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Chapter 22: Another Step Toward Curing Constitutional Deficiencies in California's Prisons

Kirk Wilbur

Code Sections Affected

AB 552 (Solorio); 2010 STAT. Ch. 22 (Effective June 3, 2010).

I. INTRODUCTION

California prisons are severely overcrowded and operate “at almost double their intended capacity.” Some facilities even house three times their intended population. The California Department of Corrections and Rehabilitation (CDCR) has used temporary beds—beds placed in hallways, classrooms, gyms, and other open spaces—to meet the demands of this immense prison population. This dense housing of inmates hastens the spread of infectious illnesses, and renders inmate-on-inmate violence inevitable.

Overcrowding has significant effects on prisoners’ medical care. In 2005, the District Court for the Northern District of California found that, on average, one inmate died every six to seven days because of constitutional deficiencies in the medical care delivery system. In Coleman v. Wilson, the court found that CDCR’s lack of adequate screening mechanisms for mentally ill inmates and delays in transferring inmates to mental health facilities constituted Eighth Amendment violations.

Chapter 22 addresses the health care problems created by California’s overcrowded prisons by making substantive and technical changes to the law, permitting construction of 1,722 health care beds at a prison facility in Stockton.

2. Id. at *40.
3. Id.; SENATE COMMITTEE ON PUBLIC SAFETY, COMMITTEE ANALYSIS OF AB 552, at C (Mar. 23, 2010).
6. Id. at *25.
8. ASSEMBLY FLOOR, COMMITTEE ANALYSIS OF AB 552, at 3 (May 21, 2010).
II. LEGAL BACKGROUND

Chapter 22 modifies the Public Safety and Offender Rehabilitation Services Act of 2007. That Act was largely a response to years of litigation relating to prisoners’ physical, mental, and dental health treatment, and non-compliance with the Americans with Disability Act (ADA) in California prisons.

A. Plata v. Schwarzenegger and Related Litigation

On April 5, 2001, Marciano Plata and other California prisoners filed a class action lawsuit against then-Governor Gray Davis in federal court, alleging substandard healthcare in the California prison system. Judge Thelton Henderson found that medical treatment at CDCR facilities violated the Eighth Amendment by seriously threatening inmates with harm or death. Among other constitutional inadequacies, the court found a lack of medical leadership at nearly all CDCR facilities. The court also noted a lack of qualified medical staff, with an 80% vacancy rate in high-level management positions and 20% to 50% of physicians providing poor, or even grossly negligent, medical treatment to prisoners. As a result of these and other constitutional violations, as well as the State’s failure to comply with court orders to remedy constitutional inadequacies, Judge Henderson placed CDCR’s health care system under federal receivership.

In addition to overseeing efforts to remedy the health care violations in Plata, the Receiver must also oversee remedial efforts related to three other cases: Coleman v. Wilson, Perez v. Tilton, and Armstrong v. Schwarzenegger. In

10. ASSEMBLY FLOOR, COMMITTEE ANALYSIS OF AB 900, at 6-7 (Apr. 26, 2007).
12. Id. at *10. "Constitutionally adequate medical services" are defined as services "at a level reasonably commensurate with modern medical science and of a quality acceptable within prudent professional standards." Id. at *21 n.2 (quoting Smith v. Jenkins, 919 F.2d 90, 93 (8th Cir. 1990)).
13. Id. at *10.
14. Id. at *14-15. Additionally, death reviews of 193 inmate deaths by a court-appointed expert determined that of those 193 deaths, thirty-four were serious and likely preventable. Id. at *20-21.
15. Also among the fifteen violations noted by the court were lack of nurses, lack of medical supervision, inadequacies in determining inmate health problems at intake, disorganized or missing medical records, and clinics failing to meet sanitation standards and lacking sufficient equipment. Id. at *27-30, 35-42.
16. Id. at *6; An Update on the California Prison Crisis and Other Developments in State Corrections Policy, 14 BERKELEY J. CRIM. L. 143, 150 (2009) [hereinafter Update on the California Prison Crisis].
17. Plata, 2005 U.S. Dist LEXIS 43796, at *2. A receiver is one who, on behalf of the court, collects, administers, or disposes of the property of another pursuant to a court order. Id. at *61. Judge Henderson originally appointed Robert Sillen to the post of Receiver in February 2006; in January 2008, Henderson fired Sillen and appointed J. Clark Kelso to the position. Update on the California Prison Crisis, supra note 16, at 150.
18. See J. Clark Kelso, Prison Health Care is a Tough Bill to Swallow: Decades of Neglect Make Obeying a Federal Court Mandate Painfully Expensive, SACRAMENTO BEE, Apr. 6, 2008, at E1 (explaining that
Coleman v. Wilson, the court found that CDCR lacked (and has lacked since 1987) adequate means of screening prisoners for mental illness at intake. In Perez v. Tilton, Carlos Perez and other prisoners sued the Secretary of CDCR, alleging that dental care in California prisons was constitutionally deficient. In Armstrong v. Davis, the court found widespread discrimination against disabled prisoners in violation of the ADA and the Rehabilitation Act of 1973. The Armstrong court held that CDCR violated the ADA when it failed to make restrooms and showers in county jails handicap-accessible and did not provide mobility-impaired inmates with canes or wheelchairs.

