

***RECEIVER'S EFFORTS TO IMPROVE MEDICAL CARE  
FELT AT PRISONS STATEWIDE  
FOCUS ON RECRUITMENT AND INFRASTRUCTURE  
Sixth report to Judge covers steps taken to accomplish  
Plan of Action to create a constitutional medical care system***

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SAN JOSE, Calif. – Robert Sillen, court-appointed Receiver of the state's prison medical care system, laid out a detailed account of the current system-wide initiatives as well as several pilot projects at individual prisons undertaken to bring prison medical care up to constitutional standards in a report yesterday to U.S. District Court Judge Thelton E. Henderson.

The Receiver's approach reflects a dual focus on health care providers and medical system issues, both of which contribute to needless patient deaths. In an analysis of California inmate deaths in 2006 released last week, the Receiver found that 66 of them – or 15 percent – were preventable (18) or possibly preventable (48).

"This is all about unnecessary human suffering," Sillen said. "It's not just about data. It's an emergency."

The Receivership is the result of a 2001 class action law suit - *Plata v. Schwarzenegger* - that found the medical care in California's adult prisons violates the Eighth Amendment of the U.S. Constitution, which forbids cruel and unusual punishment. After several years of failure by the state to fulfill court orders to improve care, federal Judge Henderson last year appointed Sillen as Receiver to oversee operations and direct improvement in the quality of medical care, stripping that function from the California Department of Corrections and Rehabilitation (CDCR).

"We have made significant progress in many areas, and yet, the surface has hardly been scratched," Sillen said. "There are deep-rooted reasons why the system is as broken as it is. We have identified these over the last year and have begun working to untangle them. The bottom line is that there are no clinical or business systems in place that support good care. That's why it was taken over from the state."

The Receiver's team has taken several steps to address the crisis. Top among them is the recruitment of qualified, permanent doctors, nurses, pharmacists and other medical and support staff. CDCR human resources staff who now report to the Receiver have hired

nearly 500 people since June, reducing the overall vacancy rate for CDCR *Plata* positions (medical and staff who support medical) from 31 percent to 21 percent. The new hires include registered nurses, licensed vocational nurses, physicians, nurse practitioners, physician assistants, certified nursing assistants, health record technicians and supervisors, pharmacy technicians, pharmacists, health program advisors and specialists, lab assistants, clinic lab and radiology technologists, public health nurses, nurse instructors and supervising nurses.

These professionals cannot perform well, however, if they do not have accurate patient information, an appropriate place to work or a system where tests and consults are performed in a timely manner. The Receiver's team is working to address each of these deficiencies, among others.

"We can't expect clinicians to make good decisions if they don't have lab results, medical records, a pharmacy that delivers their prescriptions and a culture that says these inmate patients are human beings," Sillen said. "We have a Plan of Action that addresses these challenges in turn. The creation of a constitutional medical care system is within reach, but it will take time to get there."

The Receiver's priorities for medical system improvement over the next 36 months include:

- Building up to 5,000 medical and 5,000 mental health beds statewide. Creating appropriate housing for the delivery of medical and mental health care is critical to the achievement of a constitutional medical care system.
- Constructing necessary clinical and support space in existing prisons. This project begins with addition of space at Avenal State Prison.
- Piloting a nursing orientation and preceptor program for new hires.
- Launching an asthma initiative to provide clinical protocols, case management and training to improve the care given to inmates with asthma. Asthma was CDCR's leading cause of preventable death in 2006.
- Implementing the Health Care Access Unit program at San Quentin, followed by additional prisons. This program assigns correctional officers to medical escort and transport duties, improving access to care.
- Beginning to transform information technology in California's prison medical system by establishing a statewide wireless network that connects all prisons to each other, and provides for within-prison connectivity as well.
- Continuing the pharmacy system turnaround by Maxor National Pharmacy Services Corp. Pilots in two prisons are underway.
- Continuing the Receiver's San Quentin Project.
- Continuing to participate in coordinating the remedial activities taking place in federal medical, mental health, dental and disabled inmates' cases.

To date, all 33 CDCR adult prisons have experienced changes brought by the Receiver's efforts. These include the raising of medical staff salaries to market levels, changes to the pharmacy system and deliveries of needed medical equipment and supplies, including telemedicine equipment. By the end of September, all prisons also will have received medical transport vehicles to increase access to care.

In addition to those system-wide changes, the Receivership is having a widening impact on individual institutions, with specific projects underway or about to begin at 20 of California's 33 adult prisons. Here are examples of that work:

1. *Avenal State Prison* – Health Care Manager, Chief Physician and Surgeon, Chief Medical Officer appointed; construction of clinical space planned; preliminary review by Health Care Access Unit team complete.
2. *California Correctional Center* - Site getting operational help from Maxor's pharmacy drop-in team; preliminary review by Health Care Access Unit team complete.
3. *California Correctional Institution* – Specialty care pilot underway.
4. *California Institution for Men* – General Acute Care Hospital converted into an infirmary.
5. *California Institution for Women* – Maxor pharmacy pilot scheduled to begin Jan; site getting operational help from Maxor's pharmacy drop-in team.
6. *California Medical Facility* - Site getting operational help from Maxor's pharmacy drop-in team; next site scheduled for Health Care Access Unit pilot, after San Quentin.
7. *California Men's Colony* – Maxor pharmacy pilot scheduled to begin Nov.
8. *California State Prison, Los Angeles County* – Specialty care pilot underway.
9. *California State Prison, Sacramento* – Inmate Medical Appeals Pilot underway; third site set for Health Care Access Unit Pilot.
10. *California State Prison, Solano* – Site getting operational help from Maxor's pharmacy drop-in team; preliminary review by Health Care Access Unit team complete.
11. *Correctional Training Facility* - Preliminary review by Health Care Access Unit team complete.
12. *Folsom State Prison* – Maxor pharmacy pilot underway; site getting operational help from Maxor's pharmacy drop-in team; preliminary review by Health Care Access Unit team complete.
13. *High Desert State Prison* - Site getting operational help from Maxor's pharmacy drop-in team; preliminary review by Health Care Access Unit team complete.
14. *Ironwood State Prison* – preliminary review by Health Care Access Unit team complete.
15. *Mule Creek State Prison* – Maxor pharmacy pilot underway.
16. *R.J. Donovan Correctional Facility* - Preliminary review by Health Care Access Unit team complete.
17. *Salinas Valley State Prison* - Site getting operational help from Maxor's pharmacy drop-in team.
18. *San Quentin* – Receiver's San Quentin project continues, includes Inmate Medical Appeals pilot, Health Care Access Unit pilot.
19. *Sierra Conservation Center* – Preliminary review by Health Care Access Unit team complete.
20. *Wasco State Prison* – Inmate Medical Appeals pilot underway; preliminary review by Health Care Access Unit team complete.

For more information, read the full report, which is now posted on the California Prison Health Care Receivership web site at [www.cprinc.org](http://www.cprinc.org) in the Court Materials section.

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