this option is that a greater number of sex offenders could be admitted to treatment than currently with Kulani's minimum security status since a medium security perimeter would exist allowing for both minimum and medium custody inmates to be involved in the treatment program.*

As a general population medium security facility the initial recommended allocation of beds is:

- 288 beds medium security double-bunked cells in four 64-bed pods and one 32-bed pod
- 325 beds minimum security in six 50-bed dormitory pods and one 25-bed dormitory pod
- 24 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 8 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:3 = 215



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While Oahu is the most logical location for concentrating correctional facilities based on population size, resource availability and minimizing operating costs, either Hawaii or Maui could be alternate locations if desired for other reasons and location factors. Also, this is one of the facilities that would be a candidate for a new large site on Oahu that would be a correctional complex of up to five facilities as discussed previously, thus eliminating the need for acquiring multiple sites.

- 6. Build New Minimum Security CF** – One additional 350-bed minimum security facility will be needed by 2013 based on the projection results. If the new 613-bed medium security facility was built on Oahu consideration should be given to locating this facility on Maui or Hawaii depending on site availability and local acceptance. Otherwise Oahu would remain a logical location from the standpoint of minimizing operating expense assuming that a suitable expandable site could be located. This facility would have the following approximate bed allocations:

- 350 beds minimum security in seven 50-bed dormitory pods
- 10 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 6 beds non-ops. capacity for medical observation/ recuperation

Preliminary Staffing Target @ 1:4 = 92

While Oahu is the most logical location for concentrating correctional facilities based on population size, resource availability and minimizing operating costs, either Hawaii or Maui could be alternate locations if desired for other reasons and location factors. Also, this is one of the facilities that would be a candidate for a new large site on Oahu that would be a correctional complex of up to five facilities as discussed previously, thus eliminating the need for acquiring multiple sites.

- 7. & 8. Replace the WCCC and the WCF** – As recommended in the facility assessments and the beginning of this capital improvements plan both the WCCC and the WCF should be replaced as soon as funding is available. Thus if sufficient funds are available during Phase 2 then the 64-bed expansion option for the WCCC included in the first part of the Phase 2 plan would not be implemented. Similarly, if it were possible to replace the WCF some of the capacity expansions needed in Phase 1 could possibly be delayed depending on system growth trends for minimum custody males and those needing substance abuse treatment for which the WCF is the system's primary resource in 2003.

If funded during Phase 2 both would need to be completed by 2013 at the following sizes to enable the system to accommodate the projected growth and fully replace the existing WCCC and WCF as follows:

**New Female CF @ 512 Operational Beds**

- 8 beds maximum security in single-bunked cells
- 8 beds close custody in single-bunked cells



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- 256 beds medium security double-bunked in eight 16-cell pods
- 240 beds minimum security in eight 30-bed dormitory pods
- 8 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 16 beds medical observation/ recuperation

Preliminary Staffing Target @ 1:2 = 268

**New Substance Abuse Treatment CF @ 756 Operational Beds**

- 256 beds medium security double-bunked in four 32-cell pods
- 500 beds minimum security in ten 50-bed dormitory pods
- 24 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 12 beds medical observation/ recuperation

Preliminary Staffing Target @ 1:2 = 396

Due to their special nature and system-wide importance both the WCCC and WCF replacement facilities should remain on Oahu and would be candidate facilities to co-locate on one large site for a correctional complex rather than having to acquire separate sites for each facility. In addition to the ease of acquiring one site versus several there would also be construction cost savings since site infrastructure and certain support services could be shared such as having one large production kitchen instead of several separate ones and the same for laundry, healthcare and warehousing. Some annual building operating cost savings would also result by such a consolidation.

**9. New Minimum Security Correctional Facility** – The projections show a substantial growth need for minimum security capacity within the next 10 years. While the plan proposes the addition of a significant number of minimum security beds at existing facilities that number will not be enough to meet the total projected need. These expansion units are likely to be close to the maximum number of such inmates to be needed and feasible for accommodating either such confined general populations or a number that would likely be the highest number of “work crew” inmates needed for helping maintain and operate kitchens and laundries and perform maintenance duties at those facilities. This new facility would be logically located on Oahu as the highest source of inmates, although Maui or Hawaii could be possible alternate locations. It should provide for a work-oriented population and a general mission as a short-term or transitional facility for inmates near the end of sentence and sentenced parole and probation violators who do not need a medium or higher security environment. It should consist of:

- 275 beds minimum security in five 50-bed dormitories and one 25-bed transitional honor dormitory.
- 10 beds non-operational capacity in single-bunked cells for administrative and disciplinary segregation and temporary holding
- 6 beds non-ops. capacity for medical observation/ recuperation



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Preliminary Staffing Target @ 1:4 = 73

In regard to location this is a facility that could be co-located on a large new site with several other new facilities on Oahu rather than having to acquire separate sites. Also, as a minimum security facility it could also be the source of labor for a large production kitchen as well as other work crew duties to help operate and maintain a complex of facilities at one location.

**Resulting Bed Allocations Summary and Comparisons** – Table 3-8 presents a summary of the bed allocations that result from the recommended 10-Year Master Plan as described for each facility expansion and proposed new facilities by Phase. The table gives a male/female breakdown and shows both the recommended operational bed capacities and the non-operational capacity special management beds that will be needed by each Phase from the both facility expansions and proposed new facilities.

At the bottom of Table 3-8 a comparison of the plan is made to projected bed needs by using the final adjusted bed needs projection results from Table 3-4 and the Table 3-5 2003 existing facilities rated capacities.<sup>5</sup> Phase 1 of the recommended plan would make a significant jump in “catching up” the system’s capacity with the projected bed need by 2008. Since the current 1,400 Hawaii prisoners in mainland facilities are included in the CF bed needs projections going forward the Phase 1 plan would make a major reduction in the need for renting mainland beds. For the end of Phase 1 by 2008 the total of new and retained CF and CCC operational beds available would be 7,129 compared to the projected ideal standard of 7,625 beds needed by 2008. *However, the total projected inmate ADP for 2008 is 7,083 which means that the Phase 1 plan for 7,129 beds should be sufficient for 2008 and beyond without any substantial trend changes.*

By the end of Phase 2 in 2013 the plan would reach a combined total of 8,899 CF and CCC operational beds available compared to the projected bed need of 8,950, or just 51 beds short of the projected ideal capacity. Since both the projected bed needs and planned beds include additional beds for jail peaks (4% to 21%) and a uniform 5% classification additive for all facilities the projected 51-bed shortage by 2013 is only .6% short of the ideal projected need. *The 8,899-bed operating capacity should be sufficient for the 2013 average daily population projection of 8,320 inmates with significant room for future growth unless incarceration trends change substantially.*

**Site Development Options** – Since several new correctional facilities are recommended for construction on Oahu in Phases 1 and 2 the option of acquiring a large site that could be used for each of five separate facilities instead of five separate sites could be economically advantageous. As already noted in the preceding plan narratives cost advantages would result for both for construction savings with shared site infrastructure and certain support components such as kitchen, medical, laundry and warehousing and for the associated annual operating expenses. Also, the logistics, environmental and community impacts for selecting one large site should be much less complicated than for five sites. Figure 3-13 depicts the facilities that would be included.

<sup>5</sup> It must be remembered that the Table 3-4 projected bed needs by security levels included a shift from the Chapter 2 Table 2-21 projected operational bed needs for all community custody beds, except an existing 20-bed unit at the WCCC, to the CCCs where those beds should be located and counted since they are transitional end-of-sentence pre-release beds under the command of the CCCs.



