Summary

In this brief, we provide an overview of the total amount of funding in the Governor’s proposed 2022-23 budget for the California Department of Corrections and Rehabilitation (CDCR), as well as assess and make recommendations on several specific budget proposals.

Trends in the Adult Inmate and Parolee Populations. The Governor’s budget proposes a net increase of $61.5 million (largely from the General Fund) in 2022-23 related to projected changes in the overall population of inmates and parolees. We find that the proposed budget likely overestimates the projected inmate population and associated funding, potentially by several thousand inmates and roughly $100 million. As a part of the May Revision, the administration will update these budget requests. Accordingly, we withhold recommendation on the proposal until that time.

COVID-19 Direct Response Expenditures. The Governor’s budget proposes $425 million one-time General Fund in 2022-23 for COVID-19 response activities, such as testing for staff and inmates. At the time of this analysis, CDCR was not able to provide sufficient information to fully justify the estimated COVID-19 direct response costs. In addition, the proposal will likely need to be revised to account for a lower inmate population and changes in pandemic conditions. Accordingly, we recommend the Legislature withhold action on the proposal and direct the department to submit a revised proposal at the May Revision.

Integrated Substance Use Disorder Treatment Program (ISUDTP) Expansion. The Governor’s budget proposes $126.6 million General Fund in 2022-23 (increasing to $163 million annually in 2023-24) to expand the number of inmates treated through ISUDTP and modify the program in various ways. We find that the proposal has merit. However, the level of resources requested are likely too high given that the inmate population will likely be lower than expected and various factors could limit the expansion of the program. Accordingly, we recommend the Legislature direct CDCR to provide a revised ISUDTP proposal at the May Revision that is adjusted to reflect a lower inmate population. If additional funding for ISUDTP is approved, we recommend the Legislature also approve provisional budget language requiring any unspent funds revert to the General Fund.

California Prison Industry Authority (CalPIA) Janitorial Expansion. The Governor’s budget proposes $8.6 million General Fund in 2022-23 (increasing to $10.5 million annually in 2023-24) to expand the scope of a CalPIA contract with CDCR for cleaning health care facilities to include additional facilities and support additional custodian supervisors to change the ratio of supervisor to custodial staff. We find that the additional custodian supervisors to reflect a different staffing ratio are unnecessary. Accordingly, we recommend that the Legislature only approve the costs associated with cleaning additional health care facilities.
OVERVIEW

Roles and Responsibilities. The California Department of Corrections and Rehabilitation (CDCR) is responsible for the incarceration of certain adult felons, including the provision of rehabilitation programs, vocational training, education, and health care services. As of January 12, 2022, CDCR housed about 99,110 adult inmates in the state’s prison system. Most of these inmates are housed in the state’s 34 prisons and 34 conservation camps. The department also supervises and treats about 46,200 adult parolees and is responsible for the apprehension of those parolees who commit parole violations. In addition, about 650 juvenile wards are housed in facilities that are currently operated by CDCR’s Division of Juvenile Justice, which includes three facilities and one conservation camp.

Governor’s Proposed Budget. The Governor’s January budget proposes a total of about $14.2 billion to operate CDCR in 2022-23, mostly from the General Fund. This amount reflects a decrease of $172 million (about 1 percent) from the revised 2021-22 level. (These amounts do not reflect anticipated increases in employee compensation costs in 2022-23 because they are accounted for elsewhere in the budget.) The proposed budget would provide CDCR with a total of about 65,300 positions in 2022-23, an increase of about 3,200 (5 percent) from the revised 2021-22 level. This brief provides our analysis of several of the Governor’s major proposals related to CDCR operations.

TRENDS IN THE ADULT INMATE AND PAROLEE POPULATIONS

Background

As shown in Figure 1, the average daily inmate population is projected to be 112,900 inmates in 2022-23, an increase of about 8,300 inmates (8 percent) from the estimated current-year level. The average daily parolee population is projected to be 43,000 in 2022-23, a decrease of 4,700 parolees (20 percent) from the estimated current-year level. According to CDCR, the projected increase in the inmate population is primarily due to the intake of a backlog of people who were sentenced to prison but housed in county jails while prison admissions were halted in response to the COVID-19 pandemic. The projected decrease in the parolee population is primarily due to recent policy changes that have reduced the length of time people spend on parole by allowing them to be discharged earlier than otherwise.
Governor’s Proposal

