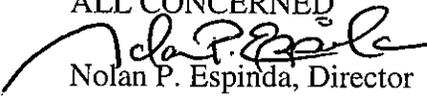


October 13, 2016

TO: ALL CONCERNED
FROM: 
Nolan P. Espinda, Director
SUBJECT: **AMENDMENTS TO COR.08.10: INMATE/DEFENDANT DRUG
DETECTION PROGRAM**

The following are the significant changes to COR.08.10, effective October 13, 2016:

- 1) Section 6, part 3.a.8) clarified that the staff shall ensure that the container is sealed with tamper proof tape.
- 2) Section 6, part .5.b added to provide further clarification of that retesting of creatinine level is only for confirmation of creatinine level, and not drug detection. Subsequent sections were renumbered.
- 3) PSD 8719 is updated to reflect a charge of \$22.00 for confirmatory testing for drugs and \$12.00 for confirmatory testing for creatinine level.
- 4) PSD 8720 is updated to reflect an option for creatinine in the checklist.
- 5) Minor formatting and grammar changes.

If you require any clarification, please contact Shelley Nobriga at 808-587-1262 or shelley.d.nobriga@hawaii.gov.

	DEPARTMENT OF PUBLIC SAFETY CORRECTIONS ADMINISTRATION POLICY AND PROCEDURES	EFFECTIVE DATE: October 13, 2016	POLICY NO.: COR.08.10
		SUPERSEDES (Policy No. & Date): COR.08.10 & 04/11/2016 COR.08.10 & 11/28/14	
SUBJECT: INMATE/DEFENDANT DRUG DETECTION PROGRAM		Page 1 of 20	

1.0 PURPOSE

To establish a standardized statewide program to detect, control and deter the unauthorized use and/or abuse of drugs and alcohol by adult inmates/defendants in order to support the Department of Public Safety's (PSD) commitment to its policy of zero-tolerance for substance abuse.

2.0 REFERENCES AND FORMS

.1 References:

- a. Department of Public Safety (PSD), Policy & Procedures (P&P) COR. 13.03, Adjustment Procedures Governing Serious Misconduct Violations and the Adjustment of Minor Misconduct Violations.
- b. Hawaii Revised Statutes (HRS) § 353-13.4, Substance Abuse Testing of Inmates.
- c. HRS, 2013 Supplemental, Chapter 353G, Criminal Offender Treatment Act.
- d. Redwood Toxicology Laboratory, *Urine Creatinine/Interpretation and THC/Creatinine Ratios*, Information Sheet.
- e. Substance Abuse and Mental Health Services Administration (SAMHSA), *Clinical Drug Testing in Primary Care*, Technical Assistance Publication (TAP) 32. HHS Publication No. (SMA) 12-4668. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.
- f. Substance Abuse and Mental Health Services Administration (SAMHSA), *The Role of Biomarkers in the Treatment of Alcohol Use Disorders, 2012 Revision*, SAMHSA Advisory, Spring 2012, Volume 11, Issue 2. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

.2 Forms:

- a. PSD 8718 – Urinalysis Testing Program (attached).
- b. PSD 8719 – Notice of Drug Detection Test form (attached).
- c. PSD 8720 – Urinalysis Test Record/Chain of Custody form (attached).

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- d. PSD 8728 – Urinalysis Testing Result form (attached).
- e. PSD 8729 – Substance Abuse Monthly Urinalysis Report Log Sheet (attached).

3.0 DEFINITION

- .1 Adulterated urine – Any urine sample that has been diluted with a foreign substance.
- .2 Chain of Custody – The process undertaken to ensure the integrity of the urine specimen taken from each inmate and/or defendant, from the time the inmate and/or defendant is selected to provide a urine specimen, to the final disposition of the urine specimen.
- .3 Coded – Defined as identifying the specimen with the inmate’s or defendant’s State Identification (SID) number and the date the specimen was taken.
- .4 Confirmation Test – A second analytical test performed by a certified and licensed laboratory contracted by PSD, on an inmate’s or defendant’s urine specimen, which was initially found to be positive for drugs and/or alcohol. This test will be conducted at an inmate’s or defendant’s request and expense.
- .5 Creatinine – A by-product of muscle metabolism that is excreted in the urine, and its measurement is routinely used clinically to evaluate kidney function. Urinary creatinine determination is also an important parameter for evaluating the validity of a urine specimen for drugs abuse detection. Normal creatinine levels are:
 - a. 40-300 mg/dL for men.
 - b. 37-250 mg/dL for women.
- .6 Defendant – Any person charged as an adult of committing a crime under State criminal law, that has been released by the court to Intake Service Center (ISC) supervision.
- .7 Diluted urine – Any urine sample without sufficient creatinine.
- .8 EtG – Ethyl Glucuronide. A biological marker found in the urine to indicate alcohol consumption.

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- .9 Illicit Substances – Shall include, but may not be limited to marijuana, cocaine including crack cocaine, opiates, phencyclidine, barbiturates, amphetamines, benzodiazepines, methadone, methaqualone, propoxyphene, alcohol, and any others as required by state law.
- .10 Jail Inmate - Any inmate committed to serve less than one (1) year (probation felons, sentenced misdemeanants, sentenced petty misdemeanants, pre-trial detainees, federal/other state holds). Also includes probation violators pending violation hearing adjudication.
- .11 mg/dL – Milligram per deciliter
- .12 ng/dL – Nanogram per deciliter
- .13 Prison Inmate - Any inmate committed to serve a sentence of more than one (1) year, including sentenced misdemeanants with consecutive terms totaling greater than one year, and parole violators.
- .14 Random Testing – A method for selecting inmates and/or defendants for testing which results in an equal probability that any inmate or defendant will be selected.
- .15 Reasonable Suspicion – A belief by facility and/or ISC staff that an inmate or defendant is using or has used illicit substances in violation of this policy, based upon objective and articulable facts and reasonable inferences and observable behavior, such as:
 - a. Slurred speech, staggered gait, loss of equilibrium, bloodshot eyes, odor of alcohol on breath, odor of marijuana, confusion, disorientation, lack of lucidity, etc.;
 - b. Direct observation of illicit substance use;
 - c. A report of illicit substance use, provided by a reliable and credible source, and which has been independently corroborated;
 - d. Evidence that an inmate or defendant has tampered with an urine test; and/or
 - e. Evidence that an inmate or defendant is or has been involved in the use, possession, sale, solicitation or transfer of illicit substances while incarcerated.

