LAW ENFORCEMENT STANDARDS BOARD (LESB) ADMINISTRATIVE PLAN

November 2025

Victor McCraw, Administrator

PREFACE

The Hawai'i Law Enforcement Standards Board (LESB) Administrative Plan provides the foundation for building the Board's administrative and operational capacity. It explains how the LESB will organize its work, develop resources, and establish the systems needed to fulfill its responsibilities under Chapter 139, Hawai'i Revised Statutes.

This plan is issued by the Administrator as an informational and accountability document. It describes the approach that will guide the development of statewide certification and training standards, the management of data and operations, and the processes used to report progress to the Board, the Legislature, and the public.

Because the LESB is a new agency still in the process of building its structure and functions, this Administrative Plan is a living document. It will be reviewed and updated as milestones are achieved, new information becomes available, and operational priorities evolve. Each revision will reflect lessons learned and the Board's ongoing commitment to transparency, professionalism, and continuous improvement.

The Administrative Plan does not create binding policy or administrative rules. It serves as a guide to how the Board will fulfill its statutory responsibilities in a structured, coordinated, and transparent manner, with updates issued as milestones are reached.

I. EXECUTIVE SUMMARY

INTRODUCTION

The Hawai'i Law Enforcement Standards Board (LESB) was established under Act 220 (2018) and codified in HRS Chapter 139 to set and enforce statewide standards for the employment, training, and certification of law enforcement officers.

After several years without operational resources, administrative work began in October 2024 with the appointment of the first Administrator. This Administrative Plan explains how LESB will build administrative capacity to carry out its mandate. It outlines the structure, processes, and systems required to adopt rules, define training and employment standards, manage certification data statewide, and maintain open communication with agencies, policymakers, and the public.

IMPLEMENTATION OVERVIEW

Implementation follows a phased approach that links appropriations, staffing activation, and system readiness. Phases may overlap when it is efficient to do so, and evaluation activities run continuously from start to full operation. Early work focuses on establishing office functions, developing, and adopting rules, and acquiring the systems needed to manage training and certification data. Subsequent work expands to statewide standards development, agency onboarding, certification processing, investigative procedures, transparency reporting, and accreditation readiness. The pace and order of activities remain responsive to available resources and lessons learned during rollout.

Table 1-1: Implementation Phases and Primary Milestones

Phase	Date Range	Core Objectives / Deliverables	Role / Division
Phase 0 – Foundation and Administrative Preparation	July 1, 2024 – June 30, 2026	Establish office operations, complete rule drafts (XX-1 through XX-9), finalize budget and staffing proposals, and prepare procurement packages.	Administrator / Office of the Board Administrator (OBA)
Phase 1 – Initial Implementation and Recruitment	July 1, 2026 – June 30, 2027	Secure funding, initiate personnel recruitment (Administrator support, ASD core staff), implement certification and LMS systems, and begin agency outreach.	Administrative Services Division (ASD)
Phase 2 – Training and Standards Development	July 1, 2027 – June 30, 2028	Launch statewide Job Task Analysis (JTA), finalize training curricula, establish minimum employment and continuing education requirements, and conduct pilot agency reviews.	Training Standards Division (TSD)
Phase 3 – Compliance and Certification Operations	July 1, 2028 – June 30, 2029	Begin certification processing for all agencies, integrate database reporting, initiate investigative and disciplinary protocols, and prepare for IADLEST accreditation review.	Professional Standards Division (PSD)
Phase 4 – Evaluation and Accreditation Readiness	July 1, 2029 – June 30, 2030 and beyond	Conduct internal audit and mock accreditation review, refine policies, finalize agency compliance matrix (Section IX), and issue first comprehensive Board report on certification outcomes.	Administrator with all Divisions / Board Oversight

Following activation of certification operations, the Board will sustain capability through ongoing quality assurance, internal audits, and public reporting consistent with the LESB 10-Step Evaluation Framework.

GUIDING FRAMEWORKS

LESB uses nationally recognized frameworks to ensure the system is technically sound, legitimate, and continuously improving. The Hale performance-based certification framework provides the logic for defining requirements, verifying competencies, and maintaining program validity and reliability. The IADLEST accreditation standards supply external benchmarks for training, governance, documentation, and quality assurance. The 21st Century Policing framework emphasizes legitimacy, transparency, and community confidence as outcomes to be measured and advanced. The LESB 10-Step Evaluation Framework operationalizes these models into a practical cadence of data collection, analysis, reporting, and improvement actions. Together, these frameworks align planning, daily operations, and oversight so that the program remains evidence-based, credible, and responsive to Hawai'i's communities.

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Document Conventions

To ensure clarity and internal consistency, this Plan follows the conventions below.

• The Board's structure is described as five divisions:

- Office of the Board Administrator (OBA)
- Administrative Services Division (ASD)
- Training Standards Division (TSD)
- Professional Standards Division (PSD)
- Regional Engagement Division (RED)

Implementation References and Cross-Links

- Administrative Plan implementation phases are referenced as Phase 0, Phase 1, Phase 2, Phase 3, and Phase 4.
- Budget, funding, and staffing phases are referenced as Phase I and Phase II.
- Appendix A is the primary reference for staffing totals and cost figures.
- Appendix J is the reference for implementation phases, titles, and timelines.
- Section V contains the full narrative descriptions of the Hale, IADLEST, 21st Century Policing, and LESB 10-Step Evaluation frameworks.
- The Executive Summary provides a concise overview and directs readers to relevant sections and appendices for detail.
- Appendix L maintains cross-reference integrity and serves as the checklist for future revisions.

These reference points identify the intended function of each section and appendix; while their contents may be appended and updated over time, their roles within the Plan will remain consistent.

II. STATUTORY AUTHORITY AND BOARD COMPOSITION

The authority of the **Hawai'i Law Enforcement Standards Board (LESB)** and its structure are defined by Act 220 (2018) and Chapter 139, HRS.

Board Authority

Under HRS § 139-3(a)(1) through (15), the Board:

- · Sets statewide minimum employment, training, and certification standards
- Certifies qualified law-enforcement officers
- Maintains a centralized certification database
- Develops standards for recruitment, training, and professional conduct
- Collects and reports data required by law

This statutory authority defines the scope of the Board's jurisdiction and provides the legal basis for all administrative, fiscal, and regulatory functions implemented through subsequent sections of this Plan.

Board Composition

As specified in HRS §139-2(a), the Board consists of eighteen members representing state and county law enforcement agencies and the public. The membership includes eight ex officio members from state and county agencies, five law enforcement representatives, one union representative, and four public members, one from each county. As of November 2025, four positions are vacant: county law enforcement officer seats for Honolulu, Maui, and Kaua'i Counties, and the public member seat for Kaua'i County.

The statute lists:

- 1. Attorney General (or designee)
- 2. Director of Law Enforcement (or designee) formerly Public Safety
- 3. Chairperson of BLNR (or designee)
- 4. Director of Taxation (or designee)
 - 5-8. Four county chiefs of police (Honolulu, Hawaiʻi, Maui, Kauaʻi)
 - 9-12. Four county law-enforcement officers (one from each county)
- 5. One state law-enforcement officer
- 6. One SHOPO representative
 - 15-18. Four public members (one from each county)

Total = 18 members.

Table 2-1: Current LESB Membership (as of Oct 2025)

Category	Position	Status
	AG – Anne Lopez	Filled
	DLE – Mike Lambert	Filled
	BLNR/DOCARE – Jason Redulla	Filled
Ev officia (9)	Tax – Gary Suganuma	Filled
Ex officio (8)	HPD – Chief Rade Vanic (Interim)	Filled
	HCPD – Chief Reed Mahuna (Interim)	Filled
	MPD – Chief John Pelletier	Filled
	KPD – Chief Elliot Ke (Interim)	Filled
	Honolulu County Officer	Vacant
County J E (4)	Hawai'i County Officer – Sherry Bird (holdover)	Filled
County LE (4)	Maui County Officer	Vacant
	Kaua'i County Officer	Vacant
State LE (1)	Jared Redulla (holdover)	Filled
SHOPO (1)	Nicholas Schlapak	Filled
	Honolulu – Adrian Dhakhwa (Chair)	Filled
Dublic Mambara (4)	Hawaiʻi – Harry Kubojiri (holdover)	Filled
Public Members (4)	Maui – Craig Tanaka (holdover)	Filled
	Kauaʻi – Vacant	Vacant

NOTE: Membership status will be updated with each plan revision.

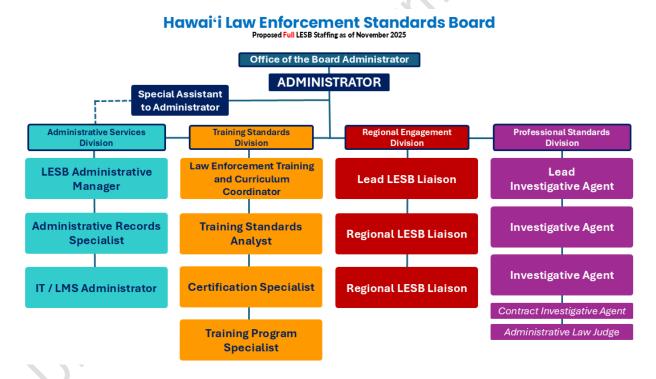
Members are appointed by the **Governor** in accordance with **HRS § 26-34**, serve **staggered three-year terms**, and may continue until successors are confirmed. The Board **elects a Chair and Vice Chair** from among its members and acts by **majority vote** of those present, provided a quorum is achieved under **HRS § 139-2(f)**.

III. ORGANIZATIONAL STRUCTURE AND STAFFING

This section summarizes the staffing structure and fiscal framework required to establish and sustain the Board's administrative and operational capacity. The Administrator is performing executive, administrative, and operational functions while implementation and budget proposals advance to establish the five-division structure necessary to fulfill HRS Chapter 139. The five-division model and associated positions are included in the FY 2027 (July 1, 2026 to June 30, 2027) supplemental and FY 2028 (July 1, 2027 to June 30, 2028) biennial budget requests and will be activated as resources are approved.

The Board's organizational structure includes four operational divisions under the Office of the Board Administrator (OBA), as illustrated in Figure 3-1.

Figure 3-1: LESB Organizational Chart



A. Office of the Board Administrator (OBA)

Provides executive leadership, policy coordination, and cross-divisional oversight. The Administrator serves as the agency head and primary liaison to the Legislature, the Attorney General, and external partners. The Office manages Board governance support, strategic planning, and inter-division coordination.

- **Current staffing:** Administrator (filled October 2024)
- Planned addition: Special Assistant to the Administrator (Funding Phase I)

B. Administrative Services Division (ASD)

Serves as the central administrative hub managing finance, procurement, contracts, human-resources coordination, records, facilities, and information-technology systems. ASD also maintains the certification and learning-management platforms that support every division.

- Planned Funding Phase I position: LESB Administrative Manager
- Planned Funding Phase II positions: Administrative Records Specialist and IT/LMS Administrator

C. Training Standards Division (TSD)

Develops, approves, and monitors all basic and continuing-education training for law-enforcement officers statewide. TSD establishes curriculum standards, reviews training academies, approves instructors, and manages training compliance.

- Planned Funding Phase I positions: Law Enforcement Training and Curriculum Coordinator and Training Standards Analyst
- Planned Funding Phase II position: Certification Specialist

TSD applies Hale methodology for standards design, assessment planning, and provider evaluation to ensure defensibility and continuous improvement.

Cross-divisional tracking of 21st Century Policing alignment supports integration of training, policy, and community engagement objectives.

D. Professional Standards Division (PSD)

Conducts independent investigations into alleged misconduct and certification violations, coordinates administrative hearings, and manages certification-action reporting to the National Decertification Index. PSD maintains operational independence to ensure objectivity and due-process compliance.

- Planned Funding Phase I positions: Lead Investigative Agent and Investigative Agent
- Planned Funding Phase II position: Second Investigative Agent

E. Regional Engagement Division (RED)

Provides statewide liaison and technical-assistance services to law-enforcement agencies. Regional Liaisons guide agencies through certification processes, collect field feedback, and promote implementation of consistent standards.

 Planned Funding Phase II positions: Lead LESB Liaison and two Regional LESB Liaisons

F. LESB Administrative Staffing Plan and Implementation Phases

When fully staffed in FY 2028 (July 1, 2027 to June 30, 2028), the Board will employ 15 positions across five divisions with a baseline operating budget of approximately \$2.5 million. First-year implementation costs are projected at about \$3.1 million due to one-time setup and training expenditures.

Table 3-1: Staffing Plan and Implementation Phases (amounts are estimated costs)

Funding Phase	Period	Positions Added	First-Year Cost	Purpose / Outcome
Current (FY 2025)	Oct 2024 – Jun 2026	Administrator (1)	-	Establish governance and foundational administration
Phase I Initial Implementation	Jul 2026 – Jun 2027	Add 6 positions: OBA (1) • ASD (1) • TSD (2) • PSD (2)	\$ 814,225	Core operational capacity enabling standards development, investigations, and administration
Phase II Full Build-Out	Jul 2027 – Jun 2028	Add 8 positions: ASD (2) • TSD (2) • RED (3) • PSD (1)	\$ 684,800 (first-year) \$ 646,300 ongoing	Complete statewide certification, technology, and outreach capability

The implementation phases in this Plan correspond directly to the funding phases described in the *LESB Division Staffing and Budget Proposal*. **Administrative Plan Phase 1** aligns with **Funding Phase I** (FY 2027, July 1 2026 – June 30 2027), and **Administrative Plan Phase 2** aligns with **Funding Phase II** (FY 2028, July 1 2027 – June 30 2028). Each funding phase supports the corresponding operational phase's staffing, procurement, and program activation milestones. Subsequent administrative plan implementation phases (Phases 3 and 4) will proceed under continuing base funding and evaluation cycles, through FY 2030 and beyond.