**Net Reduction in Current-Year Population Funding and Net Increase in Budget-Year Funding.**

The Governor’s January budget plan for 2022-23 proposes, largely from the General Fund, a net decrease of $24.7 million in the current year and a net increase of $61.5 million in the budget year related to projected changes in the overall population of adult offenders and various subpopulations (such as inmates housed in reentry facilities and sex offenders on parole). The current-year net decrease in costs is primarily due to (1) the closure of low-security facilities at the California Correctional Institution in Tehachapi and Correctional Training Facility in Soledad due to a decline in the number of inmates who can be housed in such facilities and (2) a lower total inmate population relative to what was assumed in the 2021-22 Budget Act. This decrease in cost is partially offset by projected cost increases, primarily due to an increase in the number of inmates estimated to need mental health care relative to what was assumed in the 2021-22 Budget Act. The budget-year net increase in expenditures is primarily due to a projected increase in the inmate population, which is partially offset by various decreased costs, such as parole-related costs.

**Budget Adjustments Will Be Updated in May.**

As a part of the May Revision, the administration will update these budget requests based on updated population projections. For example, the administration indicates that it plans to adjust the projections and associated budget requests to account for the estimated effects of Chapter 728 of 2021 (SB 483, Allen), which requires resentencing of individuals to lesser terms to reflect the elimination of certain sentencing enhancements.

**Assessment**

**Inmate Population Likely Overestimated.**

As of January 12, 2022, the inmate population was 99,100 and the administration indicated that the backlog of people housed in jails waiting to be admitted to prison had largely been eliminated. Accordingly, it seems implausible that the average daily inmate population will reach 112,900 in 2022-23 due to the jail backlog as assumed in the Governor’s budget. This suggests that the proposed budget overestimates the inmate population and associated funding in 2022-23, potentially by several thousand inmates and roughly $100 million. Based on our discussions with the administration, this was likely driven by an assumption that admissions to prison would be higher between July and December 2021 than they actually were. Furthermore, as noted above, the administration’s current projections do not account for the effects of Chapter 728.

**Recommendation**

**Withhold Recommendation Until May Revision.**

We withhold recommendation on the administration’s adult population funding request until the May Revision. We will continue to monitor CDCR’s population and make recommendations based on the administration’s revised population projections and budget adjustments included in the May Revision.

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**COVID-19 DIRECT RESPONSE EXPENDITURES**

**Background**

**Impact of COVID-19 on CDCR.**

COVID-19 has had a major impact on staff and inmates in the state’s prison system. As of January 28, 2022, CDCR has had a total of over 66,000 inmates and 36,000 staff contract COVID-19 during the course of the pandemic. There have been 246 inmates and 50 staff who have had COVID-19-related deaths. In addition, cases have increased recently since Omicron became the prevailing COVID-19 variant in California. For example, between January 15, 2022 and January 29, 2022, the department reported 8,000 new cases.

Since the start of the pandemic, CDCR has implemented several restrictions and operational changes to reduce the spread of the virus within its institutions. For example, the department suspended visiting and rehabilitation programs, reduced the density of dormitories by housing some inmates in open areas (such as gymnasiums), and suspended nonurgent health care services. To reduce transmission, staff and inmates are generally required to be masked and regularly tested. In addition to reducing inmate population density and allowing for improved physical
distancing, the state expedited the release of certain inmates in order to reduce the inmate population. The state also periodically suspended intake from county jails to reduce the likelihood of spreading COVID-19 during the intake process and reduce the density of population in state prisons. The expedited releases and suspension of intake have resulted in a substantial decline in the inmate population.

**2021-22 COVID-19-Related Funding.**  
The 2021-22 Budget Act provides $408 million from the General Fund for CDCR’s COVID-19 response. As shown in Figure 2, these funds were budgeted for various costs, including testing, surge capacity, custody overtime (such as from staff who are absent due to COVID-19), and cleaning, as well as reimbursements for county jails housing people sentenced to state prison due to the suspension of intake. The 2021-22 Budget Act also includes a control section regarding the General Fund resources appropriated to nine specific departments (including CDCR) for COVID-19-related activities—totaling $1.7 billion. Specifically, the control section allows the Department of Finance (DOF) to reduce or shift resources between the nine departments, as well as to shift the budgeted resources to other departments, for COVID-19-related activities, upon ten-day notification to the Joint Legislative Budget Committee (JLBC).