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Table 3-8  
Master Plan Bed Allocations Summary and Comparisons

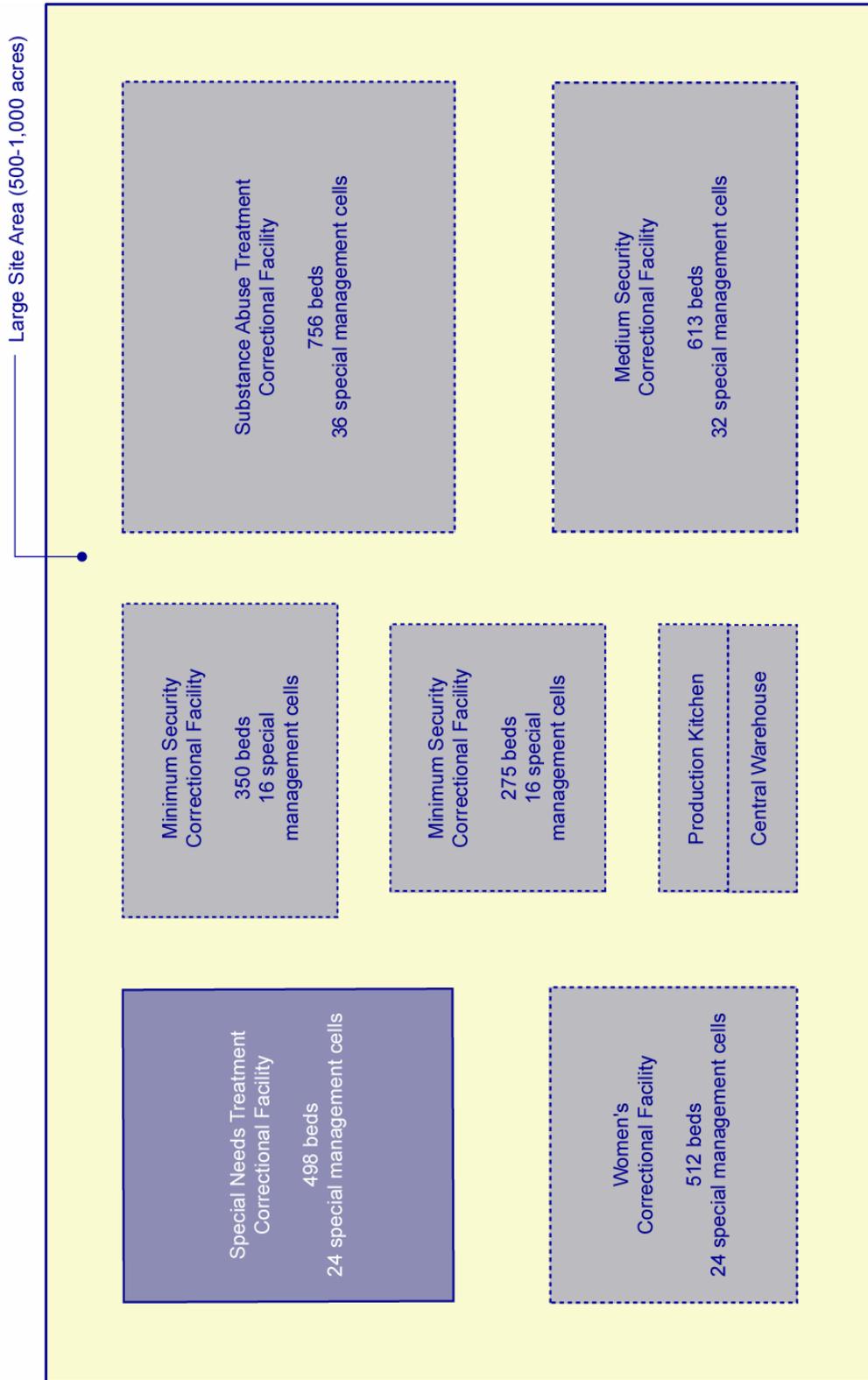
Phase and Category	Male		Female		Totals		Grand Total All Beds	
	CF	CCC	CF	CCC	CF	CCC		
<b>PHASE 1 - 2004 - 2008</b>								
<b>Facility Expansions</b>								
Operational Beds	1,154		208		1,362	-	1,362	
Special Management Beds	72		10		82	-	82	
Total Beds	1,226	-	218	-	1,444	-	1,444	
<b>New Facilities</b>								
Operational Beds	498	2,769		658	498	3,427	3,925	
Special Management Beds	24	144		32	24	176	200	
Total Beds	522	2,913	-	690	522	3,603	4,125	
<b>Phase 1 Totals</b>								
Operational Beds	1,652	2,769	208	658	1,860	3,427	5,287	
Special Management Beds	96	144	10	32	106	176	282	
<b>PHASE 1 Totals</b>	<b>1,748</b>	<b>2,913</b>	<b>218</b>	<b>690</b>	<b>1,966</b>	<b>3,603</b>	<b>5,569</b>	
<b>PHASE 2 - 2009 - 2013</b>								
<b>Facility Expansions</b>								
Operational Beds		228		50	-	278	278	
Special Management Beds					-	-	-	
Total Beds	-	228	-	50	-	278	278	
<b>New Facilities</b>								
Operational Beds	1,994	260	512	74	2,506	334	2,840	
Special Management Beds	100	12	24	4	124	16	140	
Total Beds	2,094	272	536	78	2,630	350	2,980	
<b>Phase 2 Totals</b>								
Operational Beds	1,994	488	512	124	2,506	612	3,118	
Special Management Beds	100	12	24	4	124	16	140	
<b>PHASE 2 Totals</b>	<b>2,094</b>	<b>500</b>	<b>536</b>	<b>128</b>	<b>2,630</b>	<b>628</b>	<b>3,258</b>	
<b>PHASE 1 + PHASE 2</b>								
Operational Beds	3,646	3,257	720	782	4,366	4,039	8,405	
Special Management Beds	196	156	34	36	230	192	422	
<b>GRAND TOTAL</b>	<b>3,842</b>	<b>3,413</b>	<b>754</b>	<b>818</b>	<b>4,596</b>	<b>4,231</b>	<b>8,827</b>	
<b>Projected Need vs. Plan Capacity (operational beds)</b>	<b>2008</b>				<b>2013</b>			
	<b>CF</b>		<b>CCC</b>		<b>CF</b>		<b>CCC</b>	
	Proj. Need	Plan	Proj. Need	Plan	Proj. Need	Plan	Proj. Need	Plan
Male	3,684	1,652	2,930	2,769	4,386	1,994	3,312	488
Female	375	208	636	658	476	512	776	124
<b>Totals</b>	<b>4,059</b>	<b>1,860</b>	<b>3,566</b>	<b>3,427</b>	<b>4,862</b>	<b>2,506</b>	<b>4,088</b>	<b>612</b>
Retained Beds	1,616		226		2,254		3,527	
Retained + Planned Beds	<b>3,476</b>		<b>3,653</b>		<b>4,760</b>		<b>4,139</b>	
<b>Grand Total Beds Available</b>	<b>7,129</b>				<b>8,899</b>			
Inmate ADP Projection	7,083				8,320			

Source: Recommendations by Carter Goble Associates, Inc., December 2003.