G. Civil-Service Exemption

All positions are proposed as **civil-service-exempt classifications**. This exemption is necessary to (1) recruit personnel with specialized certification and investigative expertise not represented in existing civil-service classes, (2) meet statutory implementation deadlines, and (3) maintain flexibility to offer competitive, market-based compensation consistent with comparable regulatory boards nationwide. Authorizing language for these exemptions is included in the 2026 "LESB Extension and Exemptions Bill."

H. Summary of Organizational Capacity

The five-division framework provides balanced coverage of every statutory responsibility under HRS § 139-3:

- **OBA** Provides executive direction, policy coordination, and continuity of governance essential to maintaining lawful and accountable Board operations.
- **ASD** Delivers the administrative, fiscal, and information-management systems required for the agency's day-to-day functionality and statutory compliance.
- **TSD** Ensures the integrity of statewide training and certification standards that underpin officer competence, public safety, and professional development.
- PSD Maintains independent investigative and adjudicative capacity necessary to uphold professional conduct standards and due-process protections.
- RED Sustains active communication and technical assistance with all
 participating agencies to guarantee uniform statewide application of Board
 requirements.

activation of certification operations.

This structure scales with available resources and provides the foundation for statewide

IV. IMPLEMENTATION PHASING

A. Overview

Implementation of LESB operations follows a phased approach that links staffing activation, system readiness, and legislative funding. This section describes how each phase builds administrative capacity and transitions the Board toward full statewide certification operations.

Phases may overlap where it improves efficiency, and evaluation and readiness activities run continuously across phases to ensure every operational component is valid, defensible, and measurable.

All phases are also mapped to IADLEST accreditation standards to support a verified pathway toward national recognition by FY 2030 (July 1, 2029 to June 30, 2030). Activities scheduled for a later phase may begin earlier when prerequisites are met and resources are available.

B. Phase 0 - Foundational Planning and Governance

Applicable Hale Tools: 1.1 – 2.2

Primary Functions: Purpose definition, stakeholder alignment, and business case development

- 1. Establish a cross-functional design team composed of state and county agency representatives, training leaders, and community stakeholders to define the certification purpose, target audience, and evidence requirements.
- 2. Develop a written business case for certification in accordance with Hale Tools 2.1–2.2, documenting statutory mandates, expected benefits, alternatives considered, and resource needs.
- **3.** Create a governance structure for program oversight consistent with IADLEST Standard 1.01 on Board authority and accountability.
- **4.** Adopt a phased budget plan and schedule for completion of the foundational Hale Tools 1–2 deliverables by June 30, 2026.
- **5.** Deliverable: Approved LESB Administrative Plan with Hale-based implementation framework and business case documentation.

C. Phase 1 - Standards Development and Job Task Analysis

Applicable Hale Tools: 3.1 – 4.3

Primary Functions: Requirements definition and standards validation

- 1. Conduct the statewide Law Enforcement Job Task Analysis (JTA) in accordance with Hale Tools 4.1 and 4.2 and the LESB JTA RFP.
- 2. Define eligibility, certification, and prerequisite requirements under Hale Tool 3.1 and Checklist 3.2.
- **3.** Translate validated job tasks into performance standards using Hale Tool 4.3 and IADLEST Standards Sections 2 and 3 on training and assessment.
- **4.** Document standards and requirements in accordance with HAR draft Chapters XX-3 and XX-4.
- **5.** Deliverable: Statewide competency and performance standards matrix linking Hale Tools 3–4 to IADLEST criteria.

D. Phase 2 - Assessment Design and Governance Readiness

Applicable Hale Tools: 5.1 – 6.4

Primary Functions: Assessment development, testing validation, and administrative controls

- 1. Develop testing and assessment protocols using Hale Tools 5.1–5.11 to define education, experience, testing, juror qualification, item analysis, and performance evaluation procedures.
- **2.** Establish governance and administrative processes consistent with Hale Tools 6.1–6.4 and IADLEST Standards Sections 4 and 5 on governance and administration.
- **3.** Adopt formal appeals and exemption procedures consistent with HAR Chapter XX-7 and Hale Tool 6.2 Checklist for Governance.
- **4.** Develop test administration manuals and electronic support systems for secure candidate registration and record management.
- **5.** Deliverable: Validated assessment system and certification governance manual ready for pilot testing by June 30, 2028.

E. Phase 3 – Program Launch and Recertification Framework

Applicable Hale Tools: 7.1 – 8.2

Primary Functions: Implementation, branding, and maintenance of competence

- Launch the initial LESB certification program for active law enforcement officers upon completion of the assessment pilot phase.
- 2. Develop recertification and maintenance policies based on Hale Tools 7.1 and 7.2, requiring officers to demonstrate continued competence through training, performance evaluation, or self-assessment cycles.
- **3.** Implement Hale Tool 8.1 Guidelines for Implementation and Checklist 8.2 to ensure program branding, communication plans, and stakeholder orientation are complete.
- **4.** Establish a communication and support platform for candidate inquiries, complaints, and data updates through the ACADIS or equivalent system.
- **5.** Deliverable: Statewide implementation of initial certification and recertification framework by July 1, 2029.

F. Phase 4 – Accreditation and Evaluation

Applicable Hale Tools: 9.1 – 10.2

Primary Functions: Accreditation, evaluation, and continuous improvement

- **1.** Complete the IADLEST self-assessment and gap analysis using the POST Accreditation Scoring Matrix.
- 2. Apply Hale Tools 10.1–10.2 to develop an evaluation strategy that measures process efficiency, stakeholder satisfaction, and program impact on key success indicators.
- **3.** Develop annual evaluation reports for Board review that include performance metrics, corrective actions, and accreditation progress.
- **4.** Upon successful IADLEST accreditation, formalize a continuous improvement cycle linking Hale Tool 10.2 Checklist for Evaluation to the Board's strategic planning process.
- **5.** Deliverable: Full IADLEST accreditation submission by FY 2030 (July 1, 2029 to June 30, 2030) and established annual evaluation cycle thereafter.

G. Fiscal Year (FY) Correlation

Table 4-1: Fiscal Year (FY) Relative Date Ranges

Fiscal year	Date range	Context within this plan	
FY 2026	July 1, 2025 to	Final preparatory year preceding operational	
F1 2020	June 30, 2026	activation (Phase 0)	
FY 2027	July 1, 2026 to	First operational year emphasizing core staffing	
F1 2027	June 30, 2027	and foundational systems	
FY 2028	July 1, 2027 to	Expansion year completing standards and	
F1 2026	June 30, 2028	statewide onboarding	
FY 2029 July 1, 2028 to		Full implementation year emphasizing certification	
F1 2029	June 30, 2029	operations and transparency	
FY 2030	July 1, 2029 to	Stabilization and evaluation period	
F1 2030	June 30, 2030		
FY 2031 and	July 1, 2030	Continuing operations and refinement	
beyond	forward	Continuing operations and refinement	

H. Summary

This phased approach enables responsible expansion, supports measurable progress, and allows overlapping activities where readiness milestones are met.

By applying Hale Tools 1 through 10 and IADLEST standards across each phase, the Board creates a transparent and defensible system that aligns Hawai'i's law enforcement standards with national best practice and measurable performance outcomes.

V. INTEGRATION OF EVIDENCE-BASED FRAMEWORKS

A. Purpose

The Board's implementation of statewide law-enforcement standards is guided by three complementary, evidence-based frameworks that define both the structure and the outcomes of LESB programs.

Together, these frameworks (Hale Performance-Based Certification, IADLEST POST Accreditation Standards, and the 21st Century Policing Framework) provide the foundation for validity, defensibility, and community trust.

Their integration is supported and measured through the LESB 10-Step Evaluation Framework, which links all program elements to quantifiable indicators, accreditation benchmarks, and continuous improvement across phases.

 Hale Performance-Based Certification Model – establishes validity, defensibility, and cost-effectiveness for all certification activities from planning through evaluation.

The Board's certification model follows Performance-Based Certification practices developed by Judith Hale. These practices link standards to observable competence, valid assessment, transparent governance, and sustained maintenance of certification. Planning and justification define the certification purpose and stakeholder requirements. Requirements and standards establish eligibility, training, and experience expectations. Assessment ensures that certification decisions are valid and consistent. Governance and ethics protect impartiality and due process. Maintenance and recertification sustain competence over time. Evaluation verifies program impact and drives improvement.

2. International Association of Directors of Law Enforcement Standards and Training (IADLEST) POST Accreditation Standards – provides national benchmarks for agency governance, testing, documentation, and continuous improvement.

The Board will align its certification and training recognition processes with national benchmarks established by the International Association of Directors of Law Enforcement Standards and Training (IADLEST). Training credit will be accepted from programs that meet recognized quality criteria, including courses and providers validated through IADLEST or equivalent review. These benchmarks will guide reciprocity decisions, minimize redundancy, and expand course availability while ensuring that Hawai'i's standards remain locally defined and Board-approved.

In addition to adopting IADLEST standards as a reference framework, the Board will develop an operational model that meets the organizational, governance, and documentation requirements necessary for formal IADLEST POST accreditation. System design, policy development, and recordkeeping practices will be structured to demonstrate compliance with accreditation criteria for program authority, transparency, assessment validity, and continuous improvement.

 21st Century Policing Framework – defines external measures of transparency, legitimacy, and community trust that will be reflected in public reporting and performance metrics.

This plan aligns operating practices with the pillars of **21st Century Policing**, introduced in the *Final Report of the President's Task Force on 21st Century Policing* (2015) and reaffirmed in the *Renewed Call to Action* (2023). It advances trust and legitimacy through clear standards and transparent reporting. The Board implements policy and oversight through rulemaking and hearing procedures. Secured data systems and public-facing summaries strengthen technology use and transparency. Training credit recognition and continuing education requirements enhance officer competence and accountability. Standards emphasizing lawful, safe, and effective practice support officer safety and wellness. Statewide onboarding and communication initiatives promote community engagement and shared responsibility.

Together, these frameworks ensure that all LESB programs and decisions are transparent, validated by data, and capable of withstanding administrative or judicial review.

Detailed implementation protocols and framework cross-references are maintained in the supporting appendices. These references will be updated as standards evolve and new data systems are deployed.

B. Integration of Hale Tools 1-2 (Planning and Program Definition)

1. Planning Team and Stakeholder Engagement.

A cross-functional design team shall be convened to represent state and county law-enforcement agencies, training institutions, and community stakeholders. This team will document:

- a. the driver behind certification;
- **b.** the problem being solved and the benefits of certification;
- c. the potential impact on agencies and officers; and
- **d.** the evidence that will demonstrate success over time (Hale Tool 1.1 A–E).

2. Target Audience and Stakeholder Definition.

The team will identify the target audience for certification and define how certification affects employment, accountability, and public confidence.

Stakeholder expectations and roles will be recorded using the Hale Tool 1.2

Checklist, ensuring clarity regarding eligibility, benefits, and evaluation criteria.

3. Program Purpose Statement.

Before implementation of any certification or training standard, the Board shall adopt a written statement of purpose that aligns with the statutory objectives of HRS Chapter 139, demonstrating a clear link between the identified problem and the certification's intended outcome.

4. Evidence Requirements.

Each certification initiative will specify the data required to verify outcomes, the frequency of review, and the responsible division for data collection. This step anchors all future assessments to quantifiable, defensible evidence consistent with Hale Tool 1.2 items A–E.

C. IADLEST Accreditation Alignment

1. Adoption of National Standards.

The Board will align its certification systems with the *IADLEST Accreditation Procedures and Standards Manual (Edition V9, 2021)*. This alignment establishes common expectations for policy governance, documentation control, instructor qualification, and assessment validity.

2. Accreditation Preparation and Timeline.

The anticipated accreditation preparation sequence is summarized below and will be updated in each Plan revision to reflect actual progress and fiscal scheduling.

- **a.** FY 2028 (July 1, 2027 to June 30, 2028) Q4 Begin internal self-assessment and gap analysis using IADLEST Standards 1–99.
- **b.** FY 2029 (July 1, 2028 to June 30, 2029) Q1–Q2 Conduct structured document review, verify evidence of compliance, and develop corrective-action plans.
- **c.** FY 2029 (July 1, 2028 to June 30, 2029) Q3–Q4 Perform a mock assessment using the IADLEST POST Accreditation Scoring Matrix.
- **d.** FY 2030 (July 1, 2029 to June 30, 2030) Q1 Submit the formal application for accreditation.

3. Documentation and Quality Assurance.

All accreditation materials shall be organized in accordance with IADLEST documentation protocols, including:

- standard operating procedures for test development and validation;
- audit trails for certification decisions; and
- record-retention and access controls consistent with Chapter XX-8 (Data Management and Transparency).

4. Performance Metrics.

Key metrics will include completion of Hale Tools 1–10 per operational phase, accreditation-readiness scores, candidate and stakeholder satisfaction data, and compliance audit results. These metrics will feed directly into the Board's annual performance report under HRS § 139-9.