**Governor's Proposal**  
The Governor’s 2022-23 budget proposes $425 million one-time General Fund for CDCR COVID-19 response activities including testing, vaccination surge capacity, custody overtime, and cleaning. Figure 3 provides information on the level of funding proposed for each activity. In addition, the proposed 2022-23 budget includes a modified version of the control section that was in the 2021-22 budget to also allow DOF to increase the amount budgeted for COVID-19 response during 2022-23 subject to ten-day JLBC notification. (We note that the administration has also requested the Legislature to take early action to augment the amount available for CDCR in 2021-22 by $206 million for increased costs associated with testing.)

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**Assessment**  
**Lack of Justification for Level of Resources Requested in 2022-23.** We acknowledge that CDCR will need additional funding in 2022-23 for COVID-19 response. However, at the time of this analysis, the department was not able to provide sufficient information to justify the estimated COVID-19 direct response costs of $425 million in 2022-23. For example, the department has not provided projections of the number of inmates and employees requiring tests, costs per tests, or the amount of expected overtime that led to these projections. Also, given that current research suggests that COVID-19 is not commonly spread through surfaces, it is unclear why the department needs additional funding related to cleaning. Absent this information, it is difficult for the Legislature to adequately determine whether the level of resources requested is appropriate.

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**Figure 2**  
**2021-22 Funding for CDCR COVID-19 Response**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statewide testing</td>
<td>$198,440,000</td>
</tr>
<tr>
<td>Temporary suspension of prison intake</td>
<td>97,534,000</td>
</tr>
<tr>
<td>State response operations&lt;sup&gt;a&lt;/sup&gt;</td>
<td>82,767,000</td>
</tr>
<tr>
<td>Hospital and medical surge</td>
<td>29,245,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$407,986,000</strong></td>
</tr>
</tbody>
</table>

<sup>a</sup> Includes custody overtime and cleaning.

CDCR = California Department of Corrections and Rehabilitation.

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**Figure 3**  
**Proposed Level of 2022-23 Funding for CDCR COVID-19 Response**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statewide testing</td>
<td>$380,109,000</td>
</tr>
<tr>
<td>State response operations&lt;sup&gt;a&lt;/sup&gt;</td>
<td>32,154,000</td>
</tr>
<tr>
<td>Hospital and medical surge</td>
<td>10,905,000</td>
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<tr>
<td>Vaccine distribution and administration</td>
<td>1,501,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$424,669,000</strong></td>
</tr>
</tbody>
</table>

<sup>a</sup> Includes custody overtime and cleaning.

CDCR = California Department of Corrections and Rehabilitation.
Proposal Likely Will Need to Be Revised.
As discussed earlier in this brief, the projection of the inmate population in 2022-23 is likely to be revised downward at the May Revision due to prison admissions being lower than expected in the early part of this year and the need to account for new sentencing changes that will reduce the population. While such a decline in the projected inmate population could result in less COVID-19 response costs than currently assumed in the Governor’s budget for 2022-23 (for example, fewer inmates requiring testing), it is also possible that changes in pandemic conditions—such as the emergence of a new variant—could require more resources than currently proposed. Accordingly, it is likely that the Governor’s proposal will need to be revised in the spring based on updated data.

Recommendation
Direct CDCR to Submit Revised Proposal With Adequate Justification. We recommend that the Legislature withhold action on the proposed resources for CDCR’s 2022-23 COVID-19 response and direct the department to submit a revised proposal at the May Revision. The revised proposal should include adequate justification for the identified expenditures (such as estimates of the number of staff and inmates needing testing and personal protective equipment) and account for revised projections of the inmate population and any changes in pandemic conditions.

INTEGRATED SUBSTANCE USE DISORDER TREATMENT PROGRAM (ISUDTP) EXPANSION

Background
ISUDTP Established in 2019-20. The 2019-20 Budget Act provided $71 million from the General Fund and 280 positions (increasing to $165 million and 431 position in 2021-22 and ongoing) for CDCR to implement ISUDTP. When fully implemented, the program is intended to provide a continuum of care to inmates to address their substance use disorder (SUD) treatment and other rehabilitative needs. To accomplish this, as we discuss in more detail below, ISUDTP changed the way CDCR assesses inmates’ need for SUD treatment, provides SUD treatment and rehabilitation programs, and conducts the inmate release planning process.

