A BILL FOR AN ACT

RELATING TO CORRECTIONS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 The legislature finds that experts have long SECTION 1. documented the detrimental effects of solitary confinement on 2 3 individuals. Spending time in solitary confinement has been 4 found to increase the risk of premature death, even after release from incarceration. Solitary confinement is a severe 5 form of punishment that is closely associated with long-lasting 6 7 psychological harm and poor post-release outcomes. The official purposes of solitary confinement are typically divided into 8 9 punishment and correctional facility management. When used as 10 punishment by facility authorities, sometimes called 11 "disciplinary custody" or "disciplinary segregation", solitary confinement serves as a response to misconduct charges such as 12 fighting or drug use. When used for correctional facility 13 14 management, often called "administrative custody" or "administrative segregation", solitary confinement serves to 15 separate inmates deemed to pose a threat to staff or other 16 17 inmates, or as protective custody for inmates who seem or are



determined to be unsafe in the general prison population.
 Although the purposes of solitary confinement vary, correctional
 facility conditions and restrictions are often similar whether
 an incarcerated person is in disciplinary or administrative
 custody.

6 The legislature also finds that an overwhelming body of 7 evidence shows that solitary confinement -- which deprives inmates of meaningful human contact, including phone privileges that 8 9 allow them to speak with loved ones--creates permanent 10 psychological, neurological, and physical damage. The legislature notes that House Concurrent Resolution No. 85, H.D. 11 2, S.D. 1 (2016), requested the establishment of a task force to 12 13 study effective incarceration policies to improve Hawaii's 14 correctional system. The interim report of the task force, which was dated February 2017 and provided to the legislature, 15 included an observation by the Vera Institute of Justice that 16 the prevalence of incarcerated people having mental illness is 17 18 at odds with the design, operation, and resources of most correctional facilities. Studies show that the detrimental 19 20 effects of solitary confinement far exceed the immediate 21 psychological consequences identified by previous research, such



as anxiety, depression, and hallucinations. Unfortunately,
 these detrimental effects do not disappear once an inmate is
 released from solitary confinement. Even after release back
 into a community setting, a former inmate faces an elevated risk
 of suicide, drug overdose, heart attack, and stroke.

6 The legislature recognizes that in 2019, twenty-eight states introduced legislation to ban or restrict the use of 7 solitary confinement. Further, twelve states have passed reform 8 9 legislation: Arkansas, Connecticut, Georgia, Maryland, Minnesota, Montana, Nebraska, New Jersey, New Mexico, Texas, 10 Washington, and Virginia. Some of these new laws, such as those 11 enacted by Connecticut and Washington, reflect tentative and 12 piecemeal approaches to change. However, most of the new laws 13 represent significant reforms to existing practices and thus 14 have the potential to facilitate more humane and effective 15 practices in prisons and jails. 16

17 The legislature further finds that the revised United 18 Nations Standard Minimum Rules for the Treatment of Prisoners, 19 also known as "the Nelson Mandela Rules" to honor the legacy of 20 the late South African president, are based upon an obligation 21 to treat all prisoners with respect for their inherent dignity



Page 3

and value as human beings. The rules prohibit torture and other 1 2 forms of maltreatment. Notably, the rules also restrict the use 3 of solitary confinement as a measure of last resort, to be used only in exceptional circumstances. Moreover, the rules prohibit 4 the use of solitary confinement for a time period exceeding 5 fifteen consecutive days and characterize this disciplinary 6 7 sanction as a form of "torture or other cruel, inhuman or degrading treatment or punishment". Indeed, Nelson Mandela said 8 he found solitary confinement to be "the most forbidding aspect 9 of prison life" and stated that "[t]here was no end and no 10 beginning; there's only one's own mind, which can begin to play 11 tricks." 12 13 Accordingly, the purpose of this Act is to:

14 (1) Prohibit indefinite solitary confinement;

15 (2) Prohibit prolonged solitary confinement;

16 (3) Prohibit placement of an inmate in a dark or17 constantly lit cell;

18 (4) Restrict the use of solitary confinement in
19 state-operated and state-contracted correctional
20 facilities, with certain specified exceptions;