D. Framework Governance and Continuous Improvement

- 1. Each division will incorporate applicable Hale and IADLEST standards into its annual work plan. The Training Standards Division shall serve as the lead for certification design and assessment validation.
- **2.** The Professional Standards Division will oversee ethical, legal, and procedural defensibility reviews.
- **3.** The Office of the Board Administrator will ensure data integrity, inter-agency coordination, and readiness for IADLEST accreditation review.
- **4.** The Board will review outcomes, findings, and recommendations for improvement annually and incorporated into subsequent plan revisions.

E. Summary

Together, these frameworks provide the structure for building and maintaining administrative capacity within the Board. Integration of Evidence-Based Frameworks (Hale Tools 1–2 Foundation) and IADLEST accreditation standards formalizes the Board's commitment to evidence-based practice. The result is a unified system that:

- defines purpose and justification before implementation;
- links all certification activities to measurable outcomes; and
- provides national-level credibility and legal defensibility through accreditation.

VI. TECHNOLOGY AND DATA SYSTEMS

The Board's technology and data systems provide the foundation for all certification, training, and transparency functions.

These systems will enable secure recordkeeping, efficient workflow management, and public accountability consistent with Chapter XX-8 (Data Management and Information Transparency).

System development will occur in phases to match available funding and operational readiness.

Early work will focus on establishing the certification database and learning-management platform required to track officer qualifications and continuing-education credits.

Later phases will expand data connections with state and county systems and introduce public-facing transparency tools that allow verification of certification status, training compliance, and agency participation.

Each technology component will meet the following core requirements:

- Secure storage and controlled access for personally identifiable information.
- Role-based user permissions for agency administrators and Board staff.
- Automated tracking of certification, training, and renewal events.
- Integration with statewide reporting and auditing functions.
- Capacity for analytics supporting performance evaluation and public reporting.

Procurement and system selection will be coordinated through the Office of the Board Administrator, with the Administrative Services Division serving as the lead for contracts, maintenance, and user support.

The Training Standards Division will manage content, course approval, and data validation within the learning-management system.

All data-governance, retention, and publication practices will follow standards established in Chapter XX-8 and relevant state cybersecurity policies.

Table 6-1: Technology and Data Systems Functions

Function	Primary Division	Description
Certification Database	ASD	Central repository for officer certification, employment, and status history.
Learning Management System	TSD	Tracks training credit, course completion, and continuing-education compliance.
Investigation and Case Tracking System	PSD	Manages certification actions, investigations, and hearing documentation.
Transparency and Reporting Portal	ОВА	Publishes aggregate data and Board reports for public access.
Data Integration and Security Infrastructure	ASD	Ensures system connectivity, cybersecurity, and compliance with statewide IT standards.

Collectively, these systems will allow the Board to manage data efficiently, evaluate performance through reliable evidence, and provide timely, accurate information to the public and the Legislature.

System design and implementation will remain flexible so that upgrades, new modules, and future integrations can be added without disrupting existing operations.

VII. EVALUATION AND CONTINUOUS IMPROVEMENT

Evaluation is the process the Board uses to measure progress, verify effectiveness, and demonstrate accountability to the Legislature and the public.

It links daily operations to measurable statewide outcomes and ensures that all programs remain valid, transparent, and aligned with professional and community expectations. Evaluation activities are continuous rather than periodic.

They begin during planning, continue through implementation, and guide ongoing improvement across all divisions.

The Board's evaluation system is built on recognized frameworks that define both technical quality and public legitimacy, including the Hale Performance-Based Certification Model, IADLEST Accreditation Standards, the 21st Century Policing Framework, and the LESB 10-Step Evaluation Framework.

A. Purpose and Scope

The evaluation system fulfills the Board's duty under HRS § 139-5 and Chapter XX-8 to maintain accountability and transparency through accurate data collection, analysis, and public reporting.

It documents how well programs meet statutory requirements and supports defensible decision-making across all certification and training functions.

B. Core Evaluation Activities

- Collect and analyze quantitative and qualitative data on training quality, certification status, and agency compliance.
- Measure program outcomes against framework indicators for validity, reliability, and public trust.
- Integrate results into annual reports and Board performance reviews.
- Identify and implement corrective actions and process improvements.

C. Evaluation Framework Integration

The Hale model defines how LESB measures validity and reliability. IADLEST standards provide external benchmarks for governance and documentation. The 21st Century Policing framework establishes outcomes related to legitimacy and community confidence.

The LESB 10-Step Evaluation Framework connects these models through a cycle of data collection, analysis, and action.

D. Reporting and Transparency

Evaluation results will be compiled in the Board's annual report and made available to the public in aggregate form through the Transparency and Reporting Portal (Section VI). Internal division reports will document progress on framework indicators and recommendations for system enhancement.

E. Continuous Improvement Cycle

Each division is responsible for reviewing its performance indicators at least annually and updating procedures accordingly.

The Administrator will consolidate division findings into a Board-level summary for discussion and adoption of improvement actions.

Findings may result in policy adjustments, training revisions, or updates to data systems and standards.

F. Cross-References and Implementation

Evaluation activities are guided by Appendix I (LESB 10-Step Evaluation Framework) and related Hale Tools 8 through 10.

Implementation procedures and reporting templates are maintained by the Office of the Board Administrator and updated with each Plan revision.

VIII. RISK MANAGEMENT AND MITIGATION

Risk management supports the Board's commitment to transparency, accountability, and responsible implementation of statewide certification standards.

It provides a structured process for identifying potential challenges, assessing their impact, and applying corrective or preventive measures.

This process works continuously with evaluation and data systems described in Sections VI and VII to ensure that the Board can anticipate, mitigate, and document risks effectively.

A. Purpose

The Board's risk-management approach integrates planning, monitoring, and reporting to protect program integrity, ensure legal compliance, and maintain continuity of operations. Risks are evaluated during each implementation phase and at every major decision point, with findings documented in the Board's internal reports and annual updates to this Plan.

B. Risk Categories and Mitigation Strategies

1. Legislative and Fiscal Risks

These include delays in appropriations, changes to statutory authority, or budget shortfalls affecting staffing and systems.

Mitigation measures include early communication with legislative committees, transparent budget reporting, and phased procurement that allows partial progress under existing resources.

2. Operational and Administrative Risks

These include hiring delays, system-implementation issues, and training or policy inconsistencies among partner agencies.

Mitigation measures include cross-training of staff, pre-award readiness planning, use of standardized operating procedures, and documented communication with state and county agencies.

3. Continuity and Data Risks

These include cybersecurity incidents, data loss, or system downtime that could disrupt certification or reporting functions.

Mitigation measures include redundant backups, secure cloud or on-premises storage, periodic cybersecurity audits, and compliance with statewide IT-security standards.

C. Governance and Oversight

The Administrator is responsible for maintaining the risk register and coordinating mitigation activities across divisions.

Each division will identify potential risks relevant to its operations and update mitigation plans quarterly.

Significant risks or emerging issues will be reported to the Board for review and direction. The Administrative Services Division will ensure that all risk documentation aligns with the state's enterprise-risk-management and information-security requirements.

Table 8-1: Risk Categories and Primary Mitigation Measures

Category	Representative Risks	Primary Mitigation Measures
Legislative and Fiscal	Delayed appropriations, unanticipated statutory changes, or limited funding flexibility	Maintain regular communication with legislative committees; provide clear, timely budget reports; sequence procurement to sustain progress under existing funds.
Operational and Administrative	Hiring delays, procedural inconsistencies, or partneragency readiness gaps	Develop and maintain standard operating procedures; implement crosstraining; hold quarterly readiness reviews.
Continuity and Data	Data loss, cybersecurity incidents, or system outages	Use redundant storage and secure backups; follow state IT-security policies; conduct annual recovery and continuity tests.

D. Continuity of Operations

The Continuity of Operations Plan (COOP) establishes how the Board will maintain essential functions during and after emergencies that significantly disrupt normal operations.

Unlike general risk mitigation, the COOP is an active readiness framework that identifies critical functions, prepares personnel and systems, and directs recovery procedures following events such as natural disasters, pandemics, or extended technology failures. The COOP will be developed by the Administrative Services Division during Phase 1 and reviewed annually.

It will include coordination protocols with the Department of the Attorney General and the State Office of Homeland Security to ensure consistency with statewide emergency operations.

Board members and staff will receive COOP training to ensure familiarity with emergency procedures and to maintain readiness for activation.

COOP Objectives

- Ensure the continuity of essential LESB functions under all conditions.
- Protect life, property, and information resources.
- Provide timely leadership succession and clear delegation of authority.
- Enable rapid decision-making and communication during emergencies.
- Preserve and recover vital records and data.
- Maintain internal and public communications through alternate methods if normal systems fail.
- Support remote work capability for extended disruptions.
- Validate readiness through annual testing and after-action reviews.

COOP Elements

- Succession planning and delegation of authority protocols.
- Essential-function identification and prioritization.
- Emergency decision-making procedures.
- Records backup and recovery systems.
- Alternative communication methods during system outages.
- Remote-work capabilities and infrastructure.
- Cross-training of staff on critical functions.
- Annual COOP testing and exercise procedures.

The COOP will be updated annually or after any major incident that reveals the need for improvement.

Revisions will be reported to the Board and summarized in the annual performance report under HRS § 139-9.

E. Integration with Evaluation and Planning

Risk management and continuity planning are linked to the evaluation and planning functions described in Sections VI and VII.

Data from risk reviews and COOP exercises will inform future revisions to policies, procedures, and technology investments.

Appendix H (Planning and Justification Framework) provides the structure for documenting risk, mitigation status, and continuity-readiness measures.

IX. AGENCY COMPLIANCE REQUIREMENTS MATRIX

Agency compliance is the process by which state and county law-enforcement agencies demonstrate adherence to LESB standards for employment, training, and certification. This section establishes the minimum reporting, documentation, and coordination requirements necessary for continued participation in the statewide certification system.

Agency compliance is verified through ongoing data collection, periodic reviews, and the reporting procedures defined in Chapter XX-8 (Data Management and Information Transparency).

Evaluation results from Section VII and risk-management updates from Section VIII are used to identify trends and ensure that each agency meets applicable standards.

Table 9-1: Agency Compliance Requirements Matrix

Compliance Category	Required Agency Submission or Action	Responsible Division
Officer Certification and Employment Data	Submit appointment, separation, and status-change forms within ten business days of action.	ASD
Training and Continuing- Education Records	Report completion of required basic, inservice, and continuing-education courses through the Learning Management System.	TSD
Policy and Governance Documentation	Provide agency policies addressing minimum employment, conduct, and reporting standards as required under HRS Chapter 139 and LESB rules.	PSD
Disciplinary and Certification Action Reports	Notify the Board within ten business days of any separation for cause, disciplinary action, or sustained finding that may affect certification status.	PSD
Data Accuracy and Audit Cooperation	Participate in periodic data-accuracy audits and respond to Board information requests.	ОВА
Agency Liaison and Communication	Designate a primary agency liaison to coordinate with LESB and maintain current contact information.	RED

Each division will maintain documentation verifying compliance and record corrective actions when deficiencies are identified.

Agency performance data and audit findings will be included in the Board's annual report and used to guide statewide technical-assistance and training initiatives.

X. LESB INITIATIVES

This section summarizes current legislative mandates and initiatives requiring action by the Hawai'i Law Enforcement Standards Board (LESB).

Each initiative arises from enacted or proposed legislation and reflects the Board's responsibility under Chapter 139, Hawaii Revised Statutes, to develop statewide standards, model policies, and certification-related training requirements.

Detailed briefs, implementation schedules, and fiscal analyses will be placed in appendices following Board approval.

A. Act 210 (2025): Model Vehicular Pursuit Policy

Act 210, Session Laws of Hawaii 2025, was enacted to reduce the risks associated with police pursuits and to create uniform statewide standards governing when and how lawenforcement officers may engage in a vehicular pursuit.

The Act amends Chapter 139 to require the Board to develop a model vehicular pursuit policy by July 1, 2026.

All law-enforcement agencies must adopt written policies consistent with the Board's model by January 1, 2027, and make those policies publicly available.

Statutory Requirements

Under Act 210 and HRS § 139-3(12), the Board must provide guidance on:

- Supervisory review and investigation of pursuits
- Use of pursuit-intervention tools and tactics, including vehicle paralleling and contact actions
- Restrictions on firing weapons at, into, or from moving vehicles
- Mandatory data collection and annual reporting to the Department of the Attorney General

LESB Responsibilities and Schedule

- Draft model policy prepared and submitted for Board review October 9 to November 6, 2025
- Public comment period and revisions January to March 2026
- Final Board adoption June 2026
- Agency implementation deadline January 1, 2027
- Attorney General rulemaking for data collection July 1, 2026 to December 31, 2026
- Statewide training and reporting standards issued January to June 2027

Implementation Activities

The Administrator, under Board direction, will coordinate the following activities:

- Finalize and distribute the model policy and associated guidance materials
- Develop standardized pursuit-reporting templates and submission procedures
- Work with the Department of the Attorney General to align agency data systems and reporting schedules
- Develop training modules for academy and in-service instruction by July 2027
- Assist agencies with policy adoption, compliance verification, and integration into training curricula
- Analyze statewide pursuit data and provide annual findings to the Board for inclusion in legislative reports

These actions fulfill Act 210's statutory requirements and advance statewide accountability and public-safety objectives.