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- .16 Working days – Weekdays, Mondays through Fridays, excludes weekends and holidays.

4.0 POLICY

- .1 The use of illicit substances by inmates/defendants presents a serious threat to the safety and security of correctional facilities and to the community.
- .2 Urinalysis has been proven to be an effective means of maintaining drug free correctional environments, controlling contraband, detecting illicit use of drugs and alcohol, identifying substance abusers, determining treatment needs, and holding inmates and defendants accountable for their actions. Test results provide information useful for assigning inmates and defendants to appropriate treatment programs. Testing is also important in determining compliance with program rules, and imposing discipline on those who illicitly use drugs and alcohol. Urine testing is, therefore, an important management tool for staff, a deterrent for inmates/defendants, and it enhances public safety.
- .3 PSD has established controls to prevent the use of illicit substances by inmates and defendants. Wardens shall establish and ensure the proper implementation and maintenance of the urine testing program for inmates within their facilities. Intake Service Center (ISC) managers shall establish a urine testing program for defendants under their supervision. All inmates and/or defendants in community supervision programs shall be subjected to urine testing as described in this policy. It is the policy of PSD that all incidents of positive drug and/or alcohol tests will be met with appropriate sanctions and/or treatment interventions.
- .4 Each facility and ISC shall designate one person in writing to be responsible for ensuring that the program is carried out according to this policy and procedure.
- .5 The testing shall assess, at a minimum, for the following substances in the urine:
- a. Cannibinoid
 - b. Opiates
 - c. Cocaine
 - d. Amphetamines
 - e. Methamphetamines

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- f. Barbituates
- g. Alcohol – ETG
- h. Benzodiazapines
- i. MDMA “Ecstasy”
- j. Creatinine

5.0 REASONS FOR TESTING

- .1 Testing shall be conducted for any of the following reasons:
 - a. Random testing as described in 7.0 of this policy and procedure.
 - b. For cause as described in 8.0 of this policy and procedure.
 - c. In connection with a substance abuse treatment program as described in 9.0.
 - d. In connection with community-based correctional programs as described in 10.0.
 - e. In all cases requiring urinalysis testing as a court-ordered condition of supervised release as covered in section 11.0.
 - f. For security reasons with respect to transferring of inmates/defendants.
- .2 All testing (7.0 – 11.0) shall be done in accordance with the general procedures established in 6.0 of this policy and procedure.
- .3 There shall be mandatory drug testing for repeat offenders.

6.0 PROCEDURES

The procedures in this section apply to all urinalysis testing conducted in accordance with 5.0 of this policy and procedure.

- .1 Identifying the inmate/defendant to be tested.
 - a. The Warden or ISC Manager or his/her designee shall authorize a urinalysis for any inmate/defendant. The inmate/defendant shall be randomly selected

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for testing as outlined in 7.0 below. An inmate/defendant may be purposely selected for testing if there is reasonable suspicion that the inmate/defendant is using or has used an illicit substance(s).

- b. Notice of urine testing for defendants shall be documented on PSD 8718 and Notice of drug detection testing for inmates shall be documented on PSD 8719.

.2 Place of Testing

- a. Inmates/defendants shall be tested within the facility in which they are held or at the furlough site.
- b. Defendants under the jurisdiction of the ISC may be referred to a correctional facility to be tested or a certified laboratory contracted by PSD to perform such analysis. An ISC Manager shall designate an alternate site when the court specifically mandates it.
- c. The inmate/defendant shall be escorted or directed to a designated area affording reasonable security, privacy, and sanitary conditions. Staff of the same sex shall collect the urine specimen.
- d. ISC defendants tested at a facility will not be permitted to enter the secured part of the facility. ISC defendants will have their urine collected in an area accessible to the public such as the administrative area or inmate visit area.

.3 Chain of Custody Requirements

a. Obtaining the Urine Specimen

- 1) PSD 8720 shall document the testing procedure for both inmates and defendants. This form is to be filled out completely, and accompany the urine sample until it is tested.
 - a) In the event of a positive result, the specimen shall be kept for further testing. The specimen shall be discarded once the results of the confirmation test have been obtained.
 - b) If the inmate/defendant opts to appeal the results, PSD 8720 shall be kept on file for the duration of the grievance process.