4

1	(5)	Prohibit inmates incarcerated or detained in
2		state-operated or state-contracted correctional
3		facilities from being placed in solitary confinement,
4		unless there is reasonable cause to believe that an
5		inmate or other persons would be at substantial risk
6		of immediate serious harm as evidenced by recent
7		threats or conduct, and that a less restrictive
8		intervention would be insufficient to reduce this
9		risk; and
10	(6)	Prohibit the use of solitary confinement for a member
11		of a vulnerable population.
12	SECT	ION 2. Chapter 353, Hawaii Revised Statutes, is
13	amended by	y adding a new section to part I to be appropriately
14	designated	d and to read as follows:
15	" <u>§</u> 35:	3- Solitary confinement; restrictions on use;
16	policies a	and procedures. (a) The use of solitary confinement
17	in correct	tional facilities shall be restricted as follows:
18	(1)	Except as otherwise provided in subsection (d), an
19		inmate shall not be placed in solitary confinement
20		unless there is reasonable cause to believe that the
21		inmate would create a substantial risk of immediate



Page 5

1		serious harm to the inmate's self or another, as
2		evidenced by recent threats or conduct, and that a
3		less restrictive intervention would be insufficient to
4		reduce this risk; provided that the correctional
5		facility shall bear the burden of establishing the
6		foregoing by clear and convincing evidence;
7	(2)	Except as otherwise provided in subsection (d), an
8		inmate shall not be placed in solitary confinement for
9		non-disciplinary reasons;
10	(3)	Except as otherwise provided in subsection (d), an
11		inmate shall not be placed in solitary confinement
12		before receiving a personal and comprehensive medical
13		and mental health examination conducted by a
14		clinician;
15	(4)	Except as otherwise provided in subsection (d), an
16		inmate shall only be held in solitary confinement
17		pursuant to initial procedures and reviews that
18		provide timely, fair, and meaningful opportunities for
19		the inmate to contest the confinement. These
20		procedures and reviews shall include the right to:



1		(A) An initial hearing held within seventy-two hours
2		of placement in solitary confinement and a review
3		every fifteen days thereafter, in the absence of
4		exceptional circumstances, unavoidable delays, or
5		reasonable postponements;
6		(B) Appear at the hearing;
7		(C) Be represented at the hearing;
8		(D) An independent hearing officer; and
9		(E) Receive a written statement of reasons for the
10		decision made at the hearing;
11	(5)	Except as otherwise provided in subsection (d), the
12		final decision to place an inmate in solitary
13		confinement shall be made by the warden or the
14		warden's designee;
15	(6)	Except as otherwise provided in this subsection or in
16		subsection (d), an inmate shall not be placed or held
17		in solitary confinement if the warden or the warden's
18		designee determines that the inmate no longer meets
19		the criteria for the confinement;
20	(7)	A clinician shall evaluate on a daily basis each
21		inmate who has been placed in solitary confinement, in



H.B. NO. **[280**

1		a confidential setting outside of the inmate's cell
2		whenever possible, to determine whether the inmate is
3		a member of a vulnerable population. Except as
4		otherwise provided in subsection (d), an inmate
5		determined to be a member of a vulnerable population
6		shall be immediately removed from solitary confinement
7		and moved to an appropriate placement elsewhere;
8	(8)	A disciplinary sanction of solitary confinement
9		imposed on an inmate who is subsequently removed from
10		solitary confinement pursuant to this subsection shall
11		be deemed completed;
12	(9)	Except as otherwise provided in subsection (d), during
13		a facility-wide lockdown, an inmate shall not be
14		placed in solitary confinement for more than fifteen
15		consecutive days, or for more than twenty days total
16		during any sixty-day period;
17	(10)	Cells or other holding or living space used for
18		solitary confinement shall be properly ventilated,
19		lit, temperature-controlled, clean, and equipped with
20		properly functioning sanitary fixtures;



Page 8

1	(11)	A correctional facility shall maximize the amount of
2		time spent outside of the cell by an inmate held in
3		solitary confinement by providing the inmate with
4		access to recreation, education, clinically
5		appropriate treatment therapies, skill-building
6		activities, and social interaction with staff and
7		other inmates, as appropriate;
8	(12)	An inmate held in solitary confinement shall not be
9		denied access to food, water, or any other necessity;
10	(13)	An inmate held in solitary confinement shall not be
11		denied access to appropriate medical care, including
12		emergency medical care; and
13	(14)	An inmate shall not be released directly from solitary
14		confinement to the community during the final one
15		hundred eighty days of the inmate's term of
16		incarceration, unless necessary for the safety of the
17		inmate, staff, other inmates, or the public.
18	(b)	Except as otherwise provided in subsection (d), an
19	inmate wh	o is a member of a vulnerable population shall not be
20	placed in	solitary confinement; provided that:



1	(1)	<u>An i</u>	nmate who is a member of a vulnerable population
2		beca	use the inmate is twenty-one years of age or
3		youn	ger, has a disability based on mental illness, or
4		has	a developmental disability:
5		(A)	Shall not be subject to discipline for refusing
6			treatment or medication, or for engaging in
7			self-harm or related conduct or threatening to do
8			so; and
9		<u>(B)</u>	Shall be screened by a correctional facility
10			clinician or the appropriate screening service
11			pursuant to the Hawaii administrative rules and,
12			if found to meet the criteria for civil
13			commitment, shall be placed in a specialized unit
14			designated by the director or deputy director of
15			the department, or civilly committed to the least
16			restrictive appropriate short-term care or
17			psychiatric facility designated by the department
18			of health; but only if the inmate would otherwise
19			have been placed in solitary confinement; and
20	(2)	<u>An i</u>	nmate who is a member of a vulnerable population
21		beca	use the inmate is sixty years of age or older; has



1		a serious medical condition that cannot be effectively
2		treated while the inmate is in solitary confinement;
3		or is pregnant, in the postpartum period, or recently
4		suffered a miscarriage or terminated a pregnancy,
5		shall alternately be placed in an appropriate medical
6		or other unit designated by the director, but only if
7		the inmate would otherwise have been placed in
8		solitary confinement.
9	(c)	An inmate shall not be placed in solitary confinement
10	or in any	other cell or other holding or living space, in any
11	facility,	whether alone or with one or more other inmates, if
12	there is	reasonable cause to believe that there exists a risk of
13	harm or h	arassment, intimidation, extortion, or other physical
14	or emotio	nal abuse to the inmate or to another inmate in that
15	placement	<u>-</u>
16	(d)	The use of solitary confinement in correctional
17	facilitie	s shall be permitted only under the following limited
18	circumsta	nces:
19	(1)	The warden or the warden's designee determines that a
20		facility-wide lockdown is necessary to ensure the
21		safety of inmates in the facility, until the facility



H.B. NO. /280

1		administrator determines that the threat to inmate			
2		safety no longer exists. The warden or the warden's			
3		designee shall document the specific reasons that any			
4		facility-wide lockdown was necessary for more than			
5		twenty-four hours, and the specific reasons that less			
6		restrictive interventions were insufficient to			
7		accomplish the facility's safety goals. Within six			
8		hours of a decision to extend a facility-wide lockdown			
9		beyond twenty-four hours, the director or deputy			
10		director of the department shall publish the foregoing			
11		reasons on the department's website and shall provide			
12		meaningful notice to the legislature of the reasons			
13		for the lockdown;			
14	(2)	The warden or the warden's designee determines that an			
15		inmate should be placed in emergency confinement;			
16		provided that:			
17		(A) An inmate shall not be held in emergency			
18		confinement for more than twenty-four hours; and			
19		(B) An inmate placed in emergency confinement shall			
20		receive an initial medical and mental health			
21		evaluation within six hours and a personal and			



1		comprehensive medical and mental health
2		examination conducted by a clinician within
3		twenty-four hours. Reports of these evaluations
4		shall be immediately provided to the warden or
5		the warden's designee;
6	(3)	A physician, based upon the physician's personal
7		examination of an inmate, determines that the inmate
8		should be placed or held in medical isolation;
9		provided that any decision to place or hold an inmate
10		in medical isolation due to a mental health emergency
11		shall be made by a clinician and based upon the
12		clinician's personal examination of the inmate. In
13		any case of medical isolation occurring under this
14		paragraph, a clinical review shall be conducted at
15		least every six hours and as clinically indicated. An
16		inmate in medical isolation pursuant to this paragraph
17		shall be placed in a mental health unit designated by
18		the director or deputy director of the department;
19	(4)	The warden or the warden's designee determines that an
20		inmate should be placed in protective custody;
21		provided that:



1	(A)	An inmate may be placed in voluntary protective
2		custody only when the inmate has provided
3		voluntary, informed, and written consent and
4		there is reasonable cause to believe that
5		confinement is necessary to prevent reasonably
6		foreseeable harm. When an inmate makes a
7		voluntary, informed, and written request to be
8		placed in protective custody and the request is
9		denied, the correctional facility shall bear the
10		burden of establishing a basis for denying the
11		request;
12	<u>(B)</u>	An inmate may be placed in involuntary protective
13		custody only when the correctional facility is
14		able to establish by clear and convincing
15		evidence that confinement is necessary to prevent
16		reasonably foreseeable harm and that a less
17		restrictive intervention would be insufficient to
18		prevent the harm;
19	(C)	An inmate placed in protective custody shall be
20		provided opportunities for activities, movement,
21		and social interaction, in a manner consistent