B. Post-Pursuit Vehicle Impound Authority (Draft Legislation)

To complement Act 210's prevention and accountability framework, the Board supports draft legislation establishing vehicle-impound authority following unlawful flight from law enforcement.

The draft law was prepared by the Administrator and submitted for Board review in September 2025.

- Delayed until November 2025 due to meeting cancellations.
- May be transitioned to a primary DLE initiative

Purpose and Rationale

The proposed statute provides law-enforcement agencies with a post-incident enforcement option that discourages hazardous pursuits by allowing impoundment of vehicles used to flee police once identified and located.

It targets the instrumentality of the offense—the vehicle—thereby deterring future flight while protecting public safety.

Key Features

- Authorizes temporary impoundment of vehicles used in fleeing or eluding law enforcement
- Provides due-process protections, including notice and hearing requirements
- Allows early release to innocent or legal owners under specified conditions
- Limits storage fees to standard rates and ensures prompt post-impound hearings
- Requires annual reporting of impound activity to the Attorney General

Recommended Statutory Placement

- Primary recommendation: Amend HRS Chapter 712A (Forfeiture) by adding new § 712A-21 (Vehicle Impoundment for Fleeing or Eluding Law Enforcement)
- Alternative: Add new § 291-XX within HRS Chapter 291 (Traffic Laws)

Projected Legislative Timeline

- Draft review and approval by Board November 2025 to February 2026
- Submission to the 2026 Legislature March 2026
- Effective date if enacted July 1, 2026
- Administrative rule development and training July 2026 to June 2027
- Operational integration with pursuit-reporting systems July 2027 to June 2028

LESB Implementation Responsibilities

- Provide technical and policy assistance during legislative review
- Develop standardized reporting and recordkeeping for post-pursuit impoundments
- Coordinate with county agencies and the Attorney General to ensure consistent procedures statewide
- Include impound data in annual analysis and public reporting once authority is enacted
- This initiative demonstrates the Board's proactive approach to public-safety issues and its commitment to evidence-based policy development.

C. Future Initiatives

Additional LESB initiatives will include development of statewide data-integration standards, modernization of the certification-tracking system, and training-accreditation procedures.

Future legislative or program directives will be detailed in subsequent appendices once approved by the Board.

XI. CONCLUSION

This Administrative Plan provides a comprehensive, realistic, and evidence-based roadmap for implementing Hawai'i's law enforcement certification system.

The plan demonstrates the following:

Thorough Preparation

Extensive foundational work completed during Phase 0 (2018–2025) positions the Board for rapid transition to full operations upon funding availability.

Phased Implementation

Systematic phasing across five stages balances the urgency of statutory mandates with the operational realities of hiring, system development, and agency readiness.

Evidence-Based Approach

Integration of Hale performance-based certification methodology, 21st Century Policing principles, and IADLEST accreditation standards ensures the program meets national benchmarks for quality and legal defensibility.

Realistic Timeline

The requested extension to July 1, 2028 reflects an honest assessment of budget cycles, procurement timelines, job-task analysis duration, standards-development requirements, technology implementation, and agency onboarding needs. This timeline is achievable with appropriate resources and legislative support.

Adequate Resources

The fifteen-position organizational structure and \$ 2.5 million annual operating budget represent the minimum capacity required to execute statutory responsibilities for approximately 3,275 law enforcement officers across six agencies and four counties.

Phased staffing—six positions in FY 2027 and seven positions in FY 2028—allows progressive implementation aligned with program maturity.

Transparency and Accountability

Public reporting, stakeholder engagement, performance metrics, and IADLEST accreditation provide multiple accountability mechanisms that ensure the Board operates with integrity, responds to community expectations, and continuously improves program quality.

Legislative Dependencies

Three legislative actions are essential to enable implementation:

- **1.** Extension of the operational deadline to July 1, 2028 and exemption of LESB positions from civil service.
- 2. FY 2027 (July 1, 2026 June 30, 2027) appropriations supporting Funding Phase I staffing (\$ 814,225).
- **3.** FY 2028 (July 1, 2027 June 30, 2028) appropriations supporting Funding Phase II expansion (\$ 684,800 first-year; approximately \$ 865,000 ongoing).

Without these legislative actions, particularly the deadline extension and Phase I funding, the Board cannot most-effectively fulfill its statutory mandate.

The Administrator has prepared thoroughly, stakeholder support is established, and the roadmap is clear.

Success now depends on legislative commitment to providing the time and resources required for quality implementation.

The Law Enforcement Standards Board is prepared to establish a certification system that serves Hawai'i's law enforcement community, protects public safety, promotes professional excellence, and earns public trust through transparency and accountability.

This Administrative Plan demonstrates how that vision will become reality.

This approach is reinforced through the LESB 10-Step Evaluation Framework, which ensures continuous monitoring, analysis, and improvement across all phases of implementation.

APPENDICES

The following appendices provide supporting frameworks, references, and implementation tools that describe how the Law Enforcement Standards Board (LESB) will execute this Administrative Plan.

This plan is an Administrator-issued strategic planning and accountability document. It is informational for the Board, the Legislature, and the public, and it does not establish binding policy or require Board approval.

Appendices A through O supply reference materials, methodological frameworks, and terminology that support the planning and reporting described in the main body of the plan. The Administrator may update these appendices under the procedures in Appendix M.

APPENDIX A: Budget And Staffing Summary

This appendix provides a consolidated fiscal and staffing reference for the implementation of the Hawai'i Law Enforcement Standards Board (LESB).

It summarizes current and planned appropriations, position allocations, and legislative actions required to achieve full operational capacity by FY 2029.

Figures reflect first-year and steady-state estimates as of November 2025 and will be updated with each Plan revision.

A-1 Purpose and Overview

This appendix provides a consolidated fiscal and staffing reference for the Hawai'i Law Enforcement Standards Board (LESB).

It summarizes appropriations, staffing counts, and legislative actions that support implementation through full operating capacity.

Figures reflect current estimates as of the date shown on this Plan and will be updated with each revision.

A-2 Permanent Staffing Summary

Permanent positions authorized or requested through June 30, 2028 total fifteen, organized across five divisions as shown in Table A-1.

Table A-1: Permanent Staffing Summary by Division

Division	Positions	Titles		
OBA 2 Administrator; Special Assistant to the Administrator		Administrator; Special Assistant to the Administrator		
ASD Administrative Manager; Administrative / Records Spec LMS Administrator		Administrative Manager; Administrative / Records Specialist; IT / LMS Administrator		
TSD	4	Law Enforcement Training and Curriculum Coordinator; Training Standards Analyst; Certification Specialist; Training Program Specialist		
PSD 3 Lead Investigative Agent; Investigative Agent (2)		Lead Investigative Agent; Investigative Agent (2)		
RED	RED 3 Lead LESB Liaison; Regional LESB Liaison (2)			

Total Positions: 15

A-3 Funding Phases and Appropriations

Funding is structured in sequenced phases to align statutory deadlines, staffing activation, and technology procurement with legislative appropriations.

Each funding phase corresponds to implementation milestones described in Section IV and ensures that fiscal resources advance in step with operational readiness.

Funding Phase I (FY 2027 — July 1 2026 to June 30 2027) First-year appropriation: \$814,225

- Six priority positions:
 - Law Enforcement Training and Curriculum Coordinator
 - Lead Investigative Agent
 - Investigative Agent
 - LESB Administrative Manager
 - Training Standards Analyst
 - Special Assistant to the Administrator

Focus: establish core administrative, investigative, and training capacity; initiate certification database procurement.

Funding Phase II (FY 2028 — July 1 2027 to June 30 2028) First-year appropriation: \$864,550

- Eight positions:
 - Administrative / Records Specialist
 - IT / LMS Administrator
 - Certification Specialist
 - Lead LESB Liaison
 - o Regional LESB Liaison (2)
 - Investigative Agent
 - Training Program Specialist

Focus: complete division staffing, launch statewide training credit recognition, and expand agency onboarding through RED.

Steady-State Operations (FY 2029 and beyond)

Approximate annual operating cost: \$2,500,000

Includes salaries, operations, technology licensing, facilities, and professional services. Employee benefits are funded separately through statewide personnel programs.

A-4 Legislative Dependencies

The earlier revision you quoted was indeed meant as a concise replacement—but if your original A-4 contains additional explanatory text, we'll **retain and integrate** that language while cleaning formatting and aligning numbering with Section XI.

Use this merged version instead:

A-5 Legislative Dependencies

Implementation of the Administrative Plan depends on three legislative actions that enable full execution of the Board's statutory responsibilities:

- **1.** Extension of the operational deadline to July 1, 2028 and exemption of LESB positions from civil service.
- **2.** Appropriation for Funding Phase I (July 1, 2026 to June 30, 2027) to support initial staffing and system setup.
- **3.** Appropriation for Funding Phase II (July 1, 2027 to June 30, 2028) to complete staff expansion, training system integration, and technology procurement.

Together, these legislative actions authorize the staffing, funding, and timeline adjustments necessary for LESB operations to reach full implementation by July 1, 2028.

Dollar amounts and cost projections appear in Table A-2, which will be updated following each biennial budget cycle.

A-6 Fiscal Summary and Update Procedure

The table below consolidates staffing, first-year startup, and ongoing annual operating costs for each division.

Amounts reflect current estimates and will be updated in subsequent revisions.

Appropriations and Operating Estimates

Table A-2: LESB Staffing and Cost Summary

Fiscal Year	Funding Phase	Appropriation Type	Amount (USD)	Purpose
FY 2027	I	Supplemental Budget	\$814,225	Initial staffing (6 positions) and system procurement
FY 2028	II	Biennial Budget	\$864,550	Full staffing (8 positions) and operational expansion
FY 2029 and Beyond	Steady- State Operations	Base Operations	≈ \$2,500,000	Annual operations for 15 positions and continuing technology, facility, and program costs

Notes:

- Employee benefit costs are excluded; they are funded separately at the state level.
- "First-year" reflects initial setup and one-time purchases.
- "Ongoing" reflects steady-state annual operating costs.

This section will be updated with each new legislative or budget action.

The Administrator will maintain a working version of this appendix to reflect approved appropriations, revised estimates, and current legislative status.

Historical figures will be retained for reference but clearly labeled with fiscal year and version date.

A-7 Future Budget Planning and Legislative Support

The Administrator will coordinate with the Department of the Attorney General, the Department of Budget and Finance, and legislative committees to prepare testimony, briefings, and fiscal analyses.

Board members may assist with legislative outreach, testimony, and meetings with policymakers.

Future updates will include appropriations approved for July 1, 2028 through June 30, 2029 and subsequent biennia, revised cost estimates for technology and facilities, and alignment with statewide budget instructions.

End of Appendix A

APPENDIX B: LESB Performance Alignment

This appendix describes how the Hawai'i Law Enforcement Standards Board (LESB) implementation plan aligns with the Hale Performance-Based Certification framework. It identifies the operational tools and evaluation checkpoints used to define competencies, verify outcomes, and guide program evaluation.

Part B-1. Hale Tools Alignment

TableB-1: Alignment of Hale Performance Tools with LESB Divisions and Implementation Phases

Hale Category	Tool#	Primary LESB Division	Primary Focus of Application	Admin. Plan Phase
Planning and Justification	1.1 – 2.2	TSD / OBA	Define certification purpose, scope, target audience, and stakeholder alignment; develop business case and cost justification	Phase 0
Requirements and Standards Development	3.1 – 4.3	TSD	Define eligibility requirements and performance standards through statewide Job Task Analysis; translate validated tasks into defensible certification criteria	Phase 1
Assessment and Testing	5.1 – 5.11	TSD	Develop, pilot, and validate testing instruments, juror qualification standards, and performance evaluation checklists consistent with IADLEST testing standards	Phase 2
Governance and Administration	6.1 – 6.4	ОВА	Establish governance procedures, candidate rights, disclosure protocols, appeals, exemptions, and ethics systems; ensure administrative consistency and legal defensibility	Phase 2 – 3
Recertification and Maintenance	7.1 – 7.2	TSD / PSD	Design recertification and maintenance processes to ensure continued competence and currency of officers	Phase 3 – 4
Implementation and Branding	8.1 – 8.2	OBA / RED	Plan program launch, branding, and communication; coordinate agency outreach, technical support, and statewide orientation	Phase 3 – 4
Global Application and Reciprocity	9.1 – 9.2	ОВА	Develop reciprocity, inter-jurisdictional, and multi-state recognition protocols for future compatibility with national standards	Phase 4 – 5
Evaluation and Continuous Improvement	10.1 – 10.2	OBA / TSD	Implement evaluation strategy, collect and report performance data, and maintain continuous improvement aligned with IADLEST accreditation benchmarks	Phase 4 – 5

Part B-2. Hale Integration Notes

1. Framework Purpose

This alignment operationalizes the Hale model across LESB divisions to ensure every certification function is validated, measurable, and defensible. Each Hale tool directly corresponds to one or more IADLEST accreditation criteria, allowing the Board to demonstrate compliance with nationally recognized standards for governance, training, and quality assurance.

2. Division Responsibilities

The Training Standards Division manages certification design, job task analysis, and assessment validation. The Office of the Board Administrator ensures policy governance, documentation integrity, and data systems coordination. The Professional Standards Division oversees ethics, conduct, and recertification standards, while the Regional Engagement Division supports outreach and implementation readiness.