At the time ISUDTP was established, CDCR indicated that its goal was to make the program available to all inmates in need of treatment upon full implementation. In its current phase of implementation, ISUDTP targets inmates who (1) are entering prison having started a form of SUD treatment known Medication Assisted Treatment (MAT), (2) have a history of SUD-related hospitalizations or overdoses, or (3) are within 15 to 18 months of release from prison. The level of resources initially provided in the 2019-20 budget for this phase of the implementation was based on the estimated number inmates in this target population. However, the overall level of resources has generally not been adjusted each year since then to account for changes in the target population.

ISUDTP Changed Process for Assessing Need for SUD Treatment. Prior to ISUDTP, CDCR generally assigned inmates to SUD treatment based on whether they had a “criminogenic” need for the program—meaning the inmate’s SUD could increase their likelihood of recidivating (committing a future crime) if unaddressed through rehabilitation programs. In contrast, ISUDTP is designed to transform SUD treatment from being structured as a rehabilitation program intended to reduce recidivism into a medical program intended to reduce SUD-related deaths, emergencies, and hospitalizations. Accordingly, inmates who are part of ISUDTP are assigned to SUD treatment based on whether they are assessed to have a medical need for such treatment. To identify a medical need for SUD treatment, health care staff screen inmates for SUD with the National Institute on Drug Abuse (NIDA) Quick Screen. The NIDA Quick Screen consists of a series of scored questions about prior substance use. The total points accrue indicate whether a treatment plan needs to be developed to address an inmate’s need.
Treatment plans are developed utilizing the American Society of Addiction Medicine (ASAM) Criteria. The ASAM Criteria is a diagnostic tool that allows clinicians to assess various dimensions—such as the presence of other related medical and behavioral health conditions—that research has found can impact the effectiveness of SUD treatment types. By using the ASAM Criteria, medical staff are able to assess what treatment options are most appropriate for each patient.

**ISUDTP Modified Existing Cognitive Behavioral Treatment (CBT) Programs.**

CBT programs are designed to help individuals change negative patterns of behavior. For example, the CBT programs CDCR offers as part of SUD treatment are intended to help individuals identify and adjust their thought processes regarding substance use to avoid future use. In addition to CBT programs designed for SUD treatment, the department offers CBT programs designed to address rehabilitative needs such as criminal thinking and anger management. As part of ISUDTP, CDCR revised and modified CBT programs in ways intended to better address inmates’ SUD treatment and rehabilitative needs. For example, the amount of SUD treatment inmates in ISUDTP receive through CBT programs is based on their level of medical need. In addition, the department began requiring the contractors who deliver CBT programs to use uniform, evidence-based curricula. CDCR also began requiring that counselors delivering CBT programs be certified Alcohol and Other Drug counselors, a requirement that was often waived before ISUDTP was implemented.

**ISUDTP Expanded Availability of MAT.**

People who are addicted to certain substances (such as opioids or alcohol) can develop a chemical dependency. This can result in strong physical cravings, withdrawal that interferes with treatment, and/or medical complications. MAT is intended to combine SUD treatment services (such as CBT) with medications designed to reduce the likelihood of inmates relapsing while undergoing SUD treatment. Prior to 2019-20, CDCR had operated MAT pilot programs at three prisons. Under ISUDTP, MAT was made available at all prisons for inmates involved in the program.

**ISUDTP Changed Release Planning Process.**

As part of ISUDTP, CDCR has taken steps to modify the release planning process in order to better connect inmates to programs in the community based on their assessed need. For example, for inmates in MAT near their release date, a multidisciplinary team—including nursing staff and social workers—help ensure treatment continues after their release, such as by scheduling and arranging transportation to initial health appointments, securing records, and coordinating with service providers in the community.

**Governor’s Proposal Expands and Modifies ISUDTP.**

The Governor proposes $126.6 million General Fund and 310 positions in 2022-23 (increasing to $163 million and 418 positions annually in 2023-24) to expand and modify ISUDTP in four key ways. First, the proposal extends assessment to all inmates, and—when necessary—treatment and release planning services, as originally intended by CDCR when the program was established. Second, the proposal adds to the types of treatment available through ISUDTP. Specifically, it would provide a new aftercare program to inmates who have completed treatment but remain incarcerated and additional programs for inmates who are not improving or are worsening following treatment. Third, the proposal makes various modifications to existing ISUDTP services. For example, it would shorten from 12 months to 9 months the duration of certain CBT programs to allow the department to serve more inmates. Finally, the department plans to modify the way it assesses inmates for SUD treatment. For example, in order to assess inmates more rapidly, the department plans to use the ASAM Co-Triage—a condensed version of the full ASAM diagnostic tool currently used. According to the administration, it plans to adjust the level of resources for ISUDTP annually based on changes in the inmate population beginning in 2023-24.
Assessment

Proposed Expansion and Modifications Merit Consideration. We find that the Governor’s proposal to expand ISUDTP to the entire inmate population has merit. While the effectiveness of the program is not clear, initial data show that SUD-related deaths, emergencies, and hospitalizations have decreased since the program began. Specifically, the department reports that overdose-related deaths declined by 64 percent and overdose-related emergencies and hospitalizations declined by 27 percent.

