



Program Description

- Constructs seven new facilities of approximately 1500 beds each to accommodate medical and mental health services meeting minimum constitutional standards.
- Provides approximately 10,000 beds for treatment of medical and mental health patients.
- Provides for reassignment of 10,000 existing beds to reduce overcrowding, including over 4,700 level III & IV cell beds.
- Addresses additional treatment/housing needs for *Plata*, as well as *Coleman* and *Armstrong* class action cases.





Program Management Team

Joint Venture Partners:

- *URS Corporation (URS)* program managers (San Francisco, Sacramento).
- **Bovis Lend Lease (BLL)** program managers -(San Francisco, Los Angeles).

Key Sub Consultants:

- Lee Burkhart Liu, Inc. (LBL) health care planners (Los Angeles).
- Robert Glass and Associates (RGA) corrections and security planners (Spokane, WA).
- Brookwood Program Management (BPM) construction planners (Atlanta, GA).
- Carter Goble Lee (CGL) correctional health care planners (Columbia, SC).





Receiver's New Facilities Construction Program (By Acuity & Security Classification)

Medical (Abt Study Projected Through 2017)	Patient Capacity	Level III & IV Prison Patients Transferred from CDCR Cells into Receiver Health Care Facilities	*Increase in CDCR Level III & IV Celled Beds
Specialized General Population	3,650	2,227	3,341
Low Acuity	900	549	824
High Acuity	450	275	413
Subtotal	5,000	3,051	4578

Mental Health (CDCR Projections _{Through} 2011/2012, Based Upon Navigant Study)	Patient Capacity	Level III & IV Prison Patients Transferred from CDCR Cells into Receiver Health Care Facilities	*Increase in CDCR Level III & IV Celled Beds
Enhanced Outpatient Program	2,977	1,240	1860
Enhanced Outpatient Program High Custody	695	180	270
Mental Health Crisis Beds	138	142	213
Intermediate Care Facility	230		
Intermediate Care Facility High Custody	120	177	266
Acute Care	132		
Subtotal	4,292	1,739	2609
Totals	9,292	4,790	7184

CALIFORNIA PRISON HEALTH CARE RECEIVERSHIP CORP.

"Core Planning Team" Planning Process

- CPR selected a "Core Planning Team" to serve as expert advisors (state employees and court appointed experts) for facility planning.
- The URS/BLL team represents the planning disciplines in a collaborative process.
- National "best practices" tours of comparable correctional health facilities.
- Bi-weekly planning meetings since September 2007.





Facility Diagrams and Size

The following three diagrams show current status of the proposed facility sizes and layouts. Planning activity is ongoing.

- Seven facilities of approximately 1,500 beds each.
- Facility No.1 includes medical, mental health, and separate women's facilities, all within a secure perimeter.
- Facility No. 5 includes men's medical, mental health, acute mental health, and women's facilities, all within a secure perimeter.
- Facility 2, 3, 4, 6 & 7 include medical and mental health facilities within a secure perimeter.

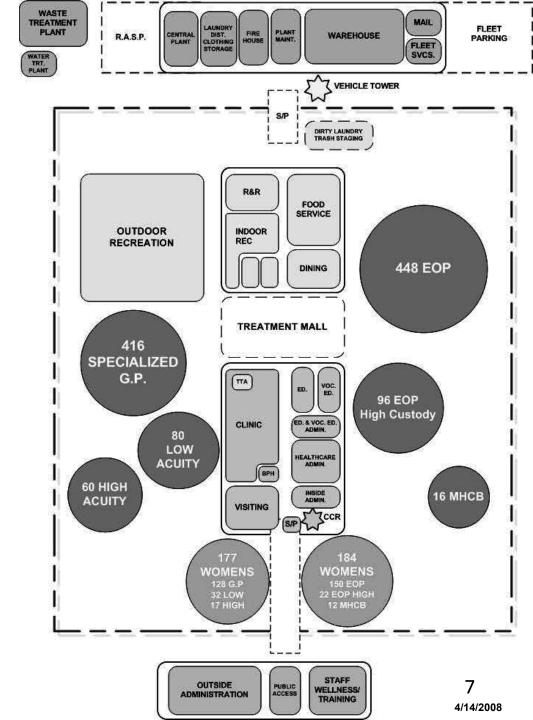
Facility 1 Diagram

733 Medical Patients744 Mental Health Patients1,477 Total

Facility 1	Gross SF
Housing	407,000
Diagnostic/Treatment	165,000
Patient Support	79,200
Administration	39,500
Outside Support	69,400
Perimeter	7,150
Women's Facility	374,000
Total Square Footage	1,141,250
	772 sf/bed

LEGEND:

EOP – Enhanced Outpatient Program
GP – General Population
High – High Acuity
Low – Low Acuity
MHCB – Mental Health Crisis Bed