3. Accreditation and Evaluation

All documentation produced through Hale Tool application will form the evidence base for LESB's IADLEST self-assessment and accreditation submission. Evaluation measures established in Tools 10.1 and 10.2 will be incorporated into the Board's annual reporting cycle under HRS § 139-9.

4. Continuous Improvement

Completion of each phase activates the next set of Hale tools, ensuring continuous development from purpose definition through evaluation. This cyclical process maintains alignment with legislative intent, national standards, and evolving law enforcement best practices.

End of Appendix B

APPENDIX C: Hale-IADLEST Cross-Reference And Implementation Timeline

This appendix aligns the Hale Performance-Based Certification framework with the International Association of Directors of Law Enforcement Standards and Training (IADLEST) POST Accreditation Standards.

It demonstrates how each IADLEST accreditation domain is addressed through corresponding Hale performance tools, LESB implementation phases, and measurable outcomes.

Part C-1. IADLEST Accreditation Support Plan

Table C-1: Alignment of IADLEST Accreditation Domains with Hale Performance Tools and LESB Implementation Phases

IADLEST Accreditation Domain	Related Hale Tools	Admin. Plan Phase(s)	Primary Outcome / Evidence of Compliance
Governance and Authority (Standards 1 – 5)	1.1 – 2.2 and 6.1 – 6.4	Phase 0 – 2	Board authority documentation, governance procedures, and business case demonstrating purpose and statutory alignment
Training and Curriculum Standards (Standards 6 – 28)	3.1 – 4.3	Phase 1	Validated statewide Job Task Analysis, learning objectives, and performance standards consistent with IADLEST training benchmarks
Assessment, Testing, and Validation (Standards 29 – 54)	5.1 – 5.11	Phase 2	Documented test design, juror qualification, and performance-item validation demonstrating reliability and fairness
Administration and Records Management (Standards 55 – 72)	6.1 – 6.4 and 10.1 – 10.2	Phase 2 – 4	Administrative policies, candidate-rights statements, disclosure and appeals procedures, and evaluation protocols
Instructor and Staff Qualification (Standards 73 – 80)	5.1 – 5.11 and 6.1 – 6.4	Phase 2 – 3	Instructor-certification documentation and training-staff qualification files meeting IADLEST instructor criteria
Recertification and Continuing Education (Standards 81 – 88)	7.1 - 7.2	Phase 3 – 4	Recertification policy and maintenance-of-competence documentation showing periodic review and renewal procedures
Program Evaluation and Continuous Improvement (Standards 89 – 99)	8.1 – 10.2	Phase 3 – 5	Evaluation plan, stakeholder feedback summaries, and annual performance metrics aligned with accreditation requirements

Note: Specific applications of Hale Tools 1.1, 5.6 – 5.7, 10.1, and 10.2 are described in the LESB 10-Step Evaluation Framework (Appendix I).

Completion of the cross-referenced actions listed in Table C-1 will demonstrate full integration of Hale performance methodology within IADLEST accreditation requirements.

This alignment positions the Board to seek IADLEST POST Accreditation review during 2029–2030 and to maintain continuous improvement consistent with national benchmarks.

Part C-2. Accreditation Readiness Milestones

1. FY 2026 - FY 2027 (Phase 0 - 1)

- Complete Hale Tools 1 4 to establish purpose, justification, and validated job standards.
- Produce governance documentation required for IADLEST Standards 1 5 and 6 –
 28.
- Deliverable: Approved business case and statewide competency framework.

2. FY 2028 (Phase 2)

- Apply Hale Tools 5 6 to design and pilot assessment systems, testing protocols, and administrative controls.
- Gather evidence for IADLEST Standards 29 72 on assessment, instructor qualification, and records management.
- Deliverable: Validated assessment system and governance manual ready for pilot review.

3. FY 2029 (Phase 3)

- Implement Hale Tools 7 8 for program launch, recertification policy development, and statewide communication.
- Initiate IADLEST self-assessment and internal gap analysis (Standards 73 88).
- Deliverable: Operational certification and recertification program with initial audit data.

4. FY 2030 (Phase 4)

- Execute Hale Tools 9 10 to finalize evaluation systems and compile accreditation documentation.
- Conduct mock IADLEST assessment and submit formal application for POST accreditation.
- Deliverable: Accreditation submission package and established evaluation cycle for continuous improvement.

5. FY 2031 and Beyond (Phase 5)

- Maintain continuous improvement cycle using Hale Tool 10.2 to evaluate efficiency, stakeholder satisfaction, and program impact.
- Update documentation annually to retain IADLEST accreditation status and demonstrate ongoing compliance with national standards.
- Deliverable: Annual performance and accreditation maintenance report to the Board and Legislature.

End of Appendix C

APPENDIX D – LESB Performance Measurement And Quality Assurance Framework

This appendix describes the framework the Board uses to measure implementation progress, assess program quality, and ensure accountability through systematic performance reporting.

It integrates the Hale Performance-Based Certification framework, the 21st Century Policing framework, and the LESB 10-Step Evaluation Framework to ensure that all phases of implementation are measurable, evidence-based, and continuously improving.

Part D-1. LESB Performance Metrics

Table D-1: Performance Metrics Matrix

Performance Category	Measurement Focus	Indicator / Metric	Data Source	Responsible Division(s)	Reporting Frequency
Program Implementation	Timeliness of plan milestones	Percent of scheduled activities completed by target date	Phase tracking logs; division work plans	ОВА	Quarterly
Standards Development	Validity and completeness of statewide job standards	Number of validated tasks and competencies approved by the Board	Job Task Analysis documentation; peer review summaries	TSD	Annually
Assessment and Testing	Reliability and fairness of assessment instruments	Average item discrimination index; pass rate distribution across agencies	Assessment reports; test analysis records	TSD	Semiannual
Governance and Administration	Compliance with procedures and documentation standards	Number of internal audits with no corrective findings	Audit logs; governance review reports	ОВА	Annually
Professional Standards	Timeliness and resolution of conduct investigations	Average case processing time; corrective action completion rate	Case management system; PSD reports	PSD	Quarterly
Recertification and Maintenance	Rate of officer recertification on or before renewal date	Percentage of eligible officers renewed by deadline	Certification database; annual roster review	TSD	Annually
Training Impact	Effectiveness of training on job performance	Pre- and post-training evaluation score differentials	Course evaluations; agency feedback forms	TSD	Semiannual
Transparency and Public Engagement	Accessibility of Board information and reports	Number of public documents published and website access analytics	LESB website metrics; public inquiries log	ОВА	Quarterly
Accreditation Readiness	Progress toward IADLEST compliance	Percentage of standards documented and verified	Accreditation tracking matrix	ОВА	Semiannual
Overall Program Effectiveness	Stakeholder satisfaction and trust	Mean satisfaction rating from agency and public surveys	Stakeholder survey results	OBA / RED	Annually

Note 1: Program performance across all categories is evaluated using the weighted performance dimensions defined in the LESB 10-Step Evaluation Framework (Appendix I, Step 5).

The weighting model shown in Appendix I is illustrative and may be adjusted by Board resolution as the evaluation system is refined.

These dimensions provide the scoring basis for overall program effectiveness and are applied during data analysis and reporting in accordance with the evaluation procedures established in Appendix I (Steps 8 and 9) and verified through Hale Tools 10.1 and 10.2.

Part D-2. Quality Assurance Procedures

1. Planning and Baseline Establishment

Each new operational phase shall begin with baseline data collection for the indicators listed in Part D-1. Divisions will identify responsible personnel, data collection methods, and reporting tools before project initiation.

2. Data Collection and Verification

All quantitative and qualitative data shall be recorded in secure electronic systems approved by the Office of the Board Administrator. Each division shall verify data accuracy through cross-checks, audit samples, or automated validation tools before submission to the Administrator.

3. Performance Review and Analysis

The Administrator will coordinate quarterly and annual reviews of metrics to evaluate efficiency, compliance, and impact. Findings will be summarized in an internal performance report and incorporated into the annual legislative report under HRS § 139-9.

4. Corrective and Preventive Actions

When deficiencies or negative trends are identified, divisions shall develop corrective-action plans with defined responsibilities and completion dates. Preventive actions will be documented for recurring or systemic risks, including procedural updates or staff training.

5. Documentation and Record Retention

All performance reports, audit results, and supporting data shall be maintained for at least five years in accordance with state record-retention policies and IADLEST accreditation requirements.

6. Continuous Improvement Cycle

The performance and quality assurance process will operate as a continuous loop of planning, measurement, evaluation, and improvement. Annual Board reviews will confirm that corrective actions are completed and that results are communicated to all affected stakeholders.

7. External Validation

The Board may request independent reviews or technical assistance from IADLEST or equivalent organizations to validate the reliability and defensibility of LESB performance data and quality assurance procedures.

End of Appendix D

APPENDIX E – Program Evaluation And Risk Mitigation Framework

This appendix establishes a structured approach for evaluating LESB program outcomes and mitigating risks that may affect implementation, compliance, or accreditation. It aligns with Hale Tools 10.1 and 10.2 and IADLEST Standards 90–99, ensuring that evaluation and risk management processes are systematic, documented, and continuously improved.

Part E-1. Program Evaluation Framework

Table E-1: Program Evaluation Framework

Evaluation Category	Purpose	Evaluation Method	Data Source / Evidence	Responsible Division	Frequency
Program Performance	Measure effectiveness of LESB initiatives and projects	Comparison of outcomes against planned milestones and metrics	Division work plans, performance reports	ОВА	Quarterly
Certification Effectiveness	Determine whether certification standards improve officer competence and accountability	Pre- and post-certification performance reviews, agency surveys	TSD assessments, agency reports	TSD	Annually
Compliance and Governance	Verify adherence to laws, policies, and accreditation requirements	Internal audits and administrative reviews	Audit logs, IADLEST compliance tracker	ОВА	Semiannual
Training Quality and Impact	Evaluate the relevance and effectiveness of LESB-approved training programs	Course evaluations, instructor assessments, and participant feedback	Course evaluations, survey data	TSD	Semiannual
Ethical and Professional Standards	Monitor integrity and fairness of investigative and disciplinary processes	Case outcome reviews and external peer checks	PSD case records	PSD	Quarterly
Public Confidence	Assess transparency and public trust in LESB operations	Public perception surveys and communication analytics	LESB website data, stakeholder surveys	RED	Annually
Accreditation Readiness	Track continuous improvement toward national accreditation	Gap analysis updates and mock assessment results	Accreditation documentation, review reports	ОВА	Annually

Part E-2. Risk Mitigation Procedures

1. Risk Identification

Each division shall identify operational, financial, legal, and reputational risks that could affect program objectives. Identified risks will be categorized by likelihood and impact.

2. Risk Assessment

The Administrator will maintain a consolidated risk register summarizing the probability, severity, and responsible division for each risk. Risk levels will be reviewed quarterly and updated as needed.

3. Risk Response Planning

For each high or medium risk, divisions will establish mitigation strategies such as process controls, staff training, data validation, or procedural safeguards. Action plans will specify responsible parties and deadlines.

4. Monitoring and Reporting

Risk status will be reported to the Administrator quarterly. Emerging risks or unresolved issues will be escalated to the Board for review and policy direction.

5. Corrective and Contingency Actions

When risks materialize, immediate corrective measures will be implemented and documented. Contingency actions will ensure continuity of operations and preservation of critical records.

6. Documentation and Recordkeeping

All risk management documentation will be maintained for a minimum of five years and cross-referenced with the quality assurance records in Appendix D (LESB Performance Measurement and Quality Assurance Framework), Part D-2.

7. Annual Evaluation and Board Review

An annual evaluation report will summarize key risks, mitigation outcomes, and remaining vulnerabilities. The Board will review these findings and determine whether procedural or policy adjustments are necessary.

8. External Audit and Validation

The Board may commission an independent audit or request assistance from IADLEST or equivalent authorities to evaluate the adequacy of LESB's risk management framework and compliance with national standards.

End of Appendix E

APPENDIX F – Evaluation Summary And Continuous Improvement Plan

This appendix provides the continuous improvement framework and annual evaluation summary for LESB operations, drawing from the performance metrics and risk mitigation procedures established in Appendix D (LESB Performance Measurement and Quality Assurance Framework) and Appendix E (Program Evaluation and Risk Mitigation Framework). It provides the process by which findings are reviewed, prioritized, and incorporated into future planning, ensuring that all LESB activities remain data-driven, evidence-based, and aligned with IADLEST accreditation standards.

Part F-1. Evaluation Summary Framework

Table F-1: Evaluation Summary Framework

Evaluation Source	Purpose of Review	Key Output or Report	Responsible Division(s)	Frequency
Performance Metrics (Appendix D)	Measure program efficiency and outcomes	Quarterly performance summary and annual consolidated report	ОВА	Quarterly and Annually
Quality Assurance Reviews (Appendix D)	Verify data accuracy and procedural compliance	Division quality assurance logs and corrective action reports	ОВА	Quarterly
Evaluation Findings (Appendix E)	Assess program effectiveness and compliance	Annual evaluation report and division self-assessment	All divisions	Annually
Risk Register (Appendix E)	Monitor operational and compliance risks	Risk register updates and mitigation progress report	ОВА	Quarterly
Accreditation Readiness Reports (Appendix C)	Track progress toward IADLEST standards	Accreditation tracking matrix and readiness status update	ОВА	Semiannual
Public Feedback and Engagement Data	Measure transparency and public trust	Annual stakeholder and community feedback summary	RED	Annually
Training and Certification Results	Evaluate the impact of standards and training programs	Certification performance analysis and training evaluation summary	TSD	Semiannual
Ethics and Conduct Reviews	Maintain integrity and compliance with professional standards	PSD case review and ethical conduct summary	PSD	Quarterly

Part F-2. Continuous Improvement Procedures

1. Compilation of Findings

Each division shall compile performance and evaluation results at the end of each fiscal year and submit them to the Administrator for consolidation.