We note that it is possible that other factors (such as fewer drugs entering the prisons due to pandemic-related restrictions on prison visiting) could have contributed to the reduction in overdose-related deaths, emergencies, and hospitalizations. The department intends to contract with the University of California to evaluate various aspects of ISUDTP in the future.

In addition, we find that the proposed modifications to the program merit consideration. For example, the new services the department plans to offer will be evidence-based and therefore likely to be effective if implemented as designed. Also, by shortening the duration of certain CBT programs and employing less time intensive ASAM assessment tools, the department would be able to serve more inmates at a lower cost than otherwise.

Level of Resources Requested Likely Too High. As discussed in detail earlier in this brief, the projection of the inmate population for 2022-23 as assumed in the Governor’s budget is likely to be revised downward at the May Revision. This is notable because the overall level of funding being requested for ISUDTP is closely connected to the size of the inmate population. For example, the department estimates it needs $114 million for medication and other materials based on its estimate that 25,445 inmates will require MAT. Similarly, estimates for the amount of resources necessary to assess inmates’ SUD treatment needs assume that 3,000 inmates will be admitted each month. Accordingly, to the extent the inmate population or admissions are lower than projected, it would reduce the level resources necessary for the program under the Governor’s proposal.

While the administration indicates it plans to adjust the resources for ISUDTP based on changes in the inmate population beginning in 2023-24, no adjustment is currently planned for 2022-23.

Various Factors Could Limit Ability to Expand ISUDTP. There are various factors that could limit the department’s ability to expand ISUDTP as proposed by the Governor. For example, it could take CDCR longer than anticipated to fill the requested 310 positions. We note that in 2020-21—one year after ISUDTP was implemented—169 of the 431 positions approved for the program in that year were vacant. (The department reports only 43 of the 431 positions are currently vacant.) To the extent there are similar difficulties in initially filling the requested positions, it would correspondingly reduce the level of funding needed for ISUDTP in the budget year.

In addition, to expand ISUDTP beyond those it is currently serving, it will be necessary for CDCR to identify adequate space within its facilities, such as classroom space for CBT programs, to accommodate all inmates in need of treatment. However, in recent years, CDCR has increasingly had difficulty having adequate classroom space. For example, last year, as part of its justification to provide inmates with laptops to facilitate remote participation in academic programs, the department noted the challenge of physical space limitations at the prisons due to a lack of sufficient classrooms. We note that the department has initiated an analysis of its space needs, which is currently in the process of being revised to account for the impacts of COVID-19-related restrictions (such as limits on the number of people who can occupy the same room). However, it is unclear when this analysis will be completed. Accordingly, it is questionable whether CDCR can accommodate the level of space necessary for the proposed expansion. To the extent that the department is unable to expand ISUDTP as envisioned by the Governor, the department would not utilize all of the proposed $126.6 million in 2022-23 for the program. Under the proposed budget, CDCR would have discretion on how to reallocate any unused ISUDTP funds, which could include funding programs and services outside of ISUDTP.
Recommendations

Direct CDCR to Revise the Proposal at the May Revision to Reflect Updated Population Projections. Given the possibility that the inmate population—and corresponding need for ISUDTP funding—may be lower than currently projected, we recommend the Legislature direct CDCR to provide a revised ISUDTP proposal at the May Revision that is adjusted to reflect updated projections of the inmate population.

Approve Provisional Budget Language Requiring Unspent ISUDTP Funds to Revert to the General Fund. To the extent the Legislature chooses to approve additional funding for ISUDTP, we recommend the approval of provisional budget language requiring that any budgeted funds not spent on the program revert to the General Fund. This would help facilitate legislative oversight of the planned ISUDTP expansion and allow the Legislature to reallocate any unused funds towards its General Fund priorities.