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- 2) All bleach cleansing materials, household products, food condiments and any other substances or objects that the inmate/defendant could use to contaminate a sample shall be kept away from the inmate's/defendant's reach, or removed from the sample collection area.
- 3) The inmate shall be pat or strip-searched prior to submitting the urine specimen to ensure that the specimen submitted is that of the inmate/defendant. Inmates shall be required to wash their hands prior to submitting the urine specimen.
- 4) ISC defendants shall be pat searched prior to submitting the urine specimen to ensure that the specimen submitted is that of the defendant. ISC defendants shall be stripped searched if there is reasonable cause to believe there is an attempt to conceal any unauthorized substance. In all instances, defendants shall be required to wash their hands prior to submitting the urine specimen.
- 5) The inmate/defendant shall be asked if he/she has been taking any medication recently, and the response shall be noted on PSD 8720.
- 6) Prescribed medication will be verified by the medical unit when a positive result is obtained. Manufacturer's guidelines shall also be used to identify the impact of the medication on urinalysis testing results. If a confirmation test is requested, the licensed, certified laboratory technician conducting the confirmation test should determine whether the medication consumed resulted in illicit drugs being falsely detected.
- 7) Staff shall provide a specimen container and ensure that the specimen container is properly coded with the SID number, current date and sealed in the presence of the inmate/defendant. The SID number and current date shall be typed or written in indelible ink on a label, which is then affixed to the specimen container. Staff shall also ensure that the specimen container is properly dated.
- 8) After the specimen container has been properly coded in the presence of the inmate/defendant, the inmate/defendant shall be pat or strip-searched, and visually observed urinating into the container. Staff shall ensure that the container is properly sealed with tamper proof tape, the tamper proof tape is then initialed, and the container is properly coded in the presence of the inmate/defendant. The inmate/defendant shall sign

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the approval on PSD 8720, acknowledging that his/her specimen has been sealed and coded in his/her presence..

- 9) The inmate/defendant is expected to provide a fresh, clean, unadulterated, undiluted specimen of at least 30ml. If the inmate/defendant is unable to provide a urine specimen of 30 ml immediately, he/she shall be detained in a secured room for up to two hours. Staff shall maintain control of the specimen container until such time as the inmate/defendant is able to provide a urine sample. Staff shall not give the inmate/defendant more than two cups of water. The tamper proof seal shall be broken when the inmate/defendant is ready to provide a sample and resealed with a new tamper proof tape when required amount provided. If an inmate is unable to provide a specimen in two hours (considered a refusal) the inmate/ shall be subject to the sanctioning schedule established in P&P COR.13.03.
- 10) The PSD staff collecting the urine specimen from the inmate/defendant shall make the appropriate notations on PSD 8720.
- 11) All specimen containers shall be labeled and sealed in the presence of the inmate/defendant. The inmate/defendant shall sign his/her name in the appropriate section on PSD 8720, acknowledging that the specimen container was sealed and coded in his/her presence.
- 12) Any failure to provide an adequate and valid specimen, absent a documented medical condition from a qualified physician which precludes the inmate's ability to provide an adequate and valid specimen, will be considered a failure to comply with the requirements of the testing program and may include sanctions according to P&P COR.13.03.
- 13) A urine specimen with a creatinine level of 20 mg/DL or less shall be considered evidence of tampering, and the inmate shall be subject to a misconduct under P&P COR.13.03.
- 14) If an inmate refuses to submit a urine specimen, it shall be taken as an inference of guilt of a positive test result and shall be sanctioned under the schedule established in P&P COR.13.03. The same sanctioning schedule shall apply to inmates who tamper or attempt to tamper with urine specimens and/or results. The inmate maybe subject to additional misconduct violation(s) for refusing to obey an order of any staff member.

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15) P&P COR.13.03 does not apply to defendants under ISC supervision.

b. Processing the Urine Specimen.

- 1) All persons accessing the specimen shall make an appropriate notation of his/her name, and the date on PSD 8720.
- 2) In the event the collector of the urine specimen is the same individual as the urine specimen tester, the name of the individual is to be noted on PSD 8720, at "Specimen obtained by and Test Performed by".
- 3) Urinalysis tester shall place the specimen in a secure refrigerator if it is not tested immediately, for up to three working days. After the third working day, the specimen shall be frozen. The specimen shall be tested within ten working days after collection. "Tamper proof" tape shall be used to secure specimen containers.
- 4) The Warden/ISC Manager will ensure that only authorized staff will have access to the secured refrigerator(s) or freezer(s).
- 5) PSD or its contracting agent shall train urinalysis testers in the proper operation of the testing equipment. The individual performing the urinalysis shall follow procedures recommended by the manufacturer of the equipment.
- 6) A logbook shall be kept in the vicinity of the refrigerator(s) and/or freezer(s). Each person opening the refrigerator(s) or freezer(s) shall note his/her name, date, time of access, purpose, and identification of specimens handled, in the logbook.

c. Discarding the Urine Samples.

Urine samples with negative results should be disposed of immediately after testing has been completed. The following procedures should be followed:

- 1) Urine should be emptied in the facility's toilet after having been tested.
- 2) Used specimen containers may be disposed of in trash bins.

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d. Retaining Positive Urine Samples.

Urine samples with positive results shall be kept in a secured freezer until the confirmation test results are received from the contracted, certified laboratory.

If a positive result is obtained due to medication taken by the inmate/defendant, the medical unit staff will be asked to secure a signed release from the inmate/defendant allowing this information to be shared by the medical unit regarding the use of medications. The staff responsible for urinalysis testing will consult the manufacturer's guidelines to identify the impact of the type of medication on the urinalysis test results. The staff obtaining the information will document this information on PSD 8720.

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.4 Threshold Levels.

- a. PSD shall use the following guidelines to determine the cutoff concentrations for initial and confirmatory drug tests in urine.