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Figure 3-13  
Oahu Correctional Complex Single Site Development Option



■ Phase 1  
▤ Phase 2



## 10-YEAR BUDGET ESTIMATES

### Capital Project Preliminary Cost Estimates

The 10-Year Master Plan recommends capital improvement projects that consist of a wide variety of new construction and remodeling/expansions as described in the plan descriptions above. While meeting projected 10-year capacity needs is the plan's focus certain conditions in Hawaii also have a major impact on the results. One pervasive finding from facility inspections, plus an agreement with the PSD on two special and important conditions at the beginning of this update study, which have a significant effect on the size, formation and cost of the 10-year plan are:

1. Since the consultant's completion of the 1991 master plan there has been a substantial degree of facility deterioration, apparent deferred maintenance, and delayed needed improvements coupled with overcrowding beyond the design capacities of all facilities in the system;
2. Many of the existing facilities have obsolete designs and floor layouts, especially in inmate housing areas, which results in a less efficient staffing pattern and thus higher annual operating expense than would be the case from a contemporary design. Considering that in the first 20- to 30-year cycle in the life of a correctional facility that 90% of all expenditures will be for annual operating expenses and that the capital investment will only equal approximately 10% makes it very clear that replacing obsolete and operationally inefficient facilities is a sound long-term economic choice.
3. Existing facilities, recommended expansions and any new facilities proposed should comply with the current physical plant standards of the American Correctional Association applicable to Adult Correctional Facilities, Adult Local Detention Facilities and Community Residential Facilities; and
4. The approximate 1,400 Hawaii prisoners currently housed in mainland facilities should be included in capacity planning for return to Hawaii facilities within the 10-year plan.

While the ACA standards should be viewed as minimum requirements, they have been recognized in both Federal and State Courts repeatedly throughout the U.S. as being useful and appropriate for helping assure safe, secure and effective correctional operating environments. Generally, following their principles has been proven time and again as a "good insurance policy" against lawsuits and court intervention, or even total system takeover as happened in Arizona in 1976, Tennessee in 1987, Louisiana and Texas in the 1980s and 90s. Continued lack of attention to making needed improvements in the general conditions of confinement and capacity expansion in the Hawaii system of both its State correctional facilities and its county community correctional centers could easily lead to State or Federal Court intervention.

To give the State an order of magnitude preliminary cost estimate for the recommended 10-year capital improvements plan in present value 2003 dollars, cost experience has been researched for a range of recent prison and jail projects of the types and sizes proposed herein. Also, both Architects Hawaii and the Capital Improvements Program staff of the PSD have provided their expert advice on recent and current construction cost experience in Hawaii.



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The preliminary budget need for the entire 2-Phase 10-Year plan (excluding certain unknown costs as noted in the table footnotes) is provided in Table 3-9. Table 3-10 presents a possible implementation schedule for both Phase 1 and Phase 2 projects recommending that facility planning/programming, design and construction to be completed year-by-year between 2004 and 2008 for Phase 1 and 2009 and 2013 for Phase 2. For new facility planning, site selection and design two years is assumed and three years for construction completion. For expansions at existing or future facilities one year is assumed to be sufficient for planning and design and two years for construction completion provided that sufficient land is readily available on or immediately adjacent to the facility that will accommodate the proposed expansion.

In the Phase 1 "Facilities Expansions" section of Tables 3-9 and 3-10, items 5 and 6 provide estimates for the cost of making additions to support spaces in eight existing PSD facilities. These additions are needed to make each facility compliant with space standards as originally used in the 1991 Master Plan and again in this update, based on the 2003 rated sleeping area bed capacity for each facility. Appendix A includes a table with a breakdown by general functional area category of the estimated space needs at each existing facility except for the Halawa SNCF since it is recommended for demolition.

**Savings with Replacements** – Finally, if all four CCCs are replaced, the \$22.2 million budget estimate for expanding the existing deficient support spaces can be deducted from the Phase I project costs. Similarly, if the Kulani CF, Waiawa CF and Women's CCC are replaced instead of being continued and expanded the \$19.7 million budget could be deducted. Appendix A provides the estimates for each facility.

**Facility Maintenance** – A critical component of the plan as discussed previously is the need to fully fund, staff and implement a comprehensive preventive maintenance program and to fund and make building and building systems repairs and upgrades in a much more timely manner than has been done in the past. With the degree of deterioration of numerous facilities found in this study, the PSDs maintenance and repair funding requests that have historically been deferred or substantially under-funded can no longer be ignored. Consequently, the budgeted amount by the PSD for this need is included as a line item in Phase 1 of the Master Plan preliminary capital projects budget estimates in Table 3-9.

All preliminary cost estimates in Tables 3-9 and 3-10 are 2003 present value dollars only as already noted and are based on formulas that use the number of beds for each proposed project multiplied by a square footage per bed estimator and a cost per square foot estimator in present value 2003 dollars. A 30% or 35% project cost estimator is also added to each project in order to give a realistic project estimate to include fees, testing, site preparation, furnishings, fixtures and moveable equipment, and a contingency but, excluding such unknowns as land acquisition, inflation to future years, financing costs, unusual building remodel conditions, and unusual site conditions.

Appendix A includes a Table, which specifies the various estimators used to generate the space estimates and preliminary present value construction and project cost estimates. It also includes a table that shows the square footage support space additions needed and resulting construction cost estimates by general functional category for each of the exiting eight PSD facilities (excluding the



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**Table 3-9  
10-Year Capital Improvements Plan Preliminary Budget Estimates**

