

**CALIFORNIA
PRISON HEALTH CARE
RECEIVERSHIP CORP.**

J. Clark Kelso, Receiver

Rosen, Bien & Galvan, LLP
Attorneys at Law
315 Montgomery St.
San Francisco, CA 94104

Dear Mrs. Kahn,

Thank you for your letter in response to the draft strategic plan "Achieving a Constitutional Level of Medical Care in California's Prisons." Your insight and comments are extremely valuable and we are grateful for your commitment to support the California Prison Health Care Receivership while developing our strategic plan. Below is a response to items addressed in your letter.

Goal 5: Construct Necessary Clinical, Administrative and Housing Facilities.

The Draft Strategic Plan first acknowledges the critical need to upgrade administrative and clinical facilities at all of the CDCR prisons where sorely needed clinical treatment space, medical administration space, medical storage space, and pharmacy, medical records and medical laboratory spaces must be created. Draft Plan at 24. Thereafter the Draft Plan sets forth a schedule for the assessments and preliminary planning that has and will occur at the 33 CDCR prisons. Id at 24-26. The Receiver's Seventh Quarterly Report, filed on March 14, 2008, provides additional details regarding these assessments and the nature of the preliminary planning which has already occurred, at Avenal State Prison ("ASP"), California Training Facility ("CTF"), California Rehabilitation Center ("CRC") and Mule Creek State Prison ("MCSP"). Docket 2724 at 44-47.

Although several of these projects refer to upgrades in the administrative segregation units, where large numbers of mentally ill prisoners are housed, it is unclear whether the upgrades are intended to remedy the problems identified during Coleman monitoring. We understand that there has been involvement by the Coleman court representatives in the Avenal project

There are at least three court-ordered plans in Coleman, in which defendants themselves, have identified treatment space deficits as a barrier to providing adequate mental health treatment to Coleman class members. These include defendants' plan to address suicides in administrative segregation ("ASU Suicide Plan") filed on July 30, 2007 [Docket 2335], defendants plan to improve Enhanced Outpatient ("EOP") care in administrative segregation filed on July 11, 2007 [Docket 2311], and defendants' EOP Reception Center Plan filed with the Coleman Special Master on December 3, 2007.

It is not the intent of the Receiver's Health Care Facilities Improvement Program to remedy all the identified deficiencies noted during *Coleman* monitoring. The main focus of these reviews is to upgrade administrative and clinical facilities in order to provide adequate medical care to inmate-patients. In an effort to provide timely access to safe, effective, and efficient medical care, we continue to coordinate with the mental health dental and disability programs. These facility reviews include the input from the experts and monitors both the *Coleman* and *Perez* courts. When appropriate, mental health treatment/office space is included within our reviews in concert with appropriate clinical treatment space that may remedy some of the *Coleman* Corrective Action Plan items.

Your comments proved to be very helpful and supportive. We look forward to working collaboratively with you in the future.

Sincerely,

A handwritten signature in black ink, appearing to read 'Clark Kelso', with a long horizontal flourish extending to the right.

Clark Kelso, Receiver
California Prison Health Care Receivership, Inc.