JAN 1 9 2023

#### A BILL FOR AN ACT

RELATING TO CORRECTIONS.

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

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

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

- 1 as anxiety, depression, and hallucinations. Unfortunately,
- 2 these detrimental effects do not disappear once an inmate is
- 3 released from solitary confinement. Even after release back
- 4 into a community setting, a former inmate faces an elevated risk
- 5 of suicide, drug overdose, heart attack, and stroke.
- 6 The legislature recognizes that in 2019, twenty-eight
- 7 states introduced legislation to ban or restrict the use of
- 8 solitary confinement. Further, twelve states have passed reform
- 9 legislation: Arkansas, Connecticut, Georgia, Maryland,
- 10 Minnesota, Montana, Nebraska, New Jersey, New Mexico, Texas,
- 11 Washington, and Virginia. Some of these new laws, such as those
- 12 enacted by Connecticut and Washington, reflect tentative and
- 13 piecemeal approaches to change. However, most of the new laws
- 14 represent significant reforms to existing practices and thus
- 15 have the potential to facilitate more humane and effective
- 16 practices in prisons and jails.
- 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

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

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	designate	d and to read as follows:
15	" <u>§</u> 35:	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

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

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;

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	<u>(1)</u>	An inmate who is a member of a vulnerable population			
2		because the inmate is twenty-one years of age or			
3		younger, 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		(B) 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)	An inmate who is a member of a vulnerable population			
21		because 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	<u>(c)</u>	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 ha	arassment, intimidation, extortion, or other physical
14	or emotion	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	facilities	s shall be permitted only under the following limited
18	circumstar	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

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		<pre>provided that:</pre>			
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:



ı	(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		removal;
9	<u>(E)</u>	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	warden or the warden's designee determines that an
2		inma	te should be placed in solitary confinement
3		pend	ling investigation of an alleged disciplinary
4		offe	ense; 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		(B)	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>(</u>	C) 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) N	o later than July 1, 2024, the department shall have
14	developed w	ritten policies and implemented procedures, as
15	necessary a	nd appropriate, to effectuate this section,
16	including:	
17	<u>(1)</u> <u>E</u>	stablishing less restrictive interventions as
18	<u>a</u>	lternatives to solitary confinement, including
19	<u>s</u>	eparation from other inmates, transfer to other
20	<u>c</u>	orrectional facilities, and any other sanction not
21	<u>i</u>	nvolving solitary confinement that is authorized by

1		the department's policies and procedures; provided
2		that any temporary restrictions on an inmate's
3		privileges or access to resources, including religious
4		services, mail and telephone privileges, visitation by
5		contacts, and outdoor or recreation access, shall be
6		imposed 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		legal assistance;
10	(2)	Requiring periodic training of disciplinary staff and
11		all other staff who interact with inmates held in
12		solitary confinement; provided that the training:
13		(A) Is developed and conducted with assistance from
14		appropriately trained and qualified
15		professionals;
16		B) Clearly communicates the applicable standards for
17		solitary confinement, including the standards set
18		forth in this section; and
19		C) 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)	Requ	iring documentation of all decisions, procedures,
4		and	reviews of inmates placed in solitary confinement;
5	(4)	Requ	iring monitoring of compliance with all rules
6		gove	rning cells, units, and other spaces used for
7		soli	tary confinement;
8	<u>(5)</u>	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		<u>(C)</u>	Include the incidence of emergency confinement,
21			self-harm, suicide, and assault in any solitary



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, o	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	"Mem	ber o	f a vulnerable population" means any inmate who:
21	(1)	Is t	wenty-one years of age or younger;



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		333F-1;
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	corrections 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	



1	accommodate inmates currently placed in solitary
2	confinement, inmates who may prospectively be placed
3	in solitary confinement, and inmates who receive an
4	intermediate sanction in lieu of being placed in
5	solitary confinement; provided that staffing patterns
6	for correctional and program staff are set at levels
7	necessary to ensure the safety of staff and inmates
8	pursuant to the requirements of this Act.
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 1, 2024.
	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.