Project	Construction Cost in 2003 \$*				Other Project Costs*	Project Cost 2003 \$*
	New Facility	Repairs/Maint. **	Remodel/Expand	Subtotal		
<b>PHASE 1 - 2004 - 2008</b>	<i>Phase 1 builds 1,860 new CF operational beds and 3,427 new CCC operational beds and makes needed support space expansions and major repairs.</i>					
<b>Facility Expansions</b>						
1. WCF @ 256 Medium, 150 Minimum, 32 Spc. Mgt.			\$ 33,626,250	\$ 33,626,250	10,087,875	\$ 43,714,125
2. Women's CCC @ 192 Medium, 16 Max/Close, 10 Spc. Mgt.			\$ 20,982,500	\$ 20,982,500	6,294,750	\$ 27,277,250
3. KCF @ 150 Minimum, 8 Spc. Mgt.			\$ 10,895,000	\$ 10,895,000	3,268,500	\$ 14,163,500
4. HMSCF @ 448 Medium, 150 Minimum, 32 Spc. Mgt +SNF Demo			\$ 60,861,800	\$ 60,861,800	21,301,630	\$ 82,163,430
5. CF Support Space Additions for Deficiencies			\$ 22,836,500	\$ 22,836,500	6,850,950	\$ 29,687,450
6. CCC Support Space Additions for Deficiencies			\$ 17,102,500	\$ 17,102,500	5,130,750	\$ 22,233,250
7. Unfunded Major Repairs & Replacement**		\$ to be provided by PSD		\$ -	-	\$ -
<b>New Facilities</b>						
1. Special Needs Treatment CF @ 498 beds, 24 Spc. Mgt. Cells	\$ 52,985,000			\$ 52,985,000	18,544,750	\$ 71,529,750
2. Oahu CCC @ 1,964 beds, 104 Spc. Mgt. Cells	\$ 135,685,000			\$ 135,685,000	47,489,750	\$ 183,174,750
3. Maui CCC @ 761 beds, 40 Spc. Mgt.	\$ 53,056,250			\$ 53,056,250	18,569,688	\$ 71,625,938
4. Kauai CCC @ 343 beds, 16 Spc. Mgt.	\$ 24,033,750			\$ 24,033,750	8,411,813	\$ 32,445,563
5. West Hawaii Correctional Center @ 359 beds, 16 Spc. Mgt.	\$ 25,133,750			\$ 25,133,750	8,796,813	\$ 33,930,563
<b>Totals Phase 1</b>	<b>\$ 290,893,750</b>	<b>\$ -</b>	<b>\$ 166,304,550</b>	<b>\$ 457,198,300</b>	<b>154,747,268</b>	<b>\$ 611,945,568</b>
<b>PHASE 2 - 2009 - 2013</b>	<i>Phase 2 would be implemented as needed for population growth to build up to 612 CCC operational beds and up to 2,570 new CF operational beds</i>					
<b>Facility Expansions</b>						
1. Maui CCC @ 32 medium, 25 min., 25 comm. Cust.			\$ 3,394,000	\$ 3,394,000	1,018,200	\$ 4,412,200
2. Oahu CCC @ 96 med., 25 min., 75 comm. cust.			\$ 7,932,000	\$ 7,932,000	2,379,600	\$ 10,311,600
<b>New Facilities</b>						
1. Hawaii CCC Hilo Facility @ 334 ops. beds, 16 Spc. Mgt.	\$ 22,916,250			\$ 22,916,250	8,020,688	\$ 30,936,938
2. Medium Security CF @ 613 beds, 32 Spc. Mgt.	\$ 53,617,500			\$ 53,617,500	18,766,125	\$ 72,383,625
3. Minimum Security CF @ 350 beds, 16 Spc. Mgt. Cells	\$ 25,605,000			\$ 25,605,000	8,961,750	\$ 34,566,750
4. Women's CF @ 512 beds, 24 Spc. Mgt. (replaces WCCC)	\$ 45,790,000			\$ 45,790,000	16,026,500	\$ 61,816,500
5. Substance Abuse Treatment CF @ 756 beds, 36 Spc. Mgt. (replaces WCF)	\$ 62,845,000			\$ 62,845,000	21,995,750	\$ 84,840,750
6. Minimum Security CF @ 275 beds, 16 Spc. Mgt. Cells	\$ 20,542,500			\$ 20,542,500	7,189,875	\$ 27,732,375
<b>Totals Phase 2</b>	<b>\$ 231,316,250</b>	<b>\$ -</b>	<b>\$ 11,326,000</b>	<b>\$ 242,642,250</b>	<b>84,358,488</b>	<b>\$ 327,000,738</b>

\* Preliminary estimates are in 2003 present value dollars only and include a 30% project cost additive for facility expansions and 35% for new facilities to include all fees, testing, site preparation, furnishings, fixtures and moveable equipment, and a contingency, but do not include any provision for future years inflation or financing costs, land acquisition, unforeseen building conditions, or unusual site conditions.

\*\* Includes unfunded repairs/maintenance allocation as reported by PSD budget requests for only those items that are facility or building systems related.

Source: Preliminary estimates by Carter Goble Associates, Inc., December 2003.



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**Table 3-10  
Project Budgets Allocation and Implementation Schedule 2004 – 2013**

PHASE 1 PROJECTS	Project Cost in 2003 \$*	Implementation Schedule by Year					
		Planning, Design, PM/CM**		Construction, PM/CM**			
		2004	2005	2005	2006	2007	2008
<b>Facility Expansions</b>							
1. WCF @ 256 Medium, 150 Minimum, 32 Spc. Mgt.	\$ 43,714,125	\$ 2,589,221		\$ 18,376,746	\$ 22,748,158		
2. Women's CCC @ 192 Medium, 16 Max/Close, 10 Spc. Mgt.	\$ 27,277,250	\$ 1,615,653		\$ 11,466,936	\$ 14,194,661		
3. KCF @ 150 Minimum, 8 Spc. Mgt.	\$ 14,163,500	\$ 838,915		\$ 5,954,118	\$ 7,370,468		
4. HMSCF @ 448 Medium, 150 Minimum, 32 Spc. Mgt +SNF Demo	\$ 82,163,430	\$ 4,686,359		\$ 34,630,364	\$ 42,846,707		
5. CF Support Space Additions for Deficiencies***	\$ 29,687,450	\$ 1,758,411		\$ 12,480,147	\$ 15,448,892		
6. CCC Support Space Additions for Deficiencies***	\$ 22,233,250	\$ 1,316,893		\$ 9,346,516	\$ 11,569,841		
7. Unfunded Major Repairs & Replacements	\$ to be provided by PSD						
<b>New Facilities</b>							
1. Special Needs Treatment CF @ 498 beds, 24 Spc. Mgt. Cells	\$ 71,529,750	\$ 1,854,475	\$ 1,854,475		\$ 18,279,825	\$ 28,082,050	\$ 21,458,925
2. Oahu CCC @ 1,964 beds, 104 Spc. Mgt. Cells	\$ 183,174,750	\$ 4,748,975	\$ 4,748,975		\$ 46,811,325	\$ 71,913,050	\$ 54,952,425
3. Maui CCC @ 761 beds, 40 Spc. Mgt.	\$ 71,625,938	\$ 1,856,969	\$ 1,856,969		\$ 18,304,406	\$ 28,119,813	\$ 21,487,781
4. Kauai CCC @ 343 beds, 16 Spc. Mgt.	\$ 32,445,563	\$ 841,181	\$ 841,181		\$ 8,291,644	\$ 12,737,888	\$ 9,733,669
5. West Hawaii Correctional Center @ 359 beds, 16 Spc. Mgt.	\$ 33,930,563	\$ 879,681	\$ 879,681		\$ 8,671,144	\$ 13,320,888	\$ 10,179,169
<b>Totals Phase 1</b>	<b>\$ 611,945,568</b>	<b>\$ 22,986,732</b>	<b>\$ 10,181,281</b>	<b>\$ 92,254,827</b>	<b>\$ 214,537,071</b>	<b>\$ 154,173,688</b>	<b>\$ 117,811,969</b>
<b>PHASE 2 PROJECTS</b>							
	Project Cost in 2003 \$	2009	2010	2010	2011	2012	2013
<b>Facility Expansions</b>							
1. Maui CCC @ 32 medium, 25 min., 25 comm. Cust.	\$ 4,412,200	\$ 213,822		\$ 1,878,579	\$ 2,319,799		
2. Oahu CCC @ 96 med., 25 min., 75 comm. cust.	\$ 10,311,600	\$ 499,716		\$ 4,390,362	\$ 5,421,522		
<b>New Facilities</b>							
1. Hawaii CCC Hilo Facility @ 334 ops. beds, 16 Spc. Mgt.	\$ 30,936,938	\$ 641,655	\$ 641,655		\$ 8,181,101	\$ 12,191,445	\$ 9,281,081
2. Medium Security CF @ 613 beds, 32 Spc. Mgt.	\$ 72,383,625	\$ 1,501,290	\$ 1,501,290		\$ 18,917,348	\$ 28,748,610	\$ 21,715,088
3. Minimum Security CF @ 350 beds, 16 Spc. Mgt. Cells	\$ 34,566,750	\$ 716,940	\$ 716,940		\$ 9,302,465	\$ 13,460,380	\$ 10,370,025
4. Women's CF @ 512 beds, 24 Spc. Mgt.	\$ 61,816,500	\$ 1,282,120	\$ 1,282,120		\$ 16,483,470	\$ 24,223,840	\$ 18,544,950
5. Substance Abuse Treatment CF @ 756 beds, 36 Spc. Mgt.	\$ 84,840,750	\$ 1,759,660	\$ 1,759,660		\$ 22,097,245	\$ 33,771,960	\$ 25,452,225
6. Minimum Security CF @ 275 beds, 16 Spc. Mgt. Cells	\$ 27,732,375	\$ 575,190	\$ 575,190		\$ 9,121,797	\$ 9,140,486	\$ 8,319,713
<b>Totals Phase 2</b>	<b>\$ 327,000,738</b>	<b>\$ 7,190,393</b>	<b>\$ 6,476,855</b>	<b>\$ 6,268,941</b>	<b>\$ 91,844,746</b>	<b>\$ 121,536,721</b>	<b>\$ 93,683,081</b>