2. Cross-Division Analysis

The Administrator will coordinate an annual review session involving division leads to analyze data trends, identify cross-functional issues, and compare performance against established metrics and accreditation benchmarks.

3. Prioritization of Improvement Areas

Issues identified through evaluation and risk reviews will be prioritized based on their potential impact on certification integrity, statutory compliance, and operational effectiveness.

4. Action Plan Development

Each division will prepare a written improvement plan detailing corrective and preventive measures, responsible staff, resource needs, and target completion dates.

5. Implementation Tracking

The Office of the Board Administrator will track progress on each improvement plan using a centralized monitoring tool and provide quarterly updates to the Board.

6. Verification and Validation

Completed actions will be verified through documentation review, audits, or performance testing to confirm effectiveness. Validation results will be incorporated into the next evaluation cycle.

7. Reporting and Public Transparency

The Administrator will summarize all improvement actions and verification results in the annual report to the Legislature under HRS § 139-9. A summary of major outcomes will also be published on the Board's public website.

8. Feedback and Adaptation

Input from IADLEST assessors, agency partners, and community stakeholders will be integrated into LESB's ongoing process reviews. Continuous adaptation ensures that all programs remain responsive to evolving standards and public expectations.

9. Sustainment and Accreditation Maintenance

The continuous improvement cycle will sustain IADLEST accreditation by ensuring that corrective actions are documented, measurable outcomes are achieved, and quality processes are institutionalized across all divisions.

End of Appendix F

APPENDIX G – External Framework Integration Summary

This appendix summarizes how the Hale Performance-Based Certification Model, the IADLEST POST Accreditation Standards, and the 21st Century Policing Framework guide the Board's phased implementation.

Each framework provides complementary focus areas that together ensure validity, accountability, and public trust throughout Phases 0 through 4.

Part G-1. Framework Integration Overview

Table G-1: Framework Integration Overview

Framework	Primary Focus	Application within LESB	Corresponding Administrative Plan Sections
Hale Performance- Based Certification Model	Program validity, defensibility, and measurable outcomes	Provides the step-by-step process for defining, developing, implementing, and evaluating all certification functions; applied through Hale Tools 1–10	Section IV (Implementation Phasing); Appendices B through F
IADLEST POST Accreditation Standards (Edition V9, 2021)	Governance, documentation, assessment, and accreditation readiness	Serves as the national benchmark for policy compliance, documentation quality, and program evaluation; integrated into the Hale framework and accreditation planning	Section V (Integration of Evidence-Based Frameworks); Appendix C
21st Century Policing Framework (2015)	Public trust, legitimacy, and community accountability	Establishes guiding principles for transparency, engagement, and fairness that inform Board governance, data management, and communication strategies	Section II (Purpose and Governance); Section V (Framework Integration); Appendix H

Each framework is applied across Phases 0 to 4, with focus adjusted to match the work of each phase while remaining present throughout.

Part G-2. Integration Narrative

1. Hale Performance-Based Certification Model

The Hale model establishes the foundation for all LESB operational and certification processes. It provides validated, performance-based methods for defining requirements, developing standards, assessing competence, and ensuring defensibility. Each Hale tool corresponds to specific implementation phases and quality assurance functions documented in Appendices B through F. This structure ensures that every LESB activity, from planning through evaluation, is documented, measurable, and repeatable.

2. IADLEST POST Accreditation Standards

IADLEST accreditation serves as the external benchmark that verifies LESB's adherence to national standards for law enforcement training, certification, and governance. By aligning its policies, documentation, and evaluation methods with the IADLEST framework, the LESB ensures both national credibility and defensible certification processes. The detailed cross-reference table in Appendix C (Hale–IADLEST Cross-Reference and Implementation Timeline) demonstrates that each IADLEST domain is supported by one or more Hale tools, creating a direct pathway to accreditation readiness.

3. 21st Century Policing Framework

The principles of 21st Century Policing, building trust and legitimacy, policy and oversight, technology and transparency, community engagement, training and education, and officer wellness, guide LESB's external engagement, and policy development. These principles ensure that certification standards not only meet technical requirements but also reflect contemporary expectations of fairness, accountability, and public confidence.

4. Framework Synergy

The integration of Hale, IADLEST, and 21st Century Policing creates a continuous cycle of validation and accountability. Hale defines the process; IADLEST provides the accreditation benchmarks; and 21st Century Policing establishes the social and ethical context. Together, they form the LESB's foundation for effective, transparent, and credible law enforcement certification and oversight in Hawai'i.

5. Sustainment and Review

The Administrator will review all three frameworks annually to ensure continued relevance, identify emerging standards, and incorporate new best practices into LESB's policies and procedures. Updates will be documented in the next revision of the Administrative Plan and reported to the Board during the annual strategic planning session.

End of Appendix G

APPENDIX H – Implementation Coordination And Communication Plan

This appendix outlines how the Law Enforcement Standards Board will coordinate implementation activities, maintain interagency communication, and ensure consistent dissemination of information across state and county agencies. It defines division roles, communication procedures, and deliverables for each implementation phase, ensuring alignment with the Hale framework, IADLEST accreditation requirements, and the 21st Century Policing principles of transparency and collaboration.

Part H-1. Implementation Coordination Framework

Table H-1: Implementation Coordination Framework

Implementation Function	Lead Division	Supporting Division(s)	Key Activities	Primary Deliverables
Program Planning and Governance	ОВА	TSD	Coordinate cross-division planning, budget tracking, and phase scheduling; maintain project documentation	Updated Administrative Plan, Board-approved work plans
Standards Development and JTA Execution	TSD	N/A	Conduct statewide Job Task Analysis; coordinate validation workshops; compile competency standards	Final JTA report, statewide standards matrix
Assessment Design and Pilot Testing	TSD	ОВА	Develop test instruments, pilot protocols, and scoring guides; document assessment procedures	Assessment manual, test bank validation report
Governance and Data Systems Integration	ОВА	PSD	Integrate policy, documentation, and certification database; maintain confidentiality and records compliance	Administrative policies, ACADIS configuration plan
Recertification and Maintenance Procedures	TSD	PSD	Establish recertification timelines, continuing education requirements, and compliance verification	Recertification policy and reporting template
Public Communication and Agency Engagement	RED	ОВА	Manage outreach, training briefings, and public communications; coordinate agency technical assistance	Quarterly agency briefings, communication summaries
Ethical and Professional Conduct Oversight	PSD	ОВА	Coordinate policy enforcement, conduct investigations, and documentation for certification actions	Investigative procedures manual, case-tracking system
Accreditation and Evaluation Coordination	ОВА	All divisions	Manage IADLEST self-assessment, documentation control, and accreditation submission	Accreditation readiness package, evaluation reports

Part H-2. Communication Procedures and Schedule

1. Internal Coordination

- **a.** Each division shall submit a monthly progress summary to the Administrator identifying completed tasks, upcoming milestones, and resource needs.
- **b.** The Administrator will convene quarterly coordination meetings with all division leads to review cross-division progress and resolve schedule or resource conflicts.
- **c.** Division leads will maintain shared documentation through the LESB internal management platform for transparency and tracking.

2. Interagency Communication

- **a.** The Regional Engagement Division will serve as the primary contact for agency communication and technical assistance.
- **b.** Each county and state law enforcement agency will designate a liaison to ensure timely exchange of information, including updates on certification, training, and policy implementation.
- **c.** Regular interagency briefings will be held semiannually to review standards updates, data reporting requirements, and upcoming Board actions.

3. Public Communication and Transparency

- a. The Office of the Board Administrator will oversee publication of all official LESB communications, including meeting notices, reports, and updates to the public website.
- **b.** The Regional Engagement Division will prepare public-facing summaries of Board actions, standards revisions, and progress toward accreditation.
- **c.** The Administrator will ensure that communication materials reflect principles of accessibility, accuracy, and neutrality.

4. Crisis or Urgent Communication Protocols

- **a.** Urgent communications involving data breaches, policy disputes, or operational disruptions will be coordinated directly through the Administrator.
- **b.** A formal notification will be provided to the Board Chair and affected agency heads within 24 hours of issue identification.
- **c.** The Administrator will prepare a summary of the issue, actions taken, and next steps for inclusion in the next Board meeting agenda.

5. Annual Reporting and Feedback Integration

- **a.** At the end of each fiscal year, the Administrator will compile all division reports into a consolidated summary for inclusion in the LESB Annual Report.
- **b.** Feedback from agencies, Board members, and community stakeholders will be reviewed for potential procedural improvements.
- **c.** Revisions to communication procedures will be incorporated into the next update of this plan or the Administrative Plan as applicable.

6. Documentation and Recordkeeping

- **a.** All communication records, reports, and correspondence related to LESB implementation activities shall be maintained for at least five years.
- **b.** Documentation will be organized by implementation phase to ensure traceability during audits or accreditation reviews.

Part H-3. Implementation Timeline and Coordination Milestones

Table H-2: Implementation Timeline and Coordination Milestones

Fiscal Year	Major Coordination Activities	Primary Outcomes
FY 2026	Establish governance, finalize Hale Tools 1–2, and initiate stakeholder engagement	Approved Administrative Plan and foundational governance documents
FY 2027	Conduct statewide Job Task Analysis and develop certification standards	Validated standards and draft training requirements
FY 2028	Design and pilot assessment and testing systems; initiate database configuration	Validated assessment tools and operational ACADIS platform
FY 2029	Launch certification and recertification programs; begin IADLEST self-assessment	Initial certification program and accreditation readiness review
FY 2030	Submit full IADLEST accreditation package and finalize continuous improvement systems	Accreditation submission and implementation of evaluation cycle
FY 2031 and Beyond	Maintain accreditation, update standards, and expand statewide communication and transparency initiatives	Sustained compliance and continuous program improvement

End of Appendix H

APPENDIX I – LESB 10-Step Evaluation Framework

I-1. Purpose and Authority

This appendix implements Section VII of the Administrative Plan and establishes the official evaluation system used by the Law Enforcement Standards Board (LESB) to plan, measure, and improve certification and training programs across all divisions. The framework outlines responsibilities, data sources, review intervals, and feedback processes that ensure performance results are documented, analyzed, and acted upon in accordance with HRS Chapter 139 and Administrative Rules chapter XX-8.

I-2. Framework Alignment

This evaluation framework integrates three complementary methodologies:

- **Dr. Seung Youn (Yonnie) Chyung's 10-Step Evaluation Model** provides a systematic micro-level process embedded within macro-level considerations of feasibility, risk factors, and meta-evaluation. The model progresses through identification (Steps 1-3), planning (Steps 4-6), and implementation phases (Steps 7-10).
- Hale Performance-Based Certification Tools (Tools 8-10) address implementation planning, statewide credentialing design, and formative and summative evaluation strategies with measurable indicators aligned with IADLEST Standards 89-99.
- The 21st Century Policing Framework provides evaluation dimensions for measuring trust and legitimacy, policy and oversight effectiveness, technology and data transparency, community policing outcomes, training and education quality, and officer wellness and safety.

Together, these frameworks form the foundation for ongoing performance measurement, annual reporting, and continuous program refinement that ensures internal metrics align with national standards for professionalism and accountability.