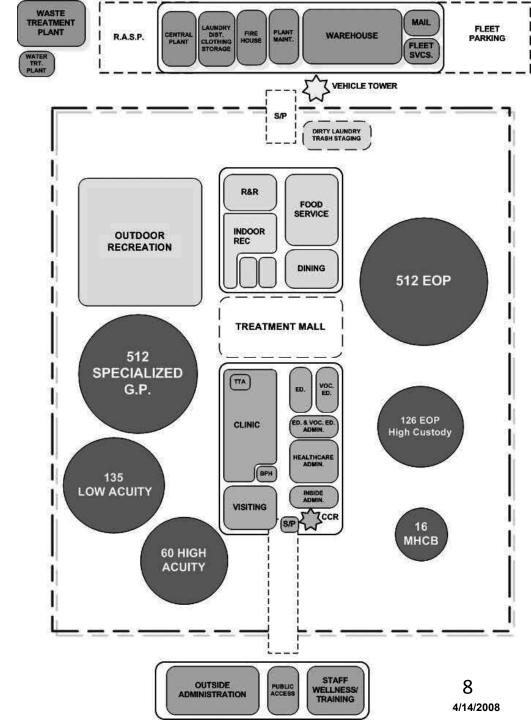
Typical Facility Diagram

707 Medical Patients 654 Mental Health Patients 1,361 Total

Facilities 2, 3, 4, 6 & 7	Gross SF
Housing	456,500
Diagnostic/Treatment	165,000
Patient Support	79,200
Administration	39,500
Outside Support	69,400
Perimeter	7,150
Women's Facility	0
Total Square Footage	816,750
	600sf/bed

LEGEND:

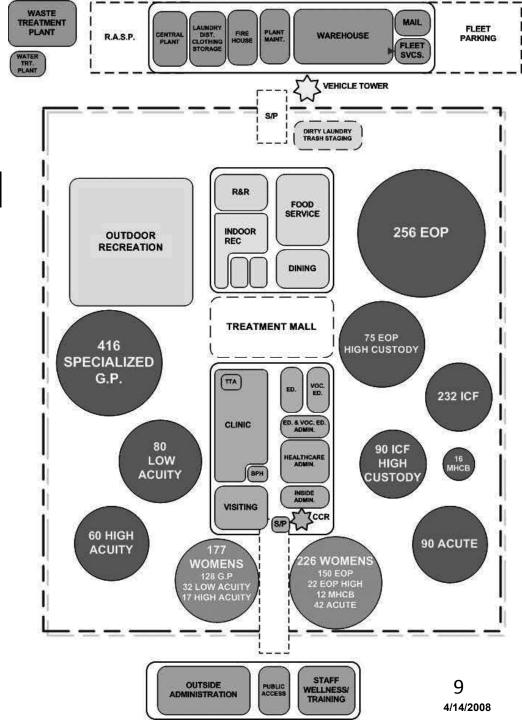
EOP – Enhanced Outpatient Program
GP – General Population
High – High Acuity
Low – Low Acuity
MHCB – Mental Health Crisis Bed



Facility 5 Diagram

733 Medical Patients985 Mental Health Patients1,718 Total

Facility 5	Gross SF
Housing	555,500
Diagnostic/Treatment	165,000
Patient Support	79,200
Administration	39,500
Outside Support	69,400
Perimeter	7,150
Women's Facility	374,000
Total Square Footage	1,289,750
	750 sf/bed
EOP – Enhanced Outpatient Progr GP – General Population ICF – Intermediate Care Facility MHCB – Mental Health Crisis Bed	ram

