RECEIVER ANNOUNCES COORDINATION WITH OTHER FEDERAL CLASS ACTION CASES AMONG TOP PRIORITIES FOR PRISON SYSTEM CLEAN UP Fourth court report details progress, ongoing challenges and obstacles in first eleven months

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SAN JOSE, Calif. – Robert Sillen, court-appointed Receiver of the state's prison medical care system, announced today a new thrust in his efforts to improve medical care in California's prisons that will entail coordination with other significant federal law suits concerning inmates' health care needs.

Sillen will join with court officials representing cases on mental health and dental care and conditions for disabled inmates – all areas, like medical care, where federal judges have found California's prisons unconstitutional.

"The same inmates are the plaintiffs in all cases," Sillen said. "Fixing this mess requires careful planning and the setting of systemic priorities. It is critical that coordination take place among the various cases to ensure that remedial programs and priorities of one case do not disrupt or delay another. Working together, we can save more lives, get more done, work faster and more effectively."

The Receivership is the result of a 2001 class action law suit - *Plata v. Schwarzenegger* - that found the medical care in California's 33 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, U.S. District Court Judge Thelton E. 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).

Other federal suits have found California's prison system fails to provide adequate mental health care (*Coleman v. Schwarzenegger*), dental care (*Perez v. Tilton*) and violates the Americans with Disabilities Act (*Armstrong v. Davis*). Now, the four presiding judges have instructed representatives of the remedial efforts in each of these cases to work together to streamline their progress.

In the collaboration, the Receiver is expected to manage several of the system-wide changes that affect all the impacted areas, such as information technology, medical records, pharmacy, construction and the overall reorganization of prison health care management.

In his fourth report to the court today, Sillen summarized an extensive body of work he and his team have undertaken in the first 11 months of the Receivership to bring California's 33-prison medical care system up to constitutional standards.

The document discusses early successes establishing preliminary improvements in medical staffing, equipment and supplies; inmates' access to specialty and hospital care; building a team of experts capable of leading the remedial process; and gaining more control over daily operations and crisis management.

It also acknowledges the ongoing difficulties in bringing change into a system that has become accustomed to dysfunction, waste, low performance, poor morale and bad patient outcomes. The Receiver laid out plans to improve medical staff accountability, including clinical peer review, performance evaluations and a more effective process to investigate misconduct.

"Though many positive steps have been taken in the first year, California's approximately 173,000 inmates are still paying the price in human suffering for a broken medical system," said Sillen, who outlined priorities for the next two years. "Nearly every aspect of medical care delivery in the state's prison system requires substantial reform. The tasks involved in the system's repair are numerous and complex, and following decades of neglect and mismanagement, all of the existing problems cannot begin to be completed in the next one to two years." Sillen has put the time frame for reaching constitutional levels at five to 10 years, with a possibly equal amount of time then spent transitioning the system back to the state.

Progress is slowed, however, by ongoing resistance to change by some state agencies. For instance, the Receiver embarked in January on a turnaround project to better manage the prison pharmacy system, which is currently a wasteful, disorganized and dangerous enterprise, estimated to cost \$46 to \$80 million more than equivalent systems. The firm hired to lead the effort, Maxor National Pharmacy Services Corp., has encountered a pattern of delay in obtaining timely, accurate information on pharmaceutical pricing and purchasing agreements from the State Department of General Services, retarding the effort to revamp the operation.

Many of the Receiver's efforts thus far have resulted in a savings to the taxpayers, who have been footing the bill for this multi-billion dollar problem. Maxor, for example, already has collected \$343,000 in manufacturer rebates that the state did not and is exploring a strategy to save approximately \$62 million in drug purchases annually, which is being hampered at present by DGS' lack of cooperation.

The 80-page report also included updates and bulletins on several ongoing projects:

• Raising medical staff salaries to competitive levels and embarking on an aggressive recruitment and hiring process

- Hiring more than 500 Licensed Vocational Nurses to replace Medical Technical Assistants, in a transition that will save taxpayers \$39 million when complete
- Hiring 262 Registered Nurses since the salary increases took effect, reducing the reliance on costly temporary staff
- Improving medical quality, staffing and space at San Quentin State Prison, including renovation and construction of new facilities
- Piloting an automated medical services contracting system to replace CDCR's inefficient, slow and wasteful paper-based process
- Moving forward with plans to build 5,000 new medical beds statewide to provide appropriate care to medically needy inmates

For more information, read the full report, which is now posted on the California Prison Health Care Receivership web site at <u>www.cprinc.org</u> in the Court Materials section.

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