I-3. Meta-Evaluation Components

Before applying the 10-step process, LESB conducts ongoing meta-evaluation to ensure evaluation quality and validity:

- **Feasibility Assessment:** Ongoing evaluation of resource requirements, timeline viability, and data availability
- **Risk Factor Analysis:** Identification and mitigation of threats to evaluation validity including stakeholder bias, data quality issues, and external confounding factors
- Formative Meta-Evaluation: Regular quarterly review of evaluation process quality and adjustment of methods as needed
- **Summative Meta-Evaluation:** Annual assessment of evaluation system effectiveness conducted each October as part of the Annual Performance Report

I-4. The 10-Step Evaluation Process

The following table presents the complete 10-step evaluation framework as applied to LESB operations:

Table I-1: LESB 10-Step Evaluation Model

EVAL STEP	TITLE & PURPOSE	LESB APPLICATION	KEY QUESTIONS	EVIDENCE SOURCES	LESB DIVISION
1	Identify Evaluand Define program components requiring evaluation	LESB certification system components as defined in Administrative Plan sections III-IV	What functions and programs require systematic evaluation?	HRS Chapter 139; Board resolutions; Strategic priorities	ОВА
2	Identify Stakeholders Determine information needs	Board, law enforcement agencies, officers, Legislature, public as defined in Administrative Plan section IV.E	Who needs evaluation information and for what purposes?	Stakeholder surveys; Public hearings; Agency consultations	RED / OBA
3	Identify Purpose Clarify use of findings	Compliance verification; Program improvement; Public reporting; Accountability as defined in Administrative Plan section V	What decisions and actions depend on evaluation results?	Legislative mandates; Board priorities; Public accountability requirements	OBA with Board input
4	Develop Logic Model Map program theory	Program logic model mapping inputs, activities, outputs, and outcomes as defined in Administrative Plan section II	What are the causal relationships between activities and outcomes?	Hale Tools 1.1 and 10.1; Job Task Analysis findings	TSD / OBA
5	Determine Dimensions Weight importance	Weighted performance dimensions (see note 1)	What criteria and weights define program success?	21st Century Policing; IADLEST Standards; Stakeholder input	OBA with Board input

EVAL STEP	TITLE & PURPOSE	LESB APPLICATION	KEY QUESTIONS	EVIDENCE SOURCES	LESB DIVISION
6	Determine Data Methods Select data collection approaches	Mixed methods: quantitative metrics and qualitative feedback as required by Administrative Rules chapter XX-8	What data sources and methods answer evaluation questions?	Administrative data; Stakeholder surveys; Site observations; Document reviews	ASD
7	Develop Instruments Create data collection tools	Evaluation checklists, scoring rubrics, and survey instruments based on Hale Tools 5.6-5.7	Are instruments valid, reliable, and appropriate for intended use?	Psychometric testing; Expert panel review; Pilot testing	with subject matter experts
8	Collect Data Systematic data gathering	Quarterly divisional reports and annual comprehensive audits as required by Chapter XX-8	Is data quality maintained through collection process?	LESB data management system; Quality assurance protocols	All divisions reporting to
9	Analyze with Rubrics Apply scoring criteria	Performance scoring and compliance ratings using Hale Tool 10.2 standards	Are data interpretations justified and defensible?	Inter-rater reliability tests; Documented audit trails	ASD
10	Draw Conclusions Make recommendations	Annual performance report and strategic updates as defined in Administrative Plan section V.D	What actions and improvements should follow from findings?	Board deliberations; Stakeholder input; Legislative recommendations	OBA with Board input

Note 1: Performance dimensions are weighted for reporting purposes as follows (example only):

Compliance 30 %; Quality 25 %; Efficiency 20 %; Transparency 15 %; Stakeholder Satisfaction 10 %.

These weights are applied within the 10-Step Evaluation Framework (Appendix I, Steps 8–9) and verified through Hale Tools 30–33.

I-5. Evaluation Cycle and Reporting Schedule

LESB evaluation follows a continuous annual cycle with specific reporting requirements:

- Quarterly Performance Reviews: Each division submits performance data at the end of each quarter (September 30, December 31, March 31, June 30). The Office of the Board Administrator prepares a Quarterly Performance Scorecard summarizing progress toward goals, milestones, and quality standards for Board review.
- Annual Performance Report: Published each October combining all quarterly data into a comprehensive summary for the Legislature and public. The report highlights statewide results, identifies patterns and challenges, and recommends adjustments for the next fiscal year.
- **Continuous Improvement Actions:** Findings from quarterly and annual evaluations are used to refine administrative rules, update training and certification processes, and adjust agency support priorities through the Board's plan-do-check-act cycle.

I-6. External Validation and Accreditation

Beginning in Fiscal Year 2029 (July 1, 2028), LESB will conduct periodic mock audits to measure compliance with Hale standards, 21st Century Policing principles, and Chapter XX-8 data integrity requirements. These internal audits prepare the Board for external review through the International Association of Directors of Law Enforcement Standards and Training (IADLEST) Accreditation Program.

Independent external review adds credibility to LESB operations and verifies that certification processes are fair, defensible, and aligned with best practices used by other states. Achieving accreditation represents an important benchmark showing that Hawaii's statewide certification system meets objective national standards for transparency, consistency, and professional quality.

I-7. Implementation Timeline

The 10-step evaluation framework will be piloted during Fiscal Year 2027 alongside the activation of Board data systems and reporting tools. Beginning in Fiscal Year 2028, it becomes the standard method for assessing program performance in all LESB divisions. Findings from each evaluation cycle will guide internal audits, policy adjustments, and future legislative recommendations.

I-8. Cross-References

This evaluation framework connects directly with other components of the Administrative Plan:

- Section II Program Logic Model and Theory of Change
- Section VI Technology and Data Systems
- Section VII Evaluation and Continuous Improvement
- Appendix C Hale Tool Alignment Table
- Appendix D Performance Measurement and Quality Assurance Framework
- Administrative Rules chapter XX-8 Data Management and Information Transparency

End of Appendix I

APPENDIX J – Comprehensive Implementation Milestone Index

This appendix consolidates the implementation activities, timelines, and deliverables described throughout the Administrative Plan into a single reference table. It provides a high-level view of the LESB's phased rollout from foundational planning through accreditation and continuous improvement. The index serves as both a management tool and a reporting reference for Board oversight, legislative updates, and accreditation documentation.

Part J-1. Implementation Milestone Summary

Table J-1: Implementation Milestone Summary

Fiscal Year / Phase	Primary Objectives	Key Activities	Lead Division(s)	Primary Deliverables
FY 2026 – Phase 0	Establish foundation and governance	Form design team; define certification purpose; develop business case; adopt initial Administrative Plan	OBA / TSD	Approved LESB Administrative Plan and foundational Hale Tools 1–2 documentation
FY 2027 – Phase 1	Develop statewide standards through Job Task Analysis	Conduct JTA; validate tasks and competencies; develop eligibility and certification requirements; draft initial standards	TSD / RED	Statewide competency matrix; draft training and certification standards
FY 2028 – Phase 2	Build assessment, testing, and governance systems	Design and pilot testing instruments; establish administrative and appeal procedures; integrate data management systems	TSD / OBA	Validated assessment tools; certification governance manual; ACADIS system configuration
FY 2029 – Phase 3	Launch certification and recertification programs	Implement certification and recertification policy; initiate statewide rollout; begin IADLEST self-assessment	TSD / PSD / OBA	Operational certification system; recertification policy; accreditation readiness report
FY 2030 – Phase 4	Achieve accreditation readiness and full evaluation capacity	Complete self-assessment; conduct mock IADLEST review; submit formal accreditation package; finalize evaluation system	OBA / All Divisions	Accreditation submission; continuous improvement system operational
FY 2031 and Beyond – Phase 5	Sustain accreditation and institutionalize continuous improvement	Maintain accreditation status; perform annual evaluations; publish performance and improvement reports	OBA / All Divisions	Annual accreditation maintenance report; updated Administrative Plan and evaluation summaries

Note 1: Evaluation checkpoints for each fiscal year correspond to steps in the LESB 10-Step Evaluation Framework (Appendix I). These checkpoints guide data collection, analysis, and reporting under Section VII C of this Plan and ensure that implementation progress is verified through documented evaluation evidence.

Part J-2. Monitoring and Reporting Procedures

1. Progress Tracking

Each division shall maintain a phase-specific implementation log documenting milestone completion, responsible personnel, and supporting evidence. Logs will be updated monthly and reviewed by the Administrator.

2. Quarterly Coordination Reviews

The Administrator will convene quarterly coordination meetings with division leads to review progress, verify milestone completion, and identify interdependencies that may affect schedule adherence.

3. Annual Summary and Board Reporting

At the end of each fiscal year, the Administrator will prepare a consolidated progress summary for Board review. The summary will identify completed, ongoing, and deferred milestones, along with supporting documentation and lessons learned. Evaluation findings generated under Appendix I will be summarized in the same annual report, providing a combined implementation-and-performance overview for the Board and Legislature.

4. Legislative and Public Reporting

Major milestones and deliverables will be incorporated into the annual legislative report under HRS § 139-9. Summaries will also be published on the LESB public website to promote transparency and accountability.

5. Accreditation Documentation

All milestone evidence (plans, reports, audits, training records, and evaluation data) shall be catalogued in the accreditation tracking system managed by the Office of the Board Administrator. These records form the evidentiary foundation for IADLEST assessment and verification.

6. Continuous Improvement Integration

Milestone outcomes will feed directly into the performance and evaluation processes described in Appendices D through F. Any deficiencies identified during review will trigger corrective-action planning and inclusion in the next administrative cycle. Evaluation results and corrective actions will be tracked as new milestones in the following year's Implementation Index, completing the continuous-improvement cycle.

7. Update and Revision Cycle

The Comprehensive Implementation Milestone Index will be reviewed and updated annually. Revisions shall reflect progress, schedule adjustments, or the addition of new initiatives approved by the Board. The revised index will be appended to the Administrative Plan as part of the official record of implementation.

End of Appendix J

APPENDIX K – Strategic Communication And Stakeholder Engagement Index

This appendix consolidates all internal and external communication and engagement mechanisms supporting the implementation of LESB operations. It ensures consistent coordination among divisions, agencies, and community partners and formalizes how feedback and collaboration are integrated into decision-making. The framework aligns with the principles of 21st Century Policing and the transparency and engagement requirements of IADLEST accreditation.

Part K-1. Stakeholder Communication and Engagement Matrix

Table K-1: Stakeholder Communication & Engagement Matrix

Stakeholder Group	Purpose of Engagement	Primary Communication Channel(s)	Lead Division(s)	Engagement Frequency / Schedule	Key Outputs or Deliverables
Board Members	Provide policy guidance, approve standards, and oversee implementation progress	Board meetings, executive briefings, and secure document repository	ОВА	Monthly briefings; quarterly meetings	Meeting packets, implementation status reports
State and County Law Enforcement Agencies	Coordinate certification, training, and data reporting requirements	Interagency briefings, liaison calls, and secure data portal	RED	Semiannual briefings; ongoing liaison contact	Agency guidance bulletins, compliance updates
Training Institutions and Academies	Align curricula and assessment with statewide standards	Training consortium meetings, curriculum workshops	TSD	Semiannual coordination meetings	Standardized curriculum templates, instructor guidance
Professional Standards Partners	Ensure ethics, conduct, and certification action coordination	Inter-division case coordination, secure reporting	PSD	As needed based on case volume	Case summaries, integrity review documentation
Legislative and Executive Branch Partners	Maintain statutory and fiscal alignment with state priorities	Written reports, legislative briefings, and formal correspondence	ОВА	Annual and as required by session schedule	Annual report, budget, and rulemaking updates
IADLEST and National POST Organizations	Support accreditation and exchange of best practices	Accreditation review, conference participation, and document submission	ОВА	Semiannual or as scheduled by IADLEST	Accreditation documentation, compliance feedback
Public and Community Stakeholders	Promote transparency and public understanding of LESB functions	LESB website, press releases, community presentations, public comment periods	RED	Quarterly updates and as needed	Public information statements, website updates

Stakeholder Group	Purpose of Engagement	Primary Communication Channel(s)	Lead Division(s)	Engagement Frequency / Schedule	Key Outputs or Deliverables
Academic and Research Partners	Facilitate data analysis, evaluation, and validation	Research collaboration agreements and datasharing protocols	TSD / OBA	Annual review cycle	Research reports, evaluation summaries
Media and Public Information Officers	Provide accurate, timely dissemination of Board decisions	Media releases and spokesperson briefings	RED	As needed following Board actions	Press statements, informational summaries

Part K-2. Engagement Procedures and Feedback Integration

1. Engagement Planning and Scheduling

Each division shall prepare an annual communication and engagement plan that identifies its target stakeholders, outreach schedule, and communication objectives. Plans will be reviewed by the Administrator at the beginning of each fiscal year.

2. Interagency Coordination

The Regional Engagement Division will maintain a master stakeholder list, including agency liaisons, contact information, and engagement history. The list will be updated quarterly to ensure accuracy for briefings and correspondence.

3. Communication Protocols

- **a.** All public-facing materials, including press releases and website updates, must be reviewed and approved by the Administrator prior to publication.
- **b.** Board meeting materials and policy updates will be distributed to members at least seven days before scheduled meetings unless an expedited schedule is approved by the Chair.
- **c.** Interagency correspondence will be logged and archived in the central communication system maintained by the Office of the Board Administrator.

4. Feedback Collection and Analysis

- **a.** Feedback from agencies and community stakeholders will be collected through surveys, direct correspondence, and public testimony.
- **b.** The Administrator will categorize and summarize feedback quarterly to identify trends, concerns, or policy impacts.
- **c.** Summaries will be presented to the Board during regular meetings to inform decisions and prioritize policy updates.

5. Integration with Continuous Improvement

Feedback and engagement results will be incorporated into the performance metrics and evaluation cycles described in Appendices D through F. Stakeholder input will directly influence future updates to standards, training programs, and administrative procedures.

6. Documentation and Record Retention

All communication records, feedback summaries, and engagement reports shall be maintained for at least five years. The Regional Engagement Division will ensure these records are available for accreditation review or public inquiry.

7. Transparency and Public Access

LESB will maintain a dedicated section on its website for Board actions, meeting materials, and implementation updates. The Administrator will ensure that documents are accessible, current, and compliant with state accessibility standards.

8. Review and Update

The Strategic Communication and Stakeholder Engagement Index will be reviewed annually and updated as necessary to reflect evolving communication tools, agency participation, or legislative requirements. Updates will be incorporated into the next revision of the Administrative Plan.

Feedback collected through public engagement, stakeholder consultations, and agency coordination is incorporated into the evaluation and improvement processes defined in **Appendix I (LESB 10-Step Evaluation Framework)** and the continuous-improvement procedures outlined in **Appendix F**. This ensures that stakeholder input directly informs Board decision-making, annual performance reporting, and future implementation milestones documented in **Appendix J**.