Initial Test Analyte	Federal Cutoff Concentrations (ng/dL)
Marijuana Metabolites	50
Cocaine Metabolites	150
Opiate Metabolites (codeine/morphine)	2,000
6-Acetylmorphine (6-AM)	10
Amphetamines (Amphetamine/methamphetamine)	500
Phencyclidine (PCP)	25
Methylenedioxymethamphetamine (MDMA)	500
Confirmatory Test Analyte	Federal Cutoff Concentrations (ng/dL)
Amphetamine	250
Methamphetamine	250
MDMA	250
Methylenedioxyamphetamine (MDA)	250
Methylenedioxyethylamphetamine (MDEA)	250
Cannabinoid metabolite (delta-9-tetrahydrocannabinol-9-carboxylic acid)	15
Cocaine metabolite (benzoylecgonine)	100
Codeine	2,000
Morphine	2,000
6-Acetylmorphine (6-AM)	10
PCP	25

- b. The threshold for alcohol detection is an EtG level of 500 ng/mL.

.5 Confirmation Testing.

- a. Those inmates/defendants who test positive on the initial test shall be notified in writing that they may request for a confirmation test by a certified laboratory, contracted by PSD, on form PSD 8719 (see attached). Upon such a request, the sample will be split with half being sent for confirmation to the certified laboratory, and the other half being retained until the confirming results are obtained. The inmate/defendant shall pay the cost of confirmation tests for each drug found to be above the limit of the

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quantization Gas Chromatograph/ Mass Spectrometry (GC/MS) cutoff level. PSD will pay the cost of confirmation tests that are below the limit of the quantization GC/MS cutoff level.

- b. A urine specimen with a creatinine level of 20 mg/DL or less is identified as an abnormal sample. A confirmatory test will **only confirm** that dilution has occurred; the test will not show a positive finding for any particular drug.
- c. Positive test results and the availability of a confirmation test shall be provided to the inmate/defendant in writing. Staff shall be responsible for ensuring that the inmate/defendant sign the acknowledgement of receipt of the initial test result and the confirmation test results contained on PSD 8719. Form PSD 8719 shall be used to notify inmates/defendants of the results and availability of a confirmation test. The urinalysis tester shall notify the facility business office within two working days that the inmate/defendant requested a confirmation test to be conducted.

.6 Method of Payment for Confirmation Tests

The following procedures shall be followed when a confirmation test is requested:

- a. The Notice of Drug Detection Test form PSD 8719 will be used to initiate all confirmation tests.
- b. The urinalysis tester will submit a copy of PSD 8719 to the facility's business office within two working days of the confirmation request.
- c. The facility's business office shall freeze (prohibit the transfer) an amount equal to the cost of each drug confirmation test from the inmate's/defendant's spend-able account. Transactions will be made within ten (10) working days of the confirmation test request. Upon a finding of indigence, the facility shall require the person to pay as much of the fee as is consistent with the person's ability to pay (HRS, 2013 Supplemental, § 353G-10).
- d. The contracted laboratory will submit two invoices to the PSD, Corrections Program Services Division, Substance Abuse Services Branch (SA Branch), to be paid in full for all the confirmation tests conducted. The invoice will include a list of the inmate's/defendant's name and as to whether the confirmatory test was positive or negative. The SA Branch shall be responsible to pay for all the negative confirmatory test results.

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If the confirmation tests are negative, the amount frozen from the inmate's/defendant's account for the confirmation test will be transferred back to the inmate's/defendant's spending account. The business office will make this transaction within five (5) working days of receiving the results of the confirmation test.

- e. The inmates/defendants with positive confirmation test results shall be responsible to reimburse the SA Branch for the cost of the confirmation test. The facility's business office, within three (3) working days of receiving the invoice, shall debit the inmate's/defendant's account and send a check to the SA Branch. The check shall be made payable to: State of Hawaii, Director of Finance. The Invoice Number and the Purchase Order Number shall be noted on the check in order to credit the correct individual.
- f. The SA Branch shall be responsible for the payment of the confirmation test if the results are returned from the laboratory as negative.

.7 Documentation.

Facilities will be responsible for maintaining a log of urinalysis tests results and for submitting monthly reports to PSD's Substance Abuse Program Manager. At a minimum, facilities shall keep the information contained in PSD 8729 (see attached) and PSD 8728 (see attached). The documents shall be submitted to the Substance Abuse Program Manager by the fifth of each month for urinalysis tests conducted during the previous month.

.8 Method of Testing.

PSD shall specify the equipment or methods used to conduct urinalysis tests in accordance with HRS Chapter 353G, and § 353-13.4. Testing may be done using FDA approved field test kits such as cups, strips, patches, etc., or using the Enzyme Multiplied Immunoassay Technique (EMIT).

.9 Urinalysis Tester.

Each facility shall designate a person or persons who is (are) responsible for urinalysis testing and determining test results. Only properly trained staff (i.e., by the manufacturer or PSD) shall conduct urinalysis tests using equipment approved by PSD. Other security or facility personnel may collect the samples for testing, provided they follow all proper procedures as outlined above.

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.10 Ordering the Inmate/Defendant to be Tested.

The inmate/defendant ordered to submit a urine specimen for urinalysis testing shall be informed of the underlying reason in writing on the PSD 8719. If the inmate/defendant refuses or is unable to provide a specimen, he/she shall be informed that the refusal or inability to provide a specimen will be considered an inference of guilt of a positive test. The inmate will be subject to disciplinary action under P&P COR.13.03.

P&P COR.13.03 does not apply to defendants under ISC supervision.

.11 Notification of Test Results.

The inmate/defendant ordered to submit a urine specimen should be informed of his/her positive test result within five (5) working days of the test. Positive test results and the availability of a confirmation test are to be provided to the inmate/defendant in writing. PSD 8719 shall be used to notify inmate/defendants.

.12 Sample Rejection.

A urine sample submitted for drug testing is rejected and, therefore, cannot be analyzed if:

- a. The evidence tape is altered.
- b. There is a break in the tamper-proof evidence tape, which questions the integrity of the sample.
- c. The label is not filled out with complete information to identify the donor.
- d. The sample is less than 30ml.