In January 2007, the judges in Plata, Coleman, and Perez issued an order requiring the federal receiver in Plata, the special master in Coleman, and a court appointed representative in Perez to hold monthly meetings to coordinate their remedial efforts to complement one another, with the intent of reducing duplication and excessive use of taxpayer money. The Armstrong court later joined these coordinating efforts. These individuals continue to meet regularly in an effort to implement remedial efforts for medical, dental, and mental health care issues, as well as ADA compliance.

B. The Public Safety and Offender Rehabilitation Services Act of 2007

Facing the threat of federal orders to cap inmate population in Plata, Coleman, and Armstrong, in 2007, the California Legislature passed the Public Safety and Offender Rehabilitation Services Act (the "Rehabilitation Services Act"). The Rehabilitation Services Act authorized lease-revenue bond financing to construct new inmate beds, broken down into two phases. Phase I authorized
funding for additional inmate beds in state prisons and county jails and instituted a series of anti-recidivism and rehabilitation measures.\textsuperscript{28} Phase II authorized additional inmate beds, but conditioned funding for these beds on compliance with the anti-recidivism measures of Phase I.\textsuperscript{29}

1. Phase I

Phase I of the Rehabilitation Services Act authorized $3.6 billion in lease-revenue bond financing for 24,000 new beds in state prisons.\textsuperscript{30} Among these were 12,000 infill beds (intended to replace temporary beds),\textsuperscript{31} 6,000 re-entry facility beds (intended for inmates housed at small, secure facilities who have less than one year left to serve),\textsuperscript{32} and 6,000 beds for medical, dental, and mental health care treatment.\textsuperscript{33} Phase I additionally authorized $750 million for the creation of 8,000 county jail beds.\textsuperscript{34}

Phase I also established a number of anti-recidivism and rehabilitation initiatives in an effort to reduce the problem of prison overcrowding.\textsuperscript{35} These initiatives increased the availability of substance abuse treatment, work and educational programs, and mental health care,\textsuperscript{36} sought to address staffing deficiencies,\textsuperscript{37} and created the California Rehabilitation Oversight Board.\textsuperscript{38}

\begin{itemize}
  \item \textsuperscript{28} Id. at 1-2.
  \item \textsuperscript{29} Id. at 3-4.
  \item \textsuperscript{30} CAL. GOV'T CODE §§ 15819.40(a)-(c), 15189.403(a) (West 2009).
  \item \textsuperscript{31} Id. § 15819.40(a)(1)(A). "Infill" refers to the process of developing (or filling in) unoccupied spaces within particular areas. In the context of the Rehabilitation Services Act, infill is the process of constructing beds in underutilized areas of existing correctional facilities. California Department of Corrections and Rehabilitation, AB 900: Providing Solutions - Progress in Action, http://www.cdc.ca.gov/News/AB_900_Achievements/Providing_Solutions.html (last visited Apr. 4, 2011) (on file with the McGeorge Law Review).
  \item \textsuperscript{32} Id. § 15819.40(b).
  \item \textsuperscript{33} Id. § 15819.40(c).
  \item \textsuperscript{34} Id. § 15820.903(a); ASSEMBLY FLOOR, COMMITTEE ANALYSIS OF AB 900, at 4 (Apr. 26, 2007).
  \item \textsuperscript{35} ASSEMBLY FLOOR, COMMITTEE ANALYSIS OF AB 900, at 2-3 (Apr. 26, 2007).
  \item \textsuperscript{36} See CAL GOV'T CODE § 15819.40(a)(2) (requiring that all beds include treatment for substance abuse, work programs, academic and vocational opportunities, and mental health care); CAL. PENAL CODE § 2694 (West Supp. 2010) (requiring creation of 4,000 additional substance abuse treatment beds); id. § 3020 (requiring implementation of an individualized needs assessment for inmates); id. § 3105 (requiring creation of a prison-to-employment program to ensure successful re-entry and employment for prisoners); id. § 3073 (requiring creation of mental health day programs for parolees); id. § 2054.2 (requiring creation of an incentive program to increase participation in educational programs); id. § 10007 (authorizing use of portable buildings to ensure adequate space for treatment and rehabilitation programs).
  \item \textsuperscript{37} See CAL. PENAL CODE § 2062(a)(1)-(4) (requiring staffing plans to fill vacant staff positions and address other staffing deficiencies).
  \item \textsuperscript{38} Id. §§ 6140-6141.
\end{itemize}
2. Phase II