Require CDCR to Provide Planned Assessment of ISUDTP. As previously mentioned, CDCR intends to contract with the University of California to evaluate various aspects of ISUDTP. We recommend that the Legislature require CDCR to provide the final evaluation report resulting from this effort. This would allow the Legislature to determine whether ISUDTP is effectively achieving its goals of reducing SUD-related deaths, emergencies, and hospitalizations.

CALIFORNIA PRISON INDUSTRY AUTHORITY (CALPIA) JANITORIAL EXPANSION

Background

CalPIA Provides Goods and Services to State Departments. CalPIA is a semiautonomous state agency that provides work assignments and vocational training in a range of career fields to inmate workers and is funded primarily through the sale of the goods and services produced by these inmate workers. It is managed by the Prison Industry Board, which is composed of 11 members including the Secretary of CDCR, as well as several legislative and gubernatorial appointees. State law requires state agencies to purchase products and services offered by CalPIA whenever possible. Accordingly, the majority of goods and services produced by CalPIA are sold to state departments. CDCR is CalPIA’s largest customer, accounting for over two-thirds of all sales in 2020-21. In 2021-22, CalPIA expects to generate $248 million in revenue from the sale of its goods and services and spend $245 million to operate its programs.

CDCR Contracts With CalPIA to Clean Health Care Facilities. The Healthcare Facility Maintenance (HFM) program within CalPIA was initiated in 2013 on a pilot basis to clean selected inmate health care facilities. As part of the 2014-15 budget, $15 million in ongoing General Fund support was provided to CDCR to expand the program to health care facilities at all prisons statewide. Through the HFM program, CalPIA provides cleaning supplies, trains inmate custodians to clean health care facilities, and provides oversight and auditing services. The scope and funding of the HFM program has expanded since 2014-15 (such as due to the construction of new health care facilities). The 2021-22 budget includes $59 million to support CDCR’s contract with CalPIA for the HFM program.

CalPIA Trains and Pays Inmate Workers to Clean Facilities. Cleaning health care facilities requires special care; a high standard of cleanliness; and continued sanitation of medical equipment, furniture, and spaces to eliminate the possibility of transmitting illnesses between patients. Accordingly, inmate custodians participating in the program receive the training necessary to properly clean health care facilities and obtain a health care facility cleaning certification. Inmate custodians are currently paid between $.35 and $1.00 per hour for their work. (We note that inmate workers employed by CDCR to carry out other work assignments were paid an average of $.36 per hour between February 2019 and February 2020, the most recent data readily available.)
CalPIA Also Employs Civil Service Custodians. In addition to inmate custodians, CalPIA employs state civil service staff in the custodian classification as part of the HFM program. These civil service custodians work alongside the inmate custodians. CalPIA also employs state civil service custodian supervisors to oversee both the civil service and inmate custodians. Based on recent data provided by CalPIA, the HFM program maintains an average of 1 custodian supervisor per 40 civil service and inmate custodians.

Civil service custodians and custodian supervisors in the HFM program are hired through the same process as other state-employed custodial staff. Although not required to, CalPIA generally adheres to various guidelines issued by the California Department of Human Resources (CalHR) related to custodian classifications. CalHR has initiated a project to provide new guidelines related to custodian classifications. For example, CalHR is currently in the process of developing new guidelines on the ratio of custodian supervisors to custodian staff. According to CalHR, the previous guidelines, which recommended 1 custodian supervisor to oversee between 8 and 23 custodians, have expired and are no longer in effect.

Inmate Health Care Facilities Have Been Well Maintained. According to CalPIA, internal and external audits have found that the HFM program has maintained an appropriate level of sanitation and cleanliness of CDCR’s health care facilities. According to CalPIA, neither the federal Receiver (who oversees the delivery of medical care in prisons) or the Office of the Inspector General (the agency responsible evaluating medical care in prisons) have raised concerns with the services provided by the HFM program.

Governor’s Proposal

Increases Funding for CDCR’s Contract With CalPIA. The Governor’s budget proposes an $8.6 million General Fund augmentation in 2022-23 (increasing to $10.5 million annually in 2023-24) to CDCR for the HFM program to service additional health care facilities thereby increasing funding for the program from $59 million to $67.6 million.