7.0 RANDOM URINALYSIS TESTING

The purpose of random urinalysis testing is to identify and deter the use of drugs and alcohol for all inmates and defendants in the custody of PSD. Each facility and ISC shall conduct random urinalysis at least once each month according to the following procedure:

- .1 The random targets are based on monthly population caseload or counts, including inmate transfers and new admissions. The targets shall be used by the

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facility, center or ISC as the minimum number of random tests to be conducted each month. For correctional facilities and centers, the target number of tests conducted each month will be equivalent to a minimum of 5% of the inmate population caseload or count on the first of the month. The ISCs may also utilize the 5% random target of their caseload. All facilities, centers and ISCs will use the following method for conducting random urinalysis tests:

- a. All urinalysis testers shall obtain a current facility roster or module roster from the Warden/ISC Manager or his/her designee.
- b. The urinalysis tester shall determine the number of random tests to be conducted that day (for example the number of tests to be conducted is 16).
- c. The tester shall divide the total number of names on the roster (for example 80) by the number of tests to be conducted (for example 16); this is the count number.

Example: $80 \div 16 = 5$ (count number)

- d. When the count number includes a remainder, use the whole number and ignore the remainder.

Example: $90 \div 4 = 22.5$ or 22 (count number)

- e. The urinalysis tester shall determine the starting point on the roster by randomly selecting a number. For example the tester draws a three (3). Then the tester uses the third name on the roster as the starting point.
 - f. From the determined starting point (three in example), the tester then uses the count number to count down the list. These are the individuals who shall be subject to a random test. In the example, starting with the third person on the list, every fifth person shall be randomly tested (8, 13, 18, etc.)
- .2 The names of inmates/defendants to be tested shall remain strictly confidential. Access to the list shall be limited to the tester and the Warden/Branch Administrator or his/her designee until the time of testing.
 - .3 Each inmate//defendant whose name has been randomly selected for testing, shall be notified in writing as required in Section 6.10 - "Ordering an Inmate/Defendant to be Tested."

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- .4 Facilities shall follow all procedures outlined in 7.0 in conducting random testing.
- .5 Sanctions under P&P COR.13.03 shall be applied to any individual, excluding defendants on supervised release by the courts and under the jurisdiction of an ISC, whose urinalysis test is positive, for failure to give a sample or is subsequently found guilty of any illicit substance abuse violation including the possession of drug paraphernalia such as a scale, hypodermic needle, butane torch, rolling paper, etc.

8.0 TESTING FOR SUSPICION OR CAUSE

- .1 Inmates/defendants may be tested for suspicion or cause when documentation has been made that reflects one or more of the following:
 - a. Correctional staff have reason to believe the inmate//defendant is under the influence of drugs or alcohol;
 - b. The inmate/defendant is found to be in possession of suspected illicit drugs, or when suspected illicit drugs or drug paraphernalia are detected or found in an area controlled, occupied, or inhabited by the inmate//defendant. Drug paraphernalia includes but may not be limited to: a scale, hypodermic needle, butane torch, rolling paper, etc.;
 - c. Correctional staff receives information that the inmate//defendant is currently under the influence of drugs or alcohol, has recently used illicit drugs or ION scan detected traces of drugs;
 - d. An inmate/defendant returns late from: 1) furlough, 2) work or study release, 3) temporary release off grounds, or 4) any outside work detail;
 - e. An inmate/defendant is found unconscious and is not known to be injured;
 - f. An inmate/defendant exhibits unusual drug-related behavior; and/or
 - g. An inmate/defendant exhibits signs of drug use, such as needle marks.
- .2 Sanctions.

Inmates who test positive for suspicion or cause, fail to give a sample or are subsequently found guilty of any substance abuse violation, including the possession of drug paraphernalia, and/or tampers with or attempts to tamper with

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a sample, shall be sanctioned in accordance with the schedule of sanctions in P&P COR.13.03.

P&P COR.13.03 does not apply to defendants under ISC supervision.

.3 Frequency of Testing.

Inmates/defendants shall be tested whenever a correctional staff person has reason to believe the inmate/defendant meets the criteria of Section 8.1. The Warden/ISC Manager or his/her designee shall authorize all tests.

9.0 TESTING IN CONNECTION WITH TREATMENT PROGRAMS

All individuals participating in PSD's substance abuse treatment programs or programs providing services under contract with PSD, will be subject to urinalysis testing. Inmates/defendants approved for transfer to a treatment program may be tested within 3 days prior to the scheduled transfer date. If the test result is positive, the transfer will be revoked and the inmate/defendant sanctioned in accordance with policies and procedures.

Treatment programs include, but are not limited to: individual, group, and family counseling; residential services; and Therapeutic Community programs. The purpose of testing participants in treatment is to maintain the integrity of the program and to ensure that all persons in treatment remain alcohol and drug free.

.1 Frequency of Testing.

Inmates participating in Outpatient, Intensive Outpatient, or Residential substance abuse treatment programs while incarcerated shall be tested at a minimum of once a month. Inmates/defendants participating in community based substance abuse treatment programs (Furlough Status) shall be tested at a minimum of twice per month.

.2 Sanctions

Inmates who test positive while participating in treatment programs, fail to provide a sample, tamper with or attempt to tamper with a sample, or are subsequently found guilty of any substance abuse violation including the possession of drug paraphernalia, shall be sanctioned in accordance with the schedule of sanctions in P&P COR.13.03.