The second phase of the Rehabilitation Services Act authorized the creation of 16,000 additional state prison beds, but conditioned funding for these beds upon CDCR fulfilling thirteen statutorily created criteria. Phase II authorizes $2.5 billion in lease-revenue bond financing for 4,000 infill beds, 10,000 re-entry beds, and 2,000 medical, dental, and mental health care beds (a total of 16,000). However, Phase II prohibits the State Public Works Board from releasing these funds until CDCR meets the criteria designed to ensure compliance with the anti-recidivism and rehabilitation initiatives enumerated in Phase I.

These criteria include requirements that 4,000 of the 12,000 infill beds that Phase I authorized must be under construction or sited, at least 2,000 re-entry beds are under construction or sited, and 2,000 of the mandated 4,000 drug treatment spaces be established. These criteria also require, among other things, that CDCR serve at least 300 parolees a month at mental-health day centers and that CDCR establish a plan to deal with management deficiencies. Only upon the three-person panel finding that all thirteen criteria are met, may the State Public Works Board release funding for Phase II construction to CDCR.

C. Compromise Between Federal Receiver and CDCR for New Health Care Prison

On October 20, 2009, Receiver J. Clark Kelso and CDCR Secretary Matthew Cate signed a joint resolution for the construction of the California Health Care Facility in Stockton, intended to house 1,734 beds serving prisoners' medical and mental health care needs. However, in February 2010, the Public Works Board pulled the review of the Health Care Facility from its agenda at the behest of the

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39. CAL. GOV'T CODE § 15819.41(a)-(c); CAL. PENAL CODE § 7021(a).
40. CAL. GOV'T CODE §§ 15819.41, 15819.413.
41. CAL. PENAL CODE § 7021(a)(1)-(13).
42. Id. § 7021(a)(1).
43. Id. § 7021(a)(3). "Sited" in this context refers to setting aside land for the construction of these beds. See BLACK'S LAW DICTIONARY 1420 (8th ed. 2004) (defining "site" as "a piece of property set aside for a specific use").
44. Id. § 7021(a)(4).
45. Id. § 7021(a)(8).
46. Id. § 7021(a)(10).
47. Id. § 7021(a). The three members of the panel which determines compliance with section 7021(a)(1)-(13) are the State Auditor, the General Inspector, and an appointee of the Judicial Council of California. Id.
Joint Legislative Budget Committee. Shortly thereafter, Assembly Member Solorio introduced Chapter 22 to clarify use of AB 900 bond funding to finance the Health Care Facility.

III. CHAPTER 22

Chapter 22 provides that CDCR may create up to 12,000 new inmate beds to accommodate inmates who require mental health services and medical services. Beds constructed for mental health or medical services must be accompanied by rehabilitative programming, including educational and vocational programs, drug treatment programs, employment programs, and prerelease planning. Chapter 22 also allows CDCR to renovate existing facilities to provide medical, dental, and mental health services.

Additionally, Chapter 22 amends Government Code section 15819.41, authorizing CDCR to construct or renovate housing units to add an additional 4,000 inmate beds, permitting CDCR to provide these beds for medical and mental health services along with rehabilitative programming support.

Chapter 22 also authorizes the State Public Works Board to enlarge funding for the additional 12,000 beds authorized by Government Code section 15819.40 and the 4,000 beds authorized by section 15819.41.

Finally, Chapter 22 revises one of the thirteen prerequisites under Penal Code section 7021, by requiring that at least 4,000 of the 12,000 beds authorized by Government Code section 15819.40(a) must be established before the State Public Works Board may release funds to CDCR for projects permitted under existing law.