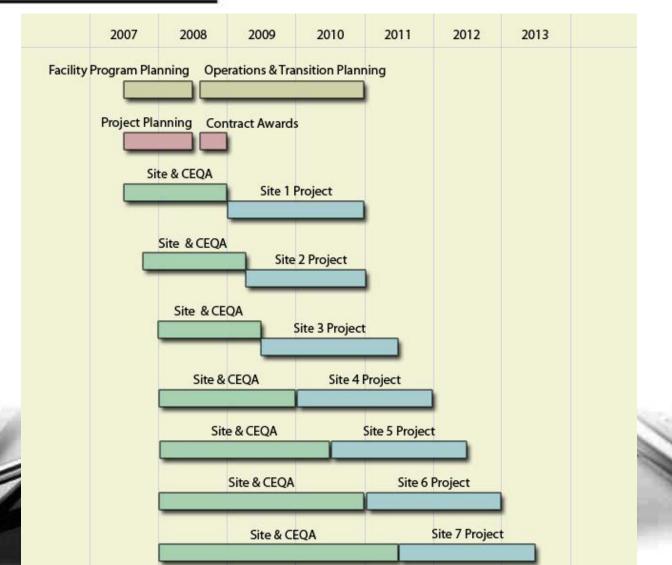




Program Schedule

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4/14/2008





Program Budget Estimate

Description	Facility 1	Fooility F	Facility 2 2 4 6 9 7	Total Dragger
Description	Facility 1	Facility 5	Facility 2,3,4,6 & 7	Total Program
Total Area	1,141,250	1,289,750	816,750	6,514,750
Total Beds	1,477	1,718	1,361	10,000
TOTAL NUMBER OF FACILITIES	(1 FACILITY)	(1 FACILITY)	(5 FACILITIES)	7 FACILITIES
		A	A	4
Buildings and On-Site Infrastructure	\$ 505,000,000	\$ 650,000,000	\$ 415,000,000	\$ 3,230,000,000
Cost per Bed	\$ 341,909	\$ 378,347	\$ 304,923	\$ 323,000
Cost per Square Foot	\$ 442.25	\$ 503.97	\$ 508.11	\$ 495.80
Area per Bed	772	750	600	651
Offsite Infrastructure	\$ 56,000,000	\$ 59,000,000	\$ 41,000,000	\$ 320,000,000
Project and Indirect Costs	\$ 250,000,000	\$ 305,000,000	\$ 191,000,000	\$ 1,510,000,000
Contingency and Escalation	\$ 148,000,000	\$ 182,000,000	\$ 122,000,000	\$ 940,000,000
COST PER FACILITY	\$ 959,000,000	\$ 1,196,000,000	\$ 769,000,000	
TOTAL COST PER FACILITY TYPE	\$ 959,000,000	\$ 1,196,000,000	\$ 3,845,000,000	\$ 6,000,000,000

CALIFORNIA PRISON HEALTH-CARE RECEIVERSHIP CORP.



California Prison Health Care Receivership

Existing Facilities Capital Improvement Program

Calipatria State Prison

San Diego

Richard J. Donovan Correctional Facility

Centinela State Prison



The Current Inadequacies/Results/Solution

Current Inadequacies

- Inadequate clinical treatment space in existing facilities
- Treatment spaces that do not meet programmatic medical standards
- Inadequate support spaces (such as pharmacy, storage, lab) for treatment
- Inadequate administrative space for healthcare staff
- Facilities and infrastructure that are run down due to age and lack of adequate maintenance & upgrade

Results

- Inability to provide constitutionally mandated minimum health care
 - Inability to provide timely medical care
 - Inability to provide a continuum of necessary medical care
 - Inability to attract qualified medical staff
 - Inability to attract qualified support staff
 - Inability to support necessary specialty clinicians

Solution

 Plan, design and construct adequate quality clinical and support facilities in an accelerated time frame and cost efficient manner, using a collaborative approach

High Desert State Prison

Mule Creek State Priso



Scope of Work Included

- Regular clinical spaces & Specialty clinical spaces
- Triage and Treatment Area (TTA)
- Pharmacy, Laboratory & Storage
- Other Clinical Support Space as needed
- Medical Administration Space
- Custody Access to Care Space Socrements CSP Socrements CSP Socrements (New Policy State Control State Policy St
- Receiving & Release improvements to incorporate proper medical, mental health and dental screening
- Mental health spaces that logically integrate into medical improvement projects
- Replacement of reassigned spaces



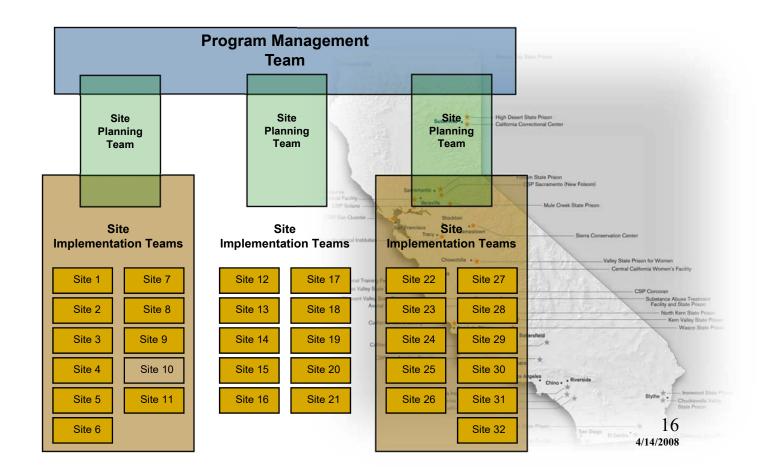
Steps of Planning & Implementation

- Step 1: Define program parameters; goals & objectives
- Step 2: Establish implementation teams
- Step 3: Establish program guidelines
- Step 4: Site facility assessment (prison by prison)
- Step 5: Facility master plan
- Step 6: Facility master plan implementation
- Step 7: Post occupancy evaluation (POE)
- Step 8: Incorporate POE feedback
 Control for Many Control for Man