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10.0 TESTING IN CONNECTION WITH COMMUNITY BASED CORRECTIONAL PROGRAMS

All individuals participating in PSD's community-based correctional programs (i.e., furlough, extended furlough, community work lines, day-reporting centers, halfway houses, community residential beds, etc.) may be subject to, as a condition of participation, urinalysis testing upon request. Inmates approved for transfer to a community-based program may be tested within 3 days prior to the scheduled transfer date. If the test result is positive, the transfer shall be revoked and the inmate will be sanctioned in accordance with PSD policies and procedures.

.1 Frequency of Testing.

All participants in community-based correctional programs shall be tested at any time during their participation in the program and at a minimum of twice per month.

.2 Selection of Inmates/Defendants.

Inmates/defendants in community-based programs may be selected at any time to provide a urine specimen for testing.

.3 Sanctions.

Inmates/defendants in community-based correctional programs who test positive while participating in treatment programs, fail to provide a sample, tamper with or attempt to tamper with a sample, or are subsequently found guilty of any substance abuse violation, including the possession of drug paraphernalia, will have their transfer revoked, and/or shall be sanctioned in accordance with the schedule of sanctions in P&P COR.13.03.

11.0 TESTING DEFENDANTS WHO ARE ORDERED BY THE COURTS TO SUBMIT A URINALYSIS SPECIMEN AS A CONDITION FOR PRETRIAL SUPERVISION

.1 The ISC shall test defendants on supervised release that are mandated by the Courts.

.2 Defendants or retakes (i.e., probation violators, parole violators, individuals arrested for contempt of court, bench warrants, individuals detained pending arraignment and plea hearing, etc.) may also be tested anytime for cause when

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counselors and staff have reason to believe they are under the influence of drugs and/or alcohol. The criteria for testing for cause are defined in Section 8.0.

a. Procedures.

1. Defendants shall be required to present identifications before submitting to testing. Identifications will be made available to all defendants who have been court-ordered to submit to urinalysis testing. The ISCs shall be responsible for providing the identifications so that correctional facilities can correctly identify those that have been referred for testing.
2. In cases where the counselors conduct the collection of urine, the ISC Manager or his/her designee will ensure that the chain of custody is properly followed as outlined in Section 6.3.
3. PSD 8718 (see attached) will be fully and completely filled out by the defendant, counselor, and correctional facility. Correctional facilities shall notify counselors when a defendant refuses to submit to a urine test, and/or fails to produce a specimen or his/her identification. An unexcused absence shall also constitute a refusal to submit to testing.
4. Should a defendant, pre-trial defendant or retake, be unable to provide a sample on demand, the correctional facility will allow the defendant two (2) hours in which to submit a sample. Should the defendant, pre-trial defendant or retake, at the end of the two-hour period, still be unable to or refuse to submit a sample, the correctional staff shall make appropriate notations on PSD 8718. The counselor will then confer with his or her supervisor for further action.
5. ISCs will be responsible for maintaining a log of urinalysis tests results and for submitting monthly reports to the Department's Substance Abuse Program Manager. At a minimum, ISCs shall keep the information contained on PSD 8729 and PSD 8728. The documents shall be submitted to the Substance Abuse Program Manager by the fifth of each month for tests conducted in the previous month.

b. Sanctions

ISC Manager will notify the Court upon motion regarding defendants who test positive in urinalysis testing, and/or defendants who refuse to provide a sample, tamper with or attempt to tamper with urinalysis specimens and/or results.

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12.0 DOCUMENTATION

Facilities will be responsible for maintaining monthly outcomes of defendants/inmates testing positive and the appropriate sanctions and/or reprogramming action taken. A monthly report PSD 8729 and PSD 8728 shall be submitted to the Substance Abuse Program Manager by the fifth of each month.

13.0 COMPLIANCE

It is the responsibility of the Warden/ISC Manager to ensure compliance with this policy and procedure. A positive test result from a substance abuse test that fails to meet the requirements of HRS §353-13.4 shall not be reported or recorded.

14.0 SCOPE

This policy applies to all adult offenders; inmates and defendants detained and/or incarcerated, and apply to all correctional facilities and ISCs of the PSD.

APPROVAL RECOMMENDED:


Deputy Director for Corrections

October 13, 2016
Date

APPROVED:


Director

October 13, 2016
Date

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STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
URINALYSIS TESTING PROGRAM

TO: _____

As part of your court-ordered conditions for drug testing, you are instructed to report to

_____ on _____

between the hours of _____ and _____

1. Drink liquids before you report to the correctional center (CCC) or lab, it will speed up the process. You have two hours to produce a sample.
2. Show your I.D. at the CCC or lab. They will be expecting you and will match you with your I.D.
3. If you fail to give a sample, it will be considered a refusal. A refusal to comply with the testing procedures will be taken as an inference of guilt for introduction or use of any narcotic, drug, or intoxicant and will result in sanctions being imposed as though a "positive" finding were received in the test. Failure to provide a urine sample within 2 hours is considered a refusal.
4. Do not tamper with the sample. The same sanction as refusal to provide a urine sample will be imposed for those who tamper with a sample.

I understand the conditions of the program and I agree to abide by them.

Signature SSN

NOTIFICATION OF NON-COMPLIANCE

_____ has not attended urinalysis testing that
Name
was scheduled for _____
Date

RESULTS OF URINALYSIS DRUG SCREEN TEST

The urine sample you provided on _____ was tested and a

Positive _____ Negative _____ was received
indicating the use of _____

Defendant's Signature: _____ Date: _____ Time: _____

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

NOTICE OF DRUG DETECTION TEST

TO: _____ SSN/SID _____
(Inmate's Name)

You are hereby notified that you will be subjected to a drug detection test based on:

(Justification, including random testing)

A FINDING OF "POSITIVE" OR "ABNORMAL" WILL SUBJECT YOU TO PRESCRIBED SANCTIONS IN ACCORDANCE WITH THE POLICIES AND PROCEDURES OF THE CORRECTIONS DIVISION.