\* Preliminary estimates are in 2003 present value dollars only and include a 30% project cost additive for facility expansions and 35% for new facilities to include all fees, testing, site preparation, furnishings, fixtures and moveable equipment, and a contingency, but do not include any provision for future years inflation or financing costs, land acquisition, unforeseen building conditions, or unusual site conditions.  
 \*\* A/E, Design/Build/Finance RFP, and Project/Construction Management fees combined are 10% of construction for new facilities and 11% for facility expansions.  
 \*\*\* These costs would be avoided by any facility replacements that are implemented.  
 Source: Preliminary estimates by Carter Goble Associates, Inc., December 2003.



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Halawa SNCF recommended for demolition). These additions are needed just to give each existing facility enough support space for the existing sleeping areas rated operational bed capacity at each facility.

### Annual Operating Expense Preliminary Cost Estimates

For each recommended new facility or existing facility capacity expansion preliminary staffing targets were estimated and are included in the master plan narratives for each proposed project. In order to provide a general preliminary annual operating cost estimate the PSD staff provided the consultant with calculations of the average annual personnel cost per staff for CFs and CCCs based on the most recent 2003 salary, fringe benefits and overtime data. Also, PSD staff provided computations of the ratio of labor versus non-labor operating expenses for all CFs and all CCCs. These figures were applied to the preliminary staffing estimates in order to provide a preliminary total annual operating cost estimate in present value 2003 dollars. Table 3-11 provides a summary of the results of those computations.

Table 3-11  
**Annual Operating Costs Preliminary General Estimates**  
(2003 present value dollars)

Facility Project	New Ops. Beds	Total Staff	Staff Costs	Non-labor Costs	Annual Totals	Annual Cost per Bed	One-Time Startup Transition & Training
<b>Phase 1 Projects - 2004-2008</b>							
1. WCF Expansion	406	110	\$ 5,832,530	\$ 2,157,237	\$ 7,989,767	\$ 19,679	\$ 874,880
2. WCCC Expansion	208	73	\$ 3,870,679	\$ 1,431,621	\$ 5,302,300	\$ 25,492	\$ 580,602
3. Kulani CF Expansion	150	40	\$ 2,120,920	\$ 784,450	\$ 2,905,370	\$ 19,369	\$ 318,138
4. Halawa MSCF Expansion	598	158	\$ 8,377,634	\$ 3,098,577	\$ 11,476,211	\$ 19,191	\$ 1,256,645
5. New Special Needs Treatment CF	498	298	\$ 15,800,854	\$ 5,844,151	\$ 21,645,005	\$ 43,464	\$ 2,686,145
6. New West Hawaii Regional CC	359	126	\$ 6,932,898	\$ 2,564,223	\$ 9,497,121	\$ 26,454	\$ 1,178,593
7. New Kauai CCC	343	120	\$ 6,602,760	\$ 1,972,253	\$ 8,575,013	\$ 25,000	\$ 1,122,469
8. New Maui CCC	761	267	\$ 14,691,141	\$ 4,388,263	\$ 19,079,404	\$ 25,071	\$ 2,497,494
9. New Oahu CCC	1,964	690	\$ 37,965,870	\$ 11,340,455	\$ 49,306,325	\$ 25,105	\$ 6,454,198
<b>Totals</b>	<b>5,287</b>	<b>1,882</b>	<b>\$ 102,195,286</b>	<b>\$ 33,581,230</b>	<b>\$ 135,776,516</b>	<b>\$ 25,681</b>	<b>\$ 16,969,163</b>
<b>Phase 2 Projects - 2009-2013</b>							
1. Maui CCC Expansion	82	16	\$ 880,368	\$ 262,967	\$ 1,143,335	\$ 13,943	\$ 132,055
2. Oahu CCC Expansion	196	40	\$ 2,200,920	\$ 657,418	\$ 2,858,338	\$ 14,583	\$ 330,138
3. New Hawaii CCC - Hilo	334	118	\$ 6,492,714	\$ 1,939,382	\$ 8,432,096	\$ 25,246	\$ 1,103,761
4. New Medium Security CF	613	215	\$ 11,399,945	\$ 4,216,418	\$ 15,616,363	\$ 25,475	\$ 1,937,991
5. New Minimum Security CF	350	92	\$ 4,878,116	\$ 1,804,235	\$ 6,682,351	\$ 19,092	\$ 829,280
6. New Women's CF	512	268	\$ 14,210,164	\$ 5,255,814	\$ 19,465,978	\$ 38,019	\$ 2,415,728
7. New Substance Abuse Treat. CF	756	396	\$ 20,997,108	\$ 7,766,054	\$ 28,763,162	\$ 38,047	\$ 3,569,508
8. New Minimum Security CF	275	73	\$ 3,870,679	\$ 1,431,621	\$ 5,302,300	\$ 19,281	\$ 658,015
<b>Totals</b>	<b>3,118</b>	<b>1,218</b>	<b>\$ 64,930,014</b>	<b>\$ 23,333,908</b>	<b>\$ 88,263,922</b>	<b>\$ 28,308</b>	<b>\$ 10,976,477</b>

Source: Preliminary estimates by Carter Goble Associates, Inc. based on PSD FY2003 cost data. December 2003.

The staff costs were estimated by using an FY2003 value of \$53,023 to include the CFs average salary, fringe benefits and overtime per staff. For the CCCs the comparable average figure used was \$55,023 annually. Certain costs that are normally paid by the PSD in a lump sum or single payment rather than separately for each facility were allocated by the PSD to the facilities for this analysis on a per staff or per inmate count basis as appropriate.



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Non-labor annual facility operating expenses use the FY2003 average cost ratios of 73% personnel/27% non-labor costs for CFs and 77%/23% for the CCCs to derive the estimates in Table 3-11. Typically correctional facilities incur annual operating expenses anywhere from a 75%/25% ratio to 80%/20% ratio so the experience in Hawaii is very close to that normal range. Since the system now incurs extraordinary annual non-labor operating costs as payments to other states for approximately 1,400 Hawaii prisoners, the ratio for the CFs is slightly lower on the labor side versus non-labor costs. This ratio would shift as new capacity is brought on-line and the payments to other states are reduced. The one-time startup transition/activation and training costs are based on 17% of annual staff costs for new facilities and 15% for facility expansions since the expansions will only need the training but not the transition/activation staff time costs as for a new facility.