End of Appendix K

APPENDIX L – Comprehensive Reference And Cross-Link Index

This appendix provides a consolidated reference guide linking all appendices, frameworks, and operational elements of the LESB Administrative Plan. It serves as both a navigational aid and an audit crosswalk, ensuring traceability among related sections, tools, and implementation documents. The index also supports accreditation and reporting by identifying where each major standard, framework, or requirement is addressed within the plan.

Part L-1. Appendix Cross-Link Summary

Table L-1: Appendix Cross-Link Summary

Appendix	Title	Primary Purpose	Cross-Referenced Sections or Frameworks	Responsible Division(s)
Appendix A	Administrative Plan Development and Revision Record	Documents approval, revision dates, and version control of the Administrative Plan	Section I (General Provisions); Office of the Board Administrator procedures	ОВА
Appendix B	Hale Tools Alignment Table	Links Hale Tools 1–10 to LESB divisions, functions, and implementation phases	Section IV (Implementation Phasing); Section V (Integration of Evidence-Based Frameworks)	TSD / OBA
Appendix C	Hale–IADLEST Cross- Reference and Accreditation Readiness Timeline	Crosswalks Hale tools with IADLEST accreditation standards and implementation milestones	Section IV; Section V; IADLEST POST Accreditation Manual	OBA / TSD
Appendix D	Performance Measurement and Quality Assurance Framework	Defines performance metrics and quality assurance procedures	Section V; Appendices E and F	OBA / All Divisions
Appendix E	Program Evaluation and Risk Mitigation Framework	Establishes risk identification, assessment, and mitigation procedures	Section V; Appendices D and F	OBA / All Divisions
Appendix F	Evaluation Summary and Continuous Improvement Plan	Consolidates evaluation results and establishes continuous improvement procedures	Appendices D and E; HRS § 139-9 annual report	OBA / All Divisions
Appendix G	External Framework Integration Summary	Summarizes integration of Hale, IADLEST, and 21st Century Policing frameworks	Sections II and V; Appendices B through F	OBA / TSD / RED

Appendix	Title	Primary Purpose	Cross-Referenced Sections or Frameworks	Responsible Division(s)
Appendix H	Implementation Coordination and Communication Plan	Defines coordination structure, communication procedures, and agency engagement timelines	Section IV; Appendix K	OBA / RED / TSD / PSD
Appendix I	Evaluation Framework References and Supporting Documents Index	Catalogues all frameworks, reference materials, and governing documents	Appendices B through G; Section V	ОВА
Appendix J	Comprehensive Implementation Milestone Index	Consolidates all phase milestones, schedules, and deliverables into a single timeline	Section IV; Appendices B through E	OBA / All Divisions
Appendix K	Strategic Communication and Stakeholder Engagement Index	Defines internal and external communication protocols and stakeholder relationships	Section II; Appendices H and J	RED / OBA
Appendix L	Comprehensive Reference and Cross-Link Index	Provides cross-referenced navigation and audit mapping across all appendices	All sections and appendices	ОВА

Part L-2. Audit and Verification References

1. Document Control and Verification

The Office of the Board Administrator shall maintain the master record of all plan revisions, including version history, approval dates, and cross-linked references between appendices.

2. Audit Preparedness

Each division will maintain supporting documentation (reports, data logs, and communications) for its assigned appendices. These materials will be made available upon request for internal, legislative, or accreditation audits.

3. Cross-Appendix Validation

When updates are made to one appendix that affect cross-referenced content, the Administrator will verify consistency across all related appendices before the revision is finalized.

4. Annual Review Cycle

The cross-link index shall be reviewed and updated each year during the annual administrative plan review cycle to ensure continued accuracy and consistency of citations and references.

5. Reference Continuity

Superseded documents will be archived to preserve version control and historical traceability, ensuring full audit compliance for accreditation and legislative review.

End of Appendix L

APPENDIX M – Plan Revision And Maintenance Protocol

This appendix establishes the procedures for maintaining, reviewing, and updating the Law Enforcement Standards Board Administrative Plan.

It ensures that the plan remains current, accurate, and compliant with statutory requirements, accreditation standards, and best practices in administrative governance.

Plan revisions may also be initiated based on findings or recommendations produced through the evaluation procedures described in Appendix I. This connection ensures that continuous-improvement activities, assessment results, and performance feedback directly inform policy and operational updates.

M-1 Purpose

This appendix establishes the procedures for maintaining, updating, and revising the Law Enforcement Standards Board (LESB) Administrative Plan. It ensures the plan remains accurate, relevant, and aligned with the Board's statutory responsibilities and evolving operational environment.

Plan revisions may also be initiated based on findings or recommendations produced through the evaluation procedures described in Appendix I. This connection ensures that continuous-improvement activities, assessment results, and performance feedback directly inform policy and operational updates.

M-2 Responsibilities

The Administrator is responsible for coordinating all plan reviews and updates, maintaining document control, and ensuring that each approved revision reflects current Board policies, standards, and statutory requirements.

Division leads shall identify needed updates within their areas of responsibility and submit proposed changes to the Administrator.

M-3 Review Cycle

The plan shall undergo a comprehensive review at least once every two years or sooner if required by legislative action, program evaluation results, or operational changes.

Interim reviews may be conducted when major projects, structural changes, or external mandates affect plan content or implementation timelines.

M-4 Periodic and Event-Driven Updates

Revisions may result from any of the following triggers:

- Changes to federal or state law, administrative rules, or Board policies.
- Organizational restructuring or the establishment of new divisions or functions.
- Updates to statewide certification or training standards.
- Evaluation outcomes indicating a need to adjust implementation procedures, performance metrics, or Board policies.
- Findings from audits, stakeholder feedback, or after-action reviews.

M-5 Revision Process

- 1. **Initiation.** Any proposed revision shall be documented on a Plan Revision Request Form, identifying the origin, rationale, and affected section.
- 2. **Review.** The Administrator shall review each proposal for clarity, relevance, and consistency with current Board policy.
- 3. **Approval.** Substantive revisions to this plan shall be reviewed and approved by the Administrator prior to publication. The Administrator will notify the Board and stakeholders of updates.
- 4. **Implementation.** Upon approval, the Administrator shall update the master document, issue a revised version number, and distribute notice of change to all stakeholders.
- 5. **Documentation.** A summary of revisions shall be maintained in the Plan Revision Log contained in Section M-7.

M-6 Record Control

The Administrator shall maintain a single official electronic master copy of the plan. Previous versions shall be archived and retained in accordance with state records-retention requirements.

All revisions resulting from evaluation or performance findings shall cite the relevant evaluation cycle or performance report that initiated the update. This citation shall appear in the Revision Log entry and, where appropriate, in the updated section text.

M-7 Plan Revision Log

Revision Date	Summary of Changes	Origin of Revision / Trigger Reference
November 2025	Integrated evaluation-feedback provisions; aligned Appendix M with Appendix I continuous-improvement framework	Evaluation Integration Cycle 2025 (Appendix I)
October 2025	Completed Evaluation Integration (VII – K); updated cross-references to Appendices I and J	Evaluation Integration Package 2025
Earlier Revisions (2024 – 2025)	Prior structural, formatting, and content updates	Legacy draft series and annual administrative review

M-8 Cross-References

This appendix links directly with the following:

- Section VII Evaluation and Continuous Improvement
- Appendix I LESB 10-Step Evaluation Framework
- Appendix J Implementation Milestone Index
- Appendix D Performance Measurement and Quality Assurance Framework
- Appendix F Continuous Improvement and Reporting Cycle

End of Appendix M

APPENDIX Y – Reference Sources And Framework Citations

Y-1 Purpose

This appendix lists external and authoritative references that support the design, evaluation, and implementation frameworks of the Law Enforcement Standards Board (LESB) Administrative Plan.

Y-2 Statutory and Regulatory References

- Hawai'i Revised Statutes, Chapter 139 Law Enforcement Standards Board
- Hawai'i Revised Statutes, Chapter 92 Public Agency Meetings and Records
- Hawai'i Administrative Rules, Title XX (draft series 2025): Chapters XX-1 through XX-9

Y-3 Framework and Accreditation References

- Judith Hale, Performance-Based Certification (2011)
- Hale Tools Overview Guide (Tools 1.1 through 10.2)
- International Association of Directors of Law Enforcement Standards and Training (IADLEST), National Certification Program (NCP) Standards
- President's Task Force on 21st Century Policing, Final Report (2015)
- 21CP Solutions, Task Force on 21st Century Policing: A Renewed Call to Action (2023)

Y-4 LESB Internal Frameworks and Appendices

- Appendix I LESB 10-Step Evaluation Framework
- Appendix J Implementation Milestone Index
- Appendix D Performance Measurement and Quality Assurance Framework
- Appendix F Continuous Improvement and Reporting Cycle
- Appendix M Plan Revision and Maintenance Protocol

Y-5 Supporting Research and Guidance

- U.S. Department of Justice, guidance and publications relevant to POST agency standards and data transparency (latest editions as applicable)
- National Academy of Public Administration, Building Public Trust in Policing (2022)
- Hawai'i State Comprehensive Plan, Government and Public Safety sections (current edition)
- LESB Implementation of 21st Century Policing (internal alignment paper)

Y-6 Verification Statement

All references listed in this appendix were reviewed for accuracy and relevance as of November 2025.

Future updates to this appendix shall occur concurrently with the plan maintenance activities described in Appendix M, using month and year for revision tracking.

End of Appendix Y

APPENDIX Z – Glossary Of Terms Used In Administrative Plan

This appendix defines acronyms, statutory references, and program terminology used throughout the Hawai'i Law Enforcement Standards Board (LESB) Administrative Plan.

Act 210 (2025)

Hawai'i legislation directing the Board to develop a model vehicular-pursuit policy by July 1 2026, with statewide agency adoption required by January 1 2027.

Administrator

The chief executive of the Law Enforcement Standards Board, referred to as the *Board Administrator*, responsible for implementing Board policies and managing daily operations.

Administrative Services Division (ASD)

The LESB division responsible for finance, human resources, records, and centralized IT and learning-management functions.

Board

The Hawai'i Law Enforcement Standards Board established under HRS § 139-2 to set and enforce statewide employment, training, and certification standards.

Certification

The formal recognition by the Board that an individual has met all employment, character, and training requirements and is authorized to exercise law-enforcement authority in Hawai'i.

Certification Action

Any decision by the Board affecting an individual's certification status, including denial, suspension, revocation, or reinstatement.

Continuing Education (CE)

Ongoing training required to maintain certification, as specified in Chapter XX-5 of the Board's administrative rules.

Continuous Quality Improvement (CQI)

Also referred to in this plan as the Continuous Improvement and Reporting Cycle (Appendix

F). A systematic process of measuring performance, identifying improvement opportunities, and implementing changes to strengthen Board operations.

Department of Law Enforcement (DLE)

The state agency consolidating several law-enforcement functions under the Department of Law Enforcement, with approximately 350 sworn officers.

Fiscal Year (FY)

Hawai'i's fiscal year runs from July 1 through June 30 (e.g., FY 2027 = July 1 2026 to June 30 2027).

Hale Framework

The performance-based certification model developed by Judith Hale, consisting of sequential tools covering planning, standards development, assessment, governance, maintenance, and evaluation.

Hawai'i Revised Statutes (HRS)

The codified laws of the State of Hawai'i that establish the Board's authority and operational mandates.

IADLEST

The International Association of Directors of Law Enforcement Standards and Training, the national organization supporting POST agencies.

IADLEST Accreditation

National accreditation recognizing compliance with professional standards for training, assessment, and program governance.

Job Task Analysis (JTA)

A systematic process to identify and validate the knowledge, skills, and abilities required for competent performance as a Hawai'i law-enforcement officer.

Law Enforcement Standards Board (LESB)

The state board established under HRS Chapter 139 to develop and enforce standards for law-enforcement officer training, certification, and oversight.

Learning Management System (LMS)

The technology platform used to deliver, track, and manage law-enforcement training and continuing-education activities.

Office of the Board Administrator (OBA)

The executive office providing management, policy coordination, and administrative support to the Board and its divisions.

Peace Officer

A person certified and employed in a law-enforcement capacity in Hawai'i, as defined in HRS § 139-1.

Performance-Based Certification

A certification approach linking assessment and credentialing directly to validated jobperformance requirements.

Professional Standards Division (PSD)

The LESB division responsible for independent investigations, case management, and certification actions related to professional conduct.

Regional Engagement Division (RED)

The LESB division serving as liaison to county and state agencies, providing outreach, technical assistance, and compliance support.

Training Standards Division (TSD)

The LESB division managing curriculum development, instructor standards, certification administration, and continuing-education tracking.

Vehicular Pursuit Policy

The statewide model policy required under Act 210 that establishes minimum standards for law-enforcement vehicle pursuits.

Waiver

A temporary exemption from a certification or training requirement granted by the Board under special circumstances.

End of Appendix Z – Glossary of Terms

Publication Notice

This document constitutes the Hawai'i Law Enforcement Standards Board Administrative Plan, issued by the Administrator in November 2025.

It serves as a strategic planning and accountability document that describes the Administrator's approach to implementing the Board's statutory responsibilities under Chapter 139, Hawai'i Revised Statutes.

All sections and appendices have been verified for consistency, accuracy, and alignment with applicable statutes and administrative rules in accordance with the procedures described in Appendix M.

This Administrative Plan will remain available for reference and public transparency until updated or superseded by the Administrator through the revision process described in Appendix M.