A refusal to comply with the testing procedures will be taken as an inference of guilt for introduction or use of any narcotic, drug, or intoxicant and will result in sanctions being imposed as though a "positive" finding were received in the test. Failure to provide a urine sample within two (2) hours is considered a refusal. You are required to provide a fresh, clean, unadulterated, undiluted urine sample of no less than 30 ml.

You may appeal any sanction imposed via the approved grievance procedure.

Date: _____ Employee: _____

Location: _____ Witness: _____

Acknowledgement of Notice:

Inmate Signature: _____ Date: _____

RESULTS OF URINALYSIS DRUG SCREEN TEST

The urine sample you provided on _____ was tested and a

Positive _____ Negative _____ was received indicating the use of

_____, and/or the urine sample provided was

Abnormal _____, indicating a diluted sample Normal _____ indicating an undiluted sample.

Failure to provide a urine sample is considered a refusal.

Inmate Signature: _____ Date: _____

Tester's Signature: _____ Date: _____

CONFIRMATORY TESTING FROM AN APPROVED LABORATORY IS PERMITTED. IN INSTANCES WHERE A POSITIVE OR ABNORMAL TEST RESULT IS CONFIRMED, THE INMATE SHALL PAY FOR THE COST OF EACH CONFIRMATORY TEST.

ACKNOWLEDGEMENT OF DRUG TEST RESULTS

I, _____ acknowledge receipt of my Urinalysis

Drug Test Results on _____ at _____ .

Inmate's Signature: _____ Date: _____

***REQUEST / REFUSAL FOR CONFIRMATORY TEST**

I, _____ , request / refuse a confirmation test at a

NIDA-Certified laboratory for _____ .

I understand that if the test is confirmed positive, the cost for each drug-tested positive (approximately \$22.00 per drug) will be charged to my account (\$22.00 per drug X 2 confirmatory drugs tested positive = \$44.00). I also understand that Creatinine Confirmatory Testing is approximately \$12.00 and will be charged to my account.

Inmate's Signature: _____ Date: _____

RESULTS OF CONFIRMATION TEST

The urine sample you provided on _____ was tested by a

NIDA-Certified laboratory and a Positive _____ Negative _____

result was received indicating the use of _____ .

You will _____ You will not _____ be charged with the cost of the confirmation test.

Signature of Tester: _____ Date: _____

ACKNOWLEDGEMENT OF RECEIPT OF CONFIRMATORY TEST RESULTS

I, _____ , acknowledge receipt of my

CONFIRMATORY URINALYSIS DRUG TESTING results.

Signature of Inmate: _____ Date: _____

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
URINALYSIS TEST RECORD/CHAIN OF CUSTODY

Donor's Name: _____ SSN/SID#: _____ Facility: _____

Requestor: _____ Date: _____

Action Leading to Request: _____

Agent Suspected: Checklist

- Marijuana _____
- Cocaine _____
- Opiates _____
- Alcohol _____
- Amphetamines _____
- Creatinine _____
- Other _____

If Other Specify: _____

Test Approved by: _____ Date: _____

Specimen Container Sealed/Coded by: _____ Date: _____

Acknowledgement specimen container sealed and coded in donor's presence:

Donor's Signature: _____ Date: _____

Test Performed by: _____ Date: _____



Donor told the underlying reason why he/she is being ordered to submit to a urine sample

Circle one:

Suspicion or Cause / Random / Treatment / Community-Based Correctional Program

Donor told by: _____ Date: _____ Time: _____

Has donor taken medication? No _____ If Yes, specify: _____

Manufacture's guidelines of impact? _____

Specimen obtained by: _____

CHAIN OF CUSTODY (Starting with staff obtaining urine specimen):

From: _____	To: _____	Date: _____	Time: _____
From: _____	To: _____	Date: _____	Time: _____
From: _____	To: _____	Date: _____	Time: _____
From: _____	To: _____	Date: _____	Time: _____
From: _____	To: _____	Date: _____	Time: _____
From: _____	To: _____	Date: _____	Time: _____
From: _____	To: _____	Date: _____	Time: _____

First Test

Sample tested by _____ Date: _____ Time: _____

Results: Checklist

	Positive	Negative
Marijuana	_____	_____
Cocaine	_____	_____
Opiates	_____	_____
Alcohol	_____	_____
Amphetamines	_____	_____
Other	_____	_____

Creatinine Level: _____ mg/dL

Second Test

Sample tested by _____ Date: _____ Time: _____

Results: Checklist

	Positive	Negative
Marijuana	_____	_____
Cocaine	_____	_____
Opiates	_____	_____
Alcohol	_____	_____
Amphetamines	_____	_____
Other	_____	_____

Creatinine Level: _____ mg/dL

THIS FORM IS TO BE FILLED OUT COMPLETELY. IT IS TO ACCOMPANY THE URINE SAMPLE UNTIL THE SPECIMEN IS TESTED AND CONFIRMED. ONE COPY OF THE TEST RESULTS IS TO BE STAPLED TO THIS FORM AND DELIVERED TO THE OFFICER RESPONSIBLE FOR DISCIPLINE REGARDLESS OF THE RESULTS.

**STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY**

URINALYSIS TESTING RESULTS

Inmate Population Count _____
Correctional Facilities **Correctional Centers**

TOTALS

RANDOM	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext. Furlough									
Supervised Release									
Level II									
Level III									

CAUSED	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext. Furlough									
Supervised Release									
Level II									
Level III									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext. Furlough									
Supervised Release									
Level II									
Level III									

OISC	RANDOM	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Supervised Release									
	CAUSE									
	Supervised Release									

KISC	RANDOM	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Supervised Release									
	CAUSE									
	Supervised Release									

HISC	RANDOM	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Supervised Release									
	CAUSE									
	Supervised Release									

MISC	RANDOM	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Supervised Release									
	CAUSE									
	Supervised Release									

SUBTOTALS for Intake Service Centers

RANDOM	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Supervised Release									

CAUSED	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Supervised Release									

HCF	RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	General Population									
	Level II									

CAUSED	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
General Population									
Level II									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Clean & Sober									
Level II									

KCF	RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	General Population									
	Level II									
	KASHBOX									

CAUSED	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
General Population									
Level II									
	KASHBOX								

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Level II									
	KASHBOX								

WCF	RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	General Population									
	Level II									
	KASHBOX									

CAUSED	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
General Population									
Level II									
	KASHBOX								

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Level II									
	KASHBOX								

SUBTOTALS for Correctional Facilities

RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
General Population									
Level II									
	KASHBOX								

CAUSED	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
General Population									
Level II									
	KASHBOX								

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Level II									
	KASHBOX								

KCCC	RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Incarcerated									
	Work Release									
	Furlough									
	Ext Furlough									
	Supervised Release									
	Life Stand									

CAUSE	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext Furlough									
Supervised Release									
Life Stand									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext Furlough									
Supervised Release									

MCCC	RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Incarcerated									
	Work Release									
	Furlough									
	Ext Furlough									
	Supervised Release									
	Life Stand/Aloha House									

CAUSE	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext Furlough									
Supervised Release									
Life Stand/Aloha House									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext Furlough									
Supervised Release									
Life Stand/Aloha House									

MCCC	RANDOM5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Incarcerated									
	Work Release									
	Level II									
	Ext Furlough									
	Supervised Release									
	BISAC									

CAUSE	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Level II									
Ext Furlough									
Supervised Release									
BISAC									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Level II									
Ext Furlough									
Supervised Release									
BISAC									

OCCC	RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Incarcerated									
	Work Release									
	Community Service									
	LWFC: Level II									
	Ext Furlough									
	Project Bridge									
Day Reporting Center										

CAUSE	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Community Service									
LWFC: Level II									
Ext Furlough									
Project Bridge									
Day Reporting Center									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Community Service									
LWFC: Level II									
Ext Furlough									
Project Bridge									
Day Reporting Center									

WCCC	RANDOM 5%	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
	Incarcerated									
	Work Release									
	Furlough									
	Ext Furlough									
	Supervised Release									
	Day Reporting Center									
	Level II									
	Ho'omana									

CAUSE	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext Furlough									
Supervised Release									
Day Reporting Center									
Level II									
Ho'omana									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
Furlough									
Ext Furlough									
Supervised Release									
Day Reporting Center									
Level II									
Ho'omana									

SUBTOTALS for Correctional Centers

RANDOM	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
LWFC									
LWFC: Level II									
Ext Furlough									
Supervised Release									
Project Bridge									
Level II									
Ho'omana									
Day Reporting Center									

CAUSE	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
LWFC									
LWFC: Level II									
Ext Furlough									
Supervised Release									
Project Bridge									
Level II									
Ho'omana									
Day Reporting Center									

TREATMENT	Given	#Pos.	%Pos.	Marijua.	Cocaine	Opiates	Amphet	Alcohol	Other
Incarcerated									
Work Release									
LWFC									
LWFC: Level II									
Ext Furlough									
Supervised Release									
Project Bridge									
Level II									
Ho'omana									
Day Reporting Center									

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

SUBSTANCE ABUSE MONTHLY URINALYSIS REPORT
LOG SHEET

Reporting Month/Year:		Facility:									
Reporting Officer:		Inmate Population on the first day of the month:									
R A N D O M	STATUS		#TEST	#POS	Marijuana	Cocaine	Opiates	Amphet	Alcohol	Other	
	Incarcerated	Sent. Felon									
		S.F. Prob.									
		PV									
		PRBV									
		Sent. Misd.									
	Pre-Trial										
	Work Release										
	Furlough										
	Supervised Release										
	Day Reporting										
	Project Bridge										
	Treatment/Level II										
	Treatment/ Level III										
	Parole										
Other (specify)											
TOTAL:											
C A U S E	Incarcerated										
	Incarcerated	Sent. Felon									
		S.F. Prob.									
		PV									
		PRBV									
		Sent. Misd.									
	Pre-Trial										
	Work Release										
	Furlough										
	Supervised Release										
	Day Reporting										
	Project Bridge										
	Treatment/Level II										
	Treatment/ Level III										
	Parole										
Other (specify)											
TOTAL:											
T R E A T M E N T	Incarcerated										
	Incarcerated	Sent. Felon									
		S.F. Prob.									
		PV									
		PRBV									
		Sent. Misd.									
	Pre-Trial										
	Work Release										
	Furlough										
	Supervised Release										
	Day Reporting										
	Project Bridge										
	Treatment/Level II										
	Treatment/ Level III										
	Parole										
Other (specify)											
TOTAL:											
C O N F I R M	Incarcerated										
	Incarcerated	Sent. Felon									
		S.F. Prob.									
		PV									
		PRBV									
		Sent. Misd.									
	Pre-Trial										
	Work Release										
	Furlough										
	Supervised Release										
	Day Reporting										
	Project Bridge										
	Treatment/Level II										
	Treatment/ Level III										
	Parole										
Other (specify)											
TOTAL:											