Increases Number of Custodian Supervisor Positions. The Governor’s budget also proposes 54 additional custodian supervisor positions in 2022-23 (increasing to 72 in 2023-24). The additional custodian supervisors would allow the HFM program to transition from an average ratio of 1 custodian supervisor per 40 civil service and inmate custodians to an average ratio of 1 custodian supervisor per 20 civil service and inmate custodians by 2023-24. According to CalPIA, additional custodian supervisors are necessary to (1) oversee the services in the additional health care facilities that the HFM program would service under the Governor’s proposal and (2) adhere with the guidelines previously issued by CalHR—and now expired—on the ratios of supervisors to custodians. In addition, CalPIA indicates that an insufficient number of custodian supervisors has led to custodian supervisors not properly keeping inventory, not providing timely evaluations to custodians, not ensuring that the frequency of sanitation is reviewed daily, and allowing over-fraternization between civil service and inmate custodians.

Assessment

Expansion Reasonable, but Additional Supervisors Appear Unnecessary. Given the quality of the services provided by HFM to date, we find the proposal to expand the contract to include additional health care facilities reasonable. However, the proposal to change the ratio of custodian supervisors to civil service and inmate custodians appears unnecessary. While CalPIA indicates that the custodian supervisors are necessary to address various problems they have identified (such as providing timely evaluations), the HFM program has been able to provide quality service without these additional positions. Accordingly, it appears that these problems are not significant enough to impact the quality of service provided by HFM. While we acknowledge that these problems could impact the program in other ways, CalPIA has not provided evidence that this is the case, including the extent to which the additional custodian supervisors proposed would in fact alleviate such impacts. For example, it possible that other actions—such as additional training—would address the identified problems in a more effective and efficient manner.
Lack of Detail on Break Out of Proposed Resources. We note that, at the time this analysis was being prepared, CalPIA was unable to provide information on how much of the requested resources would support the expansion of the HFM program into additional health care facilities versus changing the ratio of custodian supervisors to civil service and inmate custodians. (Based on the limited data available, we estimate that several million dollars of the requested funding is related to changing the supervisor to staff ratio.)

Recommendation

Approve Funding Associated With Expansion, Reject Funding to Change Supervisor to Staff Ratio. In view of the above, we recommend that the Legislature only approve the funding necessary for the HFM program to expand into new health care facilities and reject the funding necessary to change the ratio of custodian supervisors to civil service and inmate custodians. Additionally, we recommend that the Legislature direct CalPIA to report the amount of the requested funding associated with changing the custodian supervisor ratio separately. This would help the Legislature determine how much to reduce CDCR’s budget in accordance with our recommendation.

REDACTION OF SENSITIVE INFORMATION FROM RECORDS

Background

CDCR Reports Growing Redaction Workload. CDCR holds various types of records—including e-mails, personnel files, video, and audio recordings—which it may be required to release under various circumstances, such as pursuant to the California Public Records Act (PRA) or due to litigation. Before such records can be released, sensitive information—such as names of witnesses or individuals’ medical information—must be redacted from the records. CDCR reports that the number and complexity of requests requiring redaction has grown in recent years, driven primarily by two factors:

• Expansion of Types of Records Subject to PRA. Chapter 988 of 2018 (SB 1421, Skinner) made correctional staff personnel records subject to PRA if they pertain to certain officer-involved incidents, including use of force resulting in death or great bodily injury. Chapter 402 of 2021 (SB 16, Skinner) further expanded the types of officer personnel records subject to PRA. This includes records related to sustained findings of unreasonable or excessive force, regardless of whether it resulted in death or great bodily injury.

• Expansion of Cameras in Prisons. In recent years, CDCR has deployed fixed audio video surveillance systems and body-worn cameras on officers at a growing number of prisons. All video and audio recordings are stored for a minimum of 90 days but are stored for longer under certain circumstances, such as if they become evidence in an investigation into staff misconduct. These stored recordings have increased the volume of material that CDCR must redact in the event of a PRA request or litigation.

Responsibility for redaction is primarily divided between CDCR’s Office of Legal Affairs (OLA) and Division of Adult Institutions (DAI), which is responsible for operating prisons. Specifically, OLA is responsible for managing PRA requests pursuant to Chapters 988 and 402 and DAI is responsible for managing other PRA requests as well as litigation-related requests.

Recent Resources Provided for Redaction Workload. The 2019-20 Budget Act provided OLA with about $1.4 million and 9.3 two-year, limited-term positions to complete an initial backlog of redaction workload associated with Chapter 988.
In addition, the 2021-22 Budget Act provided OLA with about $500,000 and four positions to handle Chapter 988 workload on an ongoing basis. In addition, the department reports that it is in the process of implementing software that it expects to greatly improve the efficiency of redaction work throughout the department.