1		with ensuring the inmate's safety and the safety
2		of other persons, that are comparable to the
3		opportunities provided to inmates in the
4		facility's general population;
5	(D)	An inmate subject to removal from protective
6		custody shall be provided with a timely, fair,
7		and meaningful opportunity to contest the
8		<pre>removal;</pre>
9	(E)	An inmate who is currently or may be placed in
10		voluntary protective custody may opt out of that
11		status by providing voluntary, informed, and
12		written refusal of that status; and
13	<u>(F)</u>	Before placing an inmate in protective custody,
14		the warden or the warden's designee shall use a
15		less restrictive intervention, including transfer
16		to the general population of another facility or
17		to a special-purpose housing unit for inmates who
18		face similar threats, unless the inmate poses an
19		extraordinary security risk so great that
20		transferring the inmate would be insufficient to
21		ensure the inmate's safety; and



1	(5)	The	The warden or the warden's designee determines that an			
2		inma	inmate should be placed in solitary confinement			
3		pend	ing investigation of an alleged disciplinary			
4		offe	offense; provided that:			
5		(A)	The inmate's placement in solitary confinement is			
6			pursuant to approval granted by the warden or the			
7			warden's designee in an emergency situation, or			
8			is because the inmate's presence in the			
9			facility's general population while the			
10			investigation is ongoing poses a danger to the			
11			inmate, staff, other inmates, or the public;			
12			provided further that the determination of danger			
13			shall be based upon a consideration of the			
14			seriousness of the inmate's alleged offense,			
15			including whether the offense involved violence			
16			or escape, or posed a threat to institutional			
17			safety by encouraging other persons to engage in			
18			misconduct;			
19		<u>(B)</u>	An inmate's placement in solitary confinement			
20			pending investigation of an alleged disciplinary			
21			offense shall be reviewed within twenty-four			



1		hours by a supervisory-level employee who was not
2		involved in the initial placement decision; and
3	<u>(C</u>) An inmate who has been placed in solitary
4		confinement pending investigation of an alleged
5		disciplinary offense shall be considered for
6		release to the facility's general population if
7		the inmate demonstrates good behavior while in
8		solitary confinement. If the inmate is found
9		guilty of the disciplinary offense, the inmate's
10		good behavior shall be considered when
11		determining the appropriate penalty for the
12		offense.
13	(e) No	later than July 1, 2024, the department shall have
14	developed wr	itten policies and implemented procedures, as
15	necessary an	d appropriate, to effectuate this section,
16	including:	
17	<u>(1)</u> Es	tablishing less restrictive interventions as
18	al	ternatives to solitary confinement, including
19	se	paration from other inmates, transfer to other
20	cc	prrectional facilities, and any other sanction not
21	ir	wolving solitary confinement that is authorized by



1		the	department's policies and procedures; provided
2		that	any temporary restrictions on an inmate's
3		priv	ileges or access to resources, including religious
4		serv	ices, mail and telephone privileges, visitation by
5		cont	acts, and outdoor or recreation access, shall be
6		impo	sed only when necessary to ensure the safety of
7		the	inmate or other persons, and shall not restrict
8		the	inmate's access to food, basic necessities, or
9		lega	l assistance;
10	(2)	Requ	iring periodic training of disciplinary staff and
11		all	other staff who interact with inmates held in
12		soli	tary confinement; provided that the training:
13		<u>(A)</u>	Is developed and conducted with assistance from
14			appropriately trained and qualified
15			professionals;
16		<u>(B)</u>	Clearly communicates the applicable standards for
17			solitary confinement, including the standards set
18			forth in this section; and
19		<u>(C)</u>	Provides information on the identification of
20			developmental disabilities; symptoms of mental



1			illness, including trauma disorders; and methods
2			for responding safely to persons in distress;
3	(3)	Requi	iring documentation of all decisions, procedures,
4		and	reviews of inmates placed in solitary confinement;
5	(4)	Requi	iring monitoring of compliance with all rules
6		gove:	rning cells, units, and other spaces used for
7		soli	tary confinement;
8	(5)	Requ	iring the posting of quarterly reports on the
9		depa:	rtment's official website that:
10		(A)	Describe the nature and extent of each
11			correctional facility's use of solitary
12			confinement and include data on the age, sex,
13			gender identity, ethnicity, incidence of mental
14			illness, and type of confinement status for
15			inmates placed in solitary confinement;
16		<u>(B)</u>	Include the inmate population as of the last day
17			of each quarter and a non-duplicative, cumulative
18			count of the number of inmates placed in solitary
19			confinement during the fiscal year;
20		(C)	Include the incidence of emergency confinement,
21			self-harm, suicide, and assault in any solitary