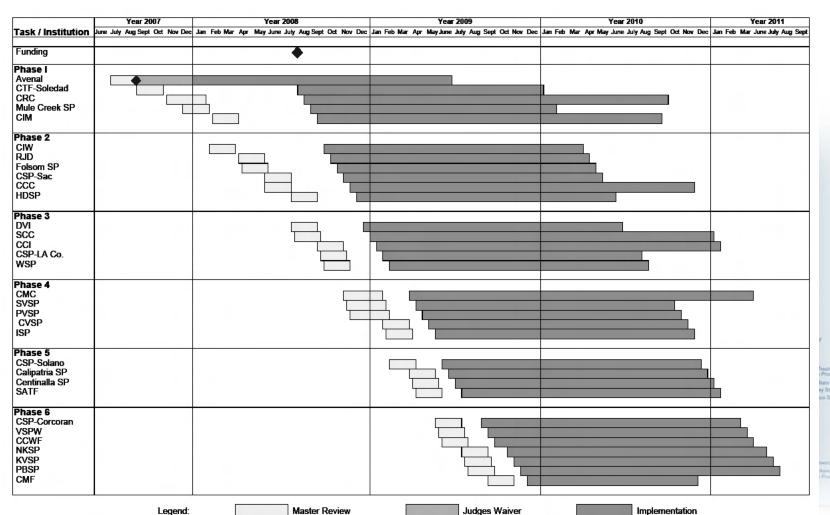
Upgrade Team Structure

CPR Policy Team





Master Schedule



Mule Creek State Prison

Sierra Conservation Center

Valley State Prison for Women

— Central California Women's Facility

4/14/2008



*Model Based Program Budget

California Prison Healthcare Facility Improvement Program

Institution	Design Capacity	Inmate Count (2008)	Year Built	Model based Cost	Escalated Cost
ASP	2,920	7,525	1987	\$27,358,500	\$27,358,500
CTF-Soledad	3,301	6,997	1946	\$41,500,000	\$42,537,500
CRC	3,628	5,994	1962	\$70,194,275	\$71,949,132
MCSP	1,700	3,832	1987	\$29,258,300	\$29,989,758
CIM	3,160	6,900	1941	\$0	\$0
CIW	1,026	2,443	1952	\$0	\$0
RJD	2,208	4,770	1987	\$0	\$0
CSP-Sac	2,031	3,254	1986	\$0	\$0
FSP	2,065	4,023	1880	\$0	\$0
CCC	4,096	6,271	1963	\$0	\$0
HDSP	2,452	4,793	1995	\$0	\$0
DVI	1,681	3,748	1953	\$0	\$0
SCC	3,706	6,591	1965	\$0	\$0
CCI	2,781	5,907	1933	\$0	\$0
CSP-LA Co.	1,350	4,764	1993	\$0	\$0
WSP	3,190	5,935	1991	\$0	\$0
CMC	3,884	6,586	1954	\$0	\$0
SVSP	2,224	4,556	1996	\$0	\$0
PVSP	2,616	5,188	1994	\$0	\$0
CVSP	1,738	3,913	1988	\$0	\$0
ISP	2,200	4,664	1994	\$0	\$0
CSP-Solano	2,610	6,047	1984	\$0	\$0
Calipatria SP	2,208	4,168	1992	\$0	\$0
Centinalla SP	2,383	4,928	1993	\$0	\$0
SATF	3,424	7,628	1997	\$0	\$0
CSP-Corcoran	2,916	4,867	1988	\$0	\$0
/SPW	2,024	3,810	1995	\$0	\$0
CCWF	2,004	4,325	1990	\$0	\$0
NKSP	2,892	5,390	1993	\$0	\$0
KVSP	2,448	5,013	2005	\$0	\$0
PBSP	2,280	3,461	1989	\$0	\$0
CMF	3,292	3,031	1955	\$10,000,000	\$10,830,000

^{*}Based on four master plans (non reception center facilities) and does not address administration, warehousing, and access to care unit space.

CALIFORNIA PRISON HEALTH CARE RECEIVERSHIP CORP.

Existing Facilities Capital Improvement Program

Current Status as of April 14, 2008





- Four master plans complete (ASP, CTF, CRC, MCSP)
- Two master plans in progress (CIM & CIW)
- One site beginning implementation (ASP)
- One site well underway
 One site well underway
 Salinas
 Fresno
 Salinas
 Fresno
 Salinas
 Fresno
 Salinas
 Salinas

Salinas

Fresno

CSP Corcoran

CSP Corcoran

Avanal State Prison

Avanal

Note: SQ improvements have been funded independent of the other 32 institutions