**Cost Efficiency/Cost Savings** – While the addition of new facilities and expanded capacity at existing facilities will certainly increase the PSD annual operating budget the improved staffing patterns and efficiency inherent in new contemporary housing unit designs and floor plans will lead to cost savings in the long-run. Although the proposed new Special Needs Secure Treatment Facility is unlike any facility currently in the Hawaii system and will cost significantly more to operate per bed due to the higher number of custody staff and specialist diagnostic and treatment staff needed, the other new facilities compare quite favorably. For example, the average estimated annual operating cost per bed from Table 3-11 for the Phase 1 new CCCs, the Kulani CF expansion and the Halawa Medium CF expansion all have a lower cost per bed compared to the FY2003 averages by facility as follows:

Phase 1 Projects Estimated Annual Operating Cost per Total Beds		Existing FY 2003 Annual Operating Cost per Total Beds	
▪ New CCCs Average	\$25,400	▪ CCCs Average	\$27,806
▪ KCF Expansion	\$19,369	▪ KCF	\$27,663
▪ HCF Expansion	\$19,191	▪ HCF	\$23,070

Note: All computations are based on the total of rated operational capacity beds and non-operational special management beds and exclude non-assigned central office administrative costs.

The single greatest potential cost savings benefit from the recommended Phase 1 projects would be from the new CCCs. For example, the operational bed capacity included in the four new jail projects in Phase 1 is 3,427 as compared to the current CCC rated operational bed capacity of 1,609 for a difference of 1,816 beds. If *just those additional beds* were occupied and operated at the current annual operating cost per bed for CCCs of \$27,806 the added cost would be approximately \$50.5 million a year. For the new facilities proposed, however, operating at an average of \$25,400 per bed per year the cost would be approximately \$46.1 million a year, which is a savings of approximately \$4.4 million a year in present value dollars.

In conclusion it should be remembered that there is also the possibility for additional cost savings over the current capital project cost estimates and the annual operating cost for those six CF facilities that could be co-located on a single large site on Oahu (see Figure 3-13) rather than being built on six separate sites.

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# A

## Master Plan Sizing & Cost Estimators




## Appendix A

### Master Plan Sizing and Cost Estimators Used

The following sizing and cost estimators were used for the development of the preliminary construction cost estimates and project cost additives and are applied in the 10-Year Preliminary Budget Estimates of Tables 3-9 and 3-10. Computations are made in the MS Excel spreadsheets in the following general formula: (# beds) x (SF estimator) x (\$/SF) = construction estimate + (30% or 35% project cost additive) x construction estimate = project cost with exclusions as noted. The project cost additives include: A/E and program management fees, testing, site preparation, furnishings, fixtures and moveable equipment, and a contingency but, exclude the unknowns of land acquisition, inflation to future years, financing costs, unusual building remodel conditions, and unusual site conditions.

1. Addition of Housing Only to Existing Facilities (current and future facilities planned)

- Single-bunked cells                    200 SF/cell
- Double-bunked cells                130 SF/bed
- Dormitories                            200 SF/bed

2. New Facilities or New Housing Units with All Support Spaces Added

A. Correctional Facilities

- Single-bunked cells                    450 SF/cell
- Double-bunked cells                350 SF/bed
- Dormitories                            300 SF/bed

B. Community Correctional Facilities

- Single-bunked cells                    350 SF/cell
- Double-bunked cells                250 SF/bed
- Dormitories                            250 SF/bed

3. Construction and Project Cost Estimators (2003 present value dollars)

- Construction of Maximum, Close or Medium Cells                    \$275/SF
- Construction of Minimum or Community Cust. Dormitories        \$225/SF
- Construction of Administration space                                    \$200/SF
- Construction of Programs space    \$225/SF
- Construction of Support and Operations space                         \$250/SF
- Project Cost Additives for New Facilities                                 35%
- Project Cost Additives for Expansions                                    30%
- A/E, PM/CM, design/build/finance RFP preparation fees  
for an entire new facility     10%
- A/E, PM/CM fees for expansions     11%



These estimators were developed for this master planning study based on consultation with Architects Hawaii, PSD Capital Improvement Program staff, the use of R.S. Means Cost per Square Foot - 2003, and the consultant's own experience. All cost estimators used are in 2003 present value dollars.

**Preliminary Construction Cost Estimates for Support Space Additions Needed at Existing Facilities**

Facility Name	Component		
	Administration	Program Services	Support & Operations
<b><u>Correctional Facilities*</u></b>			
Halawa CF	--	--	28,768 SF
Kulani CF	--	--	--
Waiawa CF	3,132 SF	30,276 SF	25,752 SF
Women's CCC	1,040 SF	--	6,240 SF
<b>Subtotal Correctional Facilities</b>	4,172 SF	30,276 SF	60,760 SF
Cost/SF	\$200	\$225	\$250
Cost	\$834,400	\$6,812,100	\$15,190,000
<b>TOTAL COST – CORRECTIONAL FACILITIES = \$22,836,500</b>			
<b><u>Community Correctional Centers*</u></b>			
Hawaii CCC	3,616 SF	9,944 SF	11,752 SF
Kauai CCC	1,920 SF	4,992 SF	3,328 SF
Maui CCC	480 SF	4,200 SF	6,300 SF
Oahu CCC	12,402 SF	11,448 SF	4,770 SF
<b>Subtotal Community Correctional Centers</b>	18,418 SF	30,584 SF	26,150 SF
Cost/SF	\$200	\$225	\$250
Cost	\$3,683,600	\$6,881,400	\$6,537,500
<b>TOTAL COST – COMMUNITY CORRECTIONAL CENTERS = \$17,102,500</b>			

\* If the four CCCs are replaced as recommended in the Master Plan the cost of these space deficiency additions could be avoided. Similarly for any of the CFs that are replaced the corresponding deficiency additions could be avoided.

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			<b>B</b>	1991 Plan Chapters 1 and 3 Review	
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## INTRODUCTION

The 2003 Master Plan Update was intentionally time- and scope-limited by PSD and DAGS to focus on updating correctional facility capacity needs projections and a resulting capital improvements plan for expanded and/or new facilities. In this 2-month project, neither time nor budget was available to also undertake the comprehensive evaluation and plan development for the PSDs 22 management, operational and support services components that were addressed during the 9-month planning period undertaken for the 1991 master plan. Consequently, this 10-year update does not include a new or updated management and operations plan (1991 Plan chapter 3) or a redevelopment of Department Philosophy and Mission (1991 Plan chapter 1). This appendix is intended as a limited review of the topics in those two chapters of the 1991 master plan to provide pertinent recommendations for consistency in relation to this capital improvements plan 10-year update. Following is a section-by-section topical series of observations and recommendations for consideration in that regard, which uses the same section and topic headings as used in the 1991 document where applicable.

## 1991 CHAPTER 1 – DEPARTMENT PHILOSOPHY AND MISSION

The 1-page “Philosophy and Mission” statement from 1991 is still quite relevant and appropriate to the PSDs direction in 2003. However, in light of the PSDs progress and development of correctional treatment and rehabilitative services since 1991 a modification of the statement would be appropriate. With the continued need for community-based corrections and “pre-release/re-entry preparation and aftercare services” and the general trend of most correctional agencies, both in the US and other countries, to have a major focus on treatment and attempting to improve the behavior of criminal offenders, changes to the first and second paragraphs are suggested for consideration as follows:

1. Change the 1<sup>st</sup> paragraph to read as follows: *“The overall mission of the State of Hawaii Public Safety Department Division of Corrections is the protection of the public by providing safe, secure and humane correctional environments in all facilities that encourage and support positive and lasting behavioral change by criminal offenders prior to their release.”*
2. Change the last sentence of the 2<sup>nd</sup> paragraph to read as follows: *“All constitutional rights of the inmate population will be observed, and all American Correctional Association (ACA) Standards for Adult Correctional Institutions, Adult Local Detention Facilities and Adult Community Residential Services will be met.”*

## 1991 CHAPTER 3 – MANAGEMENT AND OPERATIONS PLAN

Most all of the improvements and changes called for in the 1991 plan are either still needed or have been implemented since 1991. While it is not within the scope of this current update to redo this very detailed systems evaluation and improvement plan, the following observations, variations or changes are recommended for consideration under their respective headings.