H.B. NO. **/280**

1			confinement unit, as well as explanations for
2			each instance of facility-wide lockdown; and
3		(D)	Exclude personally identifiable information
4			regarding any inmate; and
5	(6)	Upda	ting the department's corrections administration
6		poli	cy and procedures manual, as necessary and
7		appr	opriate, to comply with the provisions of this
8		sect	ion, including the requirement to use appropriate
9		alte	rnatives to solitary confinement for inmates who
10		are	members of a vulnerable population.
11	(f)	As u	sed in this section:
12	"Cor	recti	onal facility" means a state prison, other penal
13	instituti	on, c	r an institution or facility designated by the
14	departmen	t as	a place of confinement under this chapter. The
15	term incl	udes	community correctional centers, high-security
16	correctio	nal f	acilities, temporary correctional facilities, in-
17	state cor	recti	onal facilities, state-contracted correctional
18	facilitie	s ope	rated by private entities, and jails maintained by
19	county po	lice	departments.
20	<u>"Mem</u>	ber c	f a vulnerable population" means any inmate who:
21	(1)	Is t	wenty-one years of age or younger;



Page 21

H.B. NO. 1280

1	(2)	Is sixty years of age or older;
2	(3)	Has a physical or mental disability, a history of
3		psychiatric hospitalization, or recently exhibited
4		conduct, including serious self-mutilation, that
5		indicates the need for further observation or
6		evaluation to determine the presence of mental
7		illness;
8	(4)	Has a developmental disability, as defined in section
9		<u>333F-1;</u>
10	(5)	Has a serious medical condition that cannot be
11		effectively treated while the inmate is in solitary
12		confinement;
13	(6)	Is pregnant, in the postpartum period, or recently
14		suffered a miscarriage or terminated a pregnancy;
15	(7)	Has a significant auditory or visual impairment; or
16	(8)	Is perceived to be lesbian, gay, bisexual,
17		transgender, or intersex.
18	<u>"Sol</u>	itary confinement" occurs when all of the following
19	condition	s are present:



1	(1)	An inmate is confined in a correctional facility
2		pursuant to disciplinary, administrative, protective,
3		investigative, medical, or other purposes;
4	(2)	The confinement occurs in a cell or similarly
5		physically restrictive holding or living space,
6		whether alone or with one or more other inmates, for
7		twenty hours or more per day; and
8	(3)	The inmate's activities, movements, and social
9		interactions are severely restricted."
10	SECT	ION 3. No later than April 1, 2024, the department of
11	correctio	ns and rehabilitation shall:
12	(1)	Develop written policies and implement procedures, as
13		necessary and appropriate, for the review of inmates
14		placed in solitary confinement;
15	(2)	Initiate a review of each inmate placed in solitary
16		confinement during the immediately preceding fiscal
17		year to determine whether the placement would be
18		appropriate in light of the requirements of section
19		353- , Hawaii Revised Statutes; and
20	(3)	Develop a plan for providing step-down and
21		transitional units, programs, and staffing patterns to



Page 22

accommodate inmates currently placed in solitary 1 confinement, inmates who may prospectively be placed 2 in solitary confinement, and inmates who receive an 3 intermediate sanction in lieu of being placed in 4 solitary confinement; provided that staffing patterns 5 for correctional and program staff are set at levels 6 necessary to ensure the safety of staff and inmates 7 pursuant to the requirements of this Act. 8

9 SECTION 4. No later than forty days prior to the convening 10 of the regular session of 2025, the department of corrections 11 and rehabilitation shall submit to the legislature a status 12 report of the department's progress toward full compliance with 13 this Act, along with draft copies of written policies and 14 procedures undertaken pursuant to this Act.

15 SECTION 5. New statutory material is underscored.
16 SECTION 6. This Act shall take effect upon its approval;
17 provided that section 2 shall take effect on July 12024. INTRODUCED BY:



Report Title:

Department of Corrections and Rehabilitation; Correctional Facilities; Inmates; Solitary Confinement; Restrictions; Vulnerable Populations; Report

Description:

Restricts the use of solitary confinement in state-operated and state-contracted correctional facilities, with certain specified exceptions. Requires the Department of Corrections and Rehabilitation to use appropriate alternatives to solitary confinement for inmates who are members of a vulnerable population. Requires the department to develop written policies and implement procedures by 7/1/2024. Defines "member of a vulnerable population." Requires a report to the Legislature.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