IV. ANALYSIS

Chapter 22 permits CDCR to allocate AB 900 bond funding to create California Health Care Facility-Stockton (CHCFS), which will have a 1,722-bed

51. CAL. GOV'T CODE § 15819.40(a)(4) (amended by Chapter 22).
52. Id.
53. Id. § 15819.40(b)-(c) (amended by Chapter 22).
54. Id. § 15819.41(a) (amended by Chapter 22).
55. Id. §§ 15819.401, 15819.411 (amended by Chapter 22).
56. CAL. PENAL CODE § 7021(a)(1) (amended by Chapter 22). The previous version of section 7021 had required that the 4,000 beds authorized under Government Code section 15819.41 be under construction. Id. § 7021 (West Supp. 2010).
capacity. By amending the Rehabilitation Services Act to allow renovation of existing facilities, Chapter 22 permits CDCR to develop the CHFCS at the former Karl Holton Youth Correctional Facility. Officials expect contractors to finish the renovations in three years. Proponents argue that renovating existing facilities cuts expenses because renovation usually costs less than new construction.

Supporters claim that CHFCS is necessary because the treatment of ill prisoners is a matter of basic decency and because it is necessary to ensure that prisoners do not bring their illnesses into California communities upon their release. The federal Receiver has said that CHFCS “brings California one step closer to complying with federal court orders for inmate health care.” Such compliance with court orders is essential to terminate the receivership and restore control over prison health care to CDCR. Thus, proponents argue that Chapter 22 aids in cutting the operational costs of the receivership.

Proponents also argue that construction of CHFCS will be a boon to the San Joaquin County economy. Supporters claim that construction will support upwards of 5,500 local jobs and introduce $220 million into the San Joaquin County economy each year. Furthermore, San Joaquin County could obtain as much as $1 million in sales tax revenue from supplies the contractors will use to convert the former youth correctional facility to California Health Care Facility-Stockton.

CDCR also estimates that by altering Phase II criteria to require that 4,000 beds be “established” instead of “under construction,” Chapter 22 will result in CDCR completing Phase II projects twelve-to-eighteen months earlier than under AB 900. This is because the amendment permits release of Phase II funding

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57. ASSEMBLY FLOOR, COMMITTEE ANALYSIS OF AB 552, at 3 (May 21, 2010).
59. Press Release, supra note 58.
60. SENATE APPROPRIATIONS COMMITTEE, COMMITTEE ANALYSIS OF AB 552, at 2 (Apr. 26, 2010).
63. SENATE APPROPRIATIONS COMMITTEE, COMMITTEE ANALYSIS OF AB 552, at 2 (Apr. 26, 2010).
64. Id.
65. Press Release, supra note 58 (discussing economic benefits relating to job creation and tax revenue).
66. Id.
67. Id.
68. SENATE APPROPRIATIONS COMMITTEE, COMMITTEE ANALYSIS OF AB 552, at 3 (Apr. 26, 2010).
once CDCR is functionally committed to a construction project, rather than once
the project is completed.  

Doubts exist regarding the alleged benefits of Chapter 22, however. At least
one commentator has noted that the economic benefits of CHFCS are far from
certain, as the facility may “siphon health care professionals from other
hospitals” and employees may not spend locally-earned wages in the San Joaquin
community. The Service Employees International Union Local 1000 has voiced
opposition to Chapter 22, citing CDCR’s failure to adequately implement
rehabilitation programs thus far under AB 900.

V. CONCLUSION

Chapter 22 permits allocation of AB 900 bond funds for the renovation of
existing facilities. This authorizes CDCR to house health care beds at the
California Health Care Facility-Stockton in accordance with the 2009 agreement
between the federal Receiver and CDCR. Chapter 22 also allows the State
Public Works Board to potentially release funding for Phase II beds twelve-to-
eighteen months earlier, because CDCR meets the criteria when it establishes
4,000 beds, rather than when it initiates construction. While Chapter 22 may be
a step in the right direction, the legal battle over prison overcrowding and health
care will likely continue well into the future, including a pending case in front of
the United States Supreme Court to determine whether the federal judiciary can
order the reduction of California’s inmate population.

69. Id.
71. Id.
73. CAL. GOV’T CODE § 15819.40(c) (amended by Chapter 22).
74. ASSEMBLY FLOOR, COMMITTEE ANALYSIS OF AB 552, at 3 (May 21, 2010).
75. SENATE APPROPRIATIONS COMMITTEE, COMMITTEE ANALYSIS OF AB 552, at 3 (Apr. 26, 2010).
76. Press Release, supra note 58 (stating that CHFCS brings California one step closer to complying with federal court orders).