## **Section B. Classification, Case Management and Programs**

### **Inmate Management**

The RAD Unit (inmate reception and diagnostic unit) currently located inside Module 1 at the Halawa MSCF should be relocated to the recommended new Special Needs Secure Treatment Facility. This would allow the Halawa CF Module 1 to house more general close or high-medium security population and allow the design of the new RAD space to be customized to the unique needs of a prison intake and diagnostic unit. In following the 1991 recommendation for a comprehensive “case management” approach to corrections the development of “individualized treatment plans” should be initiated at the time of intake by correctional counselors working closely with the inmate at the RAD Unit.

### **Substance Abuse**

As the types of drugs of abuse have changed significantly since 1991 to now include so-called synthetic and designer drugs that are much lower cost and thus in more widespread use the needs for substance abuse treatment has grown substantially. In the 1991 Plan it was noted that 75% of a sample of inmates admitted drug use and that the most widely used drugs were 39% alcohol, 13% marijuana and 11% cocaine. Today Hawaii is known as one of the original locations for “ice” use, which is relatively easily made in small homemade laboratories, more easily distributed and readily available at relatively low cost than other drugs. Reportedly, brain damage can be significant, but reversible, whereas a very small number of cases cannot be healed or reversed resulting in permanent mental disability.

As of October 2003 the PSD reported the 2,690 males (54% of 2003 ADP) and 347 females (52% of 2003 ADP) were identified as being in need of substance abuse treatment. The PSD currently has 230 Level 3 dedicated male treatment beds and 50 Level 3 dedicated female treatment beds. For the lower Level 2 treatment no beds are dedicated, but 106 male slots and 38 female slots are available. Thus, the system’s total treatment capacity at one time is 424 inmates (14% of need) compared to the total 2003 identified need of 3,037 inmates.

The need for space for treatment programs is thus even greater today than in 1991 and with overcrowding the total “continuum” of treatment services called for in the 1991 Plan is still not fully in place. While the WCF is an important treatment-based facility that includes a therapeutic community unit, its current capacity and minimum security level limits its potential reach. The WCCC has a 22-bed unit dedicated to female treatment as a therapeutic community. The use of therapeutic communities inside correctional facilities has proven effective in a number of states and where feasible are worth establishing in other facilities as well.

Instead of concentrating substance abuse in only one or a few facilities all CFs and all CCCs should provide some level of education and treatment as feasible so that inmates at all security levels can receive treatment continuously rather than once or intermittently throughout their stay. The continued and growing prevalence of substance abuse and dependency in jail and prison populations is so widespread that limiting treatment to only a few facilities is not sufficient for a



correctional system that desires to try to change criminal behavior and reduce recidivism rates. Moreover, research has shown that providing a continuum of education and treatment of varying levels of intensity and focus throughout an inmate's stay is more effective than providing it only at intermittent or transitional periods or only near the end of a sentence.

Today the PSDs substance abuse program concentrates on treating offenders only near the end of sentence due to capacity and funding limitations. With limited resources there is validity in providing end-of-stay treatment only as survey research findings indicate that treatment tends to "wear off" after an inmate leaves a program. However, an "end of stay" approach is not the total answer; especially knowing that "relapse prevention" is needed both inside and outside of prison as is aftercare follow-up in the community. As noted by the PSDs Substance Abuse Administrator newer evidence suggests that treatment at the "transitional" stages of an inmate's confinement is more effective than only treatment near the end of sentence. Critical transitional stages include: (1) at the time of the inmate's intake into the system; (2) at the time of transfer to another facility; and (3) upon return to the community. However, as noted above the concept of a "continuum of treatment" that maintains and reinforces treatment throughout an inmate's confinement and at the community level upon release or transfer to community supervision, which was recommended in the 1991 master plan, can have even greater beneficial impact rather than just periodic treatment and is still recommended by this update.

Due to the volume of need it is not simply not appropriate or worthwhile to attempt to concentrate all substance abuse in one facility as many states have found, but rather provide the resources and space in all CFs and all CCCs. Doing so allows all inmates to be matched to the level of security needed with different security level facilities and still start, continue or re-take appropriate treatment regimes throughout their term of custody. Moreover, there needs to also be follow-up aftercare and relapse prevention efforts both inside all the correctional facilities and in the community after release, which may exceed the PSDs jurisdiction and probably its funding. Accordingly, the State's parole and probation systems could be useful in helping facilitate such a "continuum of treatment" that goes beyond current PSD operations, but will require significant coordination between the involved agencies and community providers.

## Sex Offenders

Like other program and treatment areas the treatment capability for sex offenders in the system is currently limited to the capacity of the KCF on Hawaii, which is an open minimum security facility. As such the KCF provides an important function, especially near the end of sentence which follows the same reasoning as to when it is best to treat substance abusers. However, the number of sex offenders that are in higher security facilities is substantial as indicated by the growth in the system's sex offender population from 275 in 1992 to 675 and one female as of September 2003. The 1991 Plan called for a 20-bed intensive treatment therapeutic community to be established at the KCF and for a centralized intensive assessment center at a new special needs facility. *That recommendation is still valid and is supported by the new master plan with a dedicated treatment unit recommended to be included in the proposed 498-bed Special Needs Secure Treatment Facility.*



## Women's Issues

In 1991 the PSD was in the process of relocating female prison inmates from the old WCCC to the remodeled juvenile corrections facility known today as the WCCC located on the northeast side of Oahu. Due to litigation against the State at that time to provide adequate and equitable correctional capacity, services and programs for female offenders the WCCC was excluded from the 1991 master plan. The remodeling and expansion of the WCCC appears to have substantially improved the capacity, services, programs and general conditions for women since 1991. Since the juvenile corrections facility was designed with a substantial amount of activity and program space it provides more than enough space for programs as required by space standards. There remains, however, as documented in the facility assessment of chapter 3 some deficit in administrative, support/operations, and housing space for the rated bed capacity.

As compared to the WCCC the four county CCCs continue to be much more limited in the space needed for women prisoners as they were in 1991. The development of sufficient and comparable space for females at the county CCCs is probably the area of greatest need in the whole system for women prisoners. If the CCCs had adequate space for women the need for sending some females to the WCCC would be reduced.

## Academic Education, Vocational Education and Inmate Programs

In 1991 the lack of computer equipment for classrooms and labs was the major need for both academic and vocational education. That need appears to have been addressed in most facilities, however, the four county CCCs remain the most deficient in this area due to their overcrowding and lack of adequate space. The lack of space limits the ability to provide "job preparedness" training and classes, which has been proven to be a vital element for successful reintegration of criminal offenders. Most all facilities except the WCCC were found to be lacking in the amount of space needed for programs and inmate activities in general including programs for sex offender treatment and substance abuse education and treatment as noted above.

## Correctional Industries

Many states have had success in engaging private sector industries to establish operations inside prisons and jails. This appears to be an area in which the PSD has not yet established any such relationships but should be given consideration. At least on a trial basis an industrial recruitment specialist could be either employed in a staff position or contracted by the PSD to attempt to recruit local industries and employers to consider entering an employment contract with the PSD. A number of state DOCs and local jails have been successful in this regard even to the extent of having inmates paid minimum wage. In some cases these employers have hired former inmates who worked for them inside a correctional facility where they became a trained laborer ready for employment on the outside. Some effort also needs to be made to attempt to recruit a private sector employer who would provide training and work opportunities for the developmentally disabled with a sheltered workshop type operation.



## **Library Services**

Similar to 1991 the libraries throughout the system are lacking adequate space and the situation has only worsened in some facilities due to overcrowding. The law libraries at some facilities are inadequate for conventional books storage. Consideration should be given to converting regular law libraries to a computerized system with the use of desktop PCs since entire law libraries are now readily available on CD-ROM disks, which provides a big space savings.

## **Recreation**

Adequate space is lacking both inside and outside at most facilities. With overcrowding it becomes almost impossible at the CCCs and difficult at the Halawa MSCF for staff to provide inmates with the ACA standard of at least one hour a day of physical recreation.

## **Volunteers**

All facilities are generally lacking any dedicated or even shared space designated for the regular use of volunteers. Each correctional facility should have either a full- or part-time staff person assigned as a volunteer coordinator. Volunteers can be vital when there is not sufficient funding or staffing for the provision of programs and counseling services. The coordinator position can be essential to organizing volunteers and their activities to coincide successfully with the needs of inmates.

## **Religion**

As with other program and activity areas spaces available for religious activities are inadequate and in some cases no designated space is clearly available at all times for multi-denominational religious practice and activities. This is also an area where a volunteer coordinator can be valuable in helping assure that religious leaders and mentors from the community including all denominations are made available to inmates both on an individual and group basis within the security limitations of the particular facility. During the facility intake/RAD process an assessment should be made of each new inmate's religious involvement and desires. Religious involvement and activities have been proven to be a very successful in helping a criminal offender to make a lasting positive behavioral and lifestyle change.

## **Release Preparation**

The time and efforts spent by an inmate during the year prior to their release has been proven to be critical in determining the likelihood of succeeding on the outside and avoiding a relapse or return to criminal behavior. Individualized case management by assigned staff and assisting the inmate with developing a release plan are vital to a successful re-entry to free society. The Hawaii system has a sound procedure of returning a prisoner to the CCC on the island of their scheduled release at about one year before the release date. The time spent here in both inside and community-based



activities, work and training is very important and the State should be sure that each CCC has adequate staff and space for this function. The development of “half-way houses” should also be considered to expand the “community residential” capability of the system rather than limiting it to minimum security work furlough centers.

### **Domestic Violence Education and Treatment**

One of the treatment program areas that seem to be lacking in the Hawaii system is in education and treatment programs for domestic violence perpetrators. There tends to be a relatively high incidence of domestic violence among sentenced prisoners and the provision of treatment services and programs for this area can have a beneficial impact on behavioral change. The PSD should implement a DV treatment program such as the “Duluth Model” that has been successful in other state systems, both at the community corrections level as well as inside prisons and jails.

## **Section C. Support and Operations**

### **Human Resource Management**

Training was new in the Department as an organized function in 1991 and consequently a substantial number of management and programmatic recommendations were provided. Since that time a feasibility and planning study was made in an attempt to develop a new Departmental training center, which was never funded. As training is a vital component of the success of any corrections agency and to the providing staff with opportunity for progressive employment it is recommended that the PSD seek authorization to develop a central training academy that could also be made available for joint law enforcement training and thereby probably achieve wider support for funding by the Legislature. If only some of the new facilities recommended in this master plan update are approved for implementation the training needs of the PSD will grow substantially and the availability of a dedicated purpose-designed training academy would be an important staff development support resource.

### **Medical Health Care**

Adequate triage or clinic space is not available in several facilities and is most lacking in the county CCCs. Many spaces originally designed for medical services have been compromised or relocated to other spaces. Following are several specific recommendations for improving medical health care throughout the system:

- The system lacks a single medical center or clinic that should be co-located with a central intake/RAD unit and a new Special Needs Treatment Facility as the Halawa SNCF is totally inadequate and is recommended for demolition.
- Most all facilities need some medical observation beds, which would make them sufficient from a space needs standpoint as long as there was one central medical clinic



located in one prison facility where inmates could be sent for closer observation, specialist examinations and limited treatment.

- Re-entry linkages need to be made known to all staff involved in pre-release planning for inmates so that those with continuing medical and/or mental health needs can be linked to appropriate providers in the community upon release.
- The system needs an infectious disease control and response plan, policies and procedures.
- The proposed new Special Needs Treatment CF on Oahu should be identified as the location for the physically disabled, geriatric and infirm inmates who cannot remain in a general population assignment.
- In the future if a correctional complex is developed on Oahu on one large site to include the Special Needs Treatment Facility one of the other medium or minimum security facilities also recommended to be co-located on that site would be appropriate for housing the disabled, infirm and geriatric populations, which would free up space for others in the adjacent Special Needs Treatment CF.

## Mental Health Care

The system currently lacks an adequate treatment facility for the mentally disordered who cannot live in general population congregate housing units. The construction of such a unit was recommended in 1991 and is included as a component of the recommended 498-bed Special Needs Treatment Facility.

Of the approximate 13% to 15% of the total prison population that has some type of mental disorder it can be expected that only about 5% of that population will need to be assigned at least temporarily in a separate housing unit rather than in a general population unit. In addition to the prison system needing a dedicated facility for the acute and certain chronic mentally disordered inmates each CCC should have a designated cell pod for housing the mentally disordered along with other special needs inmates.

In most cases it should be expected that the vast majority of inmates with mental disorders should be able to be stabilized with a combination of medication and behavioral management training thus enabling them to return to or remain in a general prison. Most inmates that are assigned to the Special Needs Treatment CF at or during admission should also be able to be transferred to a general prison after diagnosis and stabilization are completed. The number of inmates who cannot be treated and stabilized and transferred from the new Special Needs Treatment CF should be relatively small in number. Space in this facility must be constantly turned over to avoid it becoming an end-of-line facility for too many inmates. Successful contemporary treatment programs in other states have proven that most mentally disordered inmates can in fact remain stable in a general population prison.



## Visitation

The CCCs were inadequate for accommodating non-contact visitation in 1991 and remain so today. The CFs tend to have appropriate space for contact visitation, but in some cases not enough, which requires extended visitation hours and attendant security staffing.

## Food Service and Warehousing

Both food service contracting and the development of a central warehouse system were recommended to be studied for feasibility in 1991 but no change has occurred yet in either system. Food service contracting has become quite prevalent in both jail and prison systems. The need for and feasibility of a central warehouse is usually justified on the basis of being able to make large bulk purchases of prison supplies, which generates major cost savings by discounts received for making a large bulk purchase. With suppliers being prevalent on Oahu it would be questionable as to whether the capital investment could be justified. The facilities on the other islands should have adequate storage space added to avoid shortages and have at least 12 days of food supplies on-hand in the event of an emergency.

## Commissary

A central commissary system was recommended in 1991 for its cost control benefits. If the Department ever decided to build a large central warehouse system the commissary system could also be integrated with that operation.

## Laundry

The laundries at the CFs were generally sufficient or at least had space to be able to add laundry machines as needed. The four CCCs, however, have a variety of domestic washers and dryers that should be replaced by commercial grade machines.

## Facility Management

The computerized maintenance management system (CMMS) and a system-wide maintenance coordinator that were recommended in 1991 have still not been purchased or hired. Given the repeated lack of adequate funding for normal repairs and maintenance that is endemic for all facilities the implementation of both would be most beneficial and is recommended as a top priority need that should be initiated in 2004 as a critical element of the 10-Year Master Plan.




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