**Governor’s Proposal**

**Additional Resources for Redaction Workload.** The Governor’s budget for 2022-23 proposes a total of 21.6 new positions and a $2.8 million ongoing General Fund augmentation for CDCR to perform redaction workload. In addition, the department proposes to redirect existing resources—$883,000 and five positions—from its Contract Beds Unit to support redaction workload. (According to the department, these resources are no longer needed in the Contract Bed Unit due to the recent removal of the remaining inmates housed in contract facilities.) This redirection would result in a total of $3.7 million and 26.6 positions in additional resources available for redaction. CDCR proposes to use these resources to address the following workload:

- **New Redaction Workload Created by Chapter 402 ($1.1 Million).** Under the Governor’s proposal, OLA would receive 7.6 positions and $1.1 million to handle ongoing workload resulting from the implementation of Chapter 402.

- **Other Redaction Workload ($2.6 Million).** With the expansion of cameras in prisons, CDCR reports that PRA requests have increased—nearly tripling from 134 in 2020 to 473 in just the first half of 2021—and are expected to continue to increase. To address this increased workload, CDCR has temporarily redirected existing staff. However, the department reports that these redirections are not sustainable because they have caused delays in other important workload, such as audits of corrective action plans to ensure compliance with the Americans with Disabilities Act. Under the Governor’s budget, DAI would receive a total of 19 positions and $2.6 million to handle this workload on an ongoing basis. This would allow existing staff to return to the workload they were redirected from.

**Assessment**

**Need for Ongoing Resources Unclear.** We find that the level of resources requested for redaction workload appear reasonable in the near term. However, because CDCR is currently implementing software that it expects to significantly improve the efficiency of redaction work, it is possible that the department will not need all of the requested resources on an ongoing basis.

**Recommendation**

**Approve Resources on Limited-Term Basis.** Given that CDCR’s ongoing need for the requested resources for redaction is unclear, we recommend the Legislature approve the proposed positions and funding on a two-year, limited-term basis (rather than on an ongoing basis as proposed by the Governor). After CDCR has fully implemented the new redaction software, its ongoing resource needs should become clearer. The administration can submit a request for ongoing resources for legislative consideration as part of the 2024-25 budget process.

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**PRISON BACHELOR’S DEGREE PROGRAM EXPANSION**

**Background**

**Most Prisons Offer Associate’s Degree Programs.** Community college classes are available at 33 out of 34 state prisons for inmates who have completed their high school graduation requirement or equivalency. (The only prison that does not offer such courses is the California Health Care Facility as the majority of the inmates there have health conditions that make it difficult to attend college courses consistently.) Inmates with a high school degree or equivalent also generally have access to college-level correspondence
courses. In correspondence courses, inmates receive their lessons and assignments in packets that are delivered through the mail. Through in-person and correspondence courses, many inmates obtain associate’s degrees. CDCR reports that statewide about 14,000 inmates were enrolled in some sort of college-level course and 1,500 inmates held an associate’s degree (either earned while in prison or before entering prison) as of July 2021.

**Five Prisons Have California State University (CSU) Bachelor’s Degree Programs.** In order to allow inmates with associate’s degrees to receive bachelor’s degrees, several CSU campuses have begun offering in-person bachelor’s degree courses at neighboring prisons to inmates who satisfy the minimum requirements necessary for admission. CSU Los Angeles (CSULA) started offering courses in 2016 at California State Prison, Los Angeles (LAC) and became the first university through its Prison Graduation Initiative to graduate 25 inmates with a Communications bachelor’s degree in the fall of 2021. Within the last two years, four additional state prisons began offering in-person bachelor’s degree courses through the CSU system: Folsom State Prison and Mule Creek State Prison (through CSU Sacramento) and Central California Women’s Facility and Valley State Prison (through CSU Fresno).

**Several Programs Were Established Without Dedicated Funding.** Four of the five existing in-prison bachelor’s degree programs were established without dedicated funding being provided directly through the state budget. Instead, CDCR used alternative funding sources to establish the programs. For example, the CSULA program—the first program to be established—was a recipient of a philanthropic grant and obtained federal designation as a Second Chance Pell Institution. As a designated Second Chance Pell Institution, CSULA was able to receive federal funds to support the program.

Two years ago, as part of his January budget proposal for 2020-21, the Governor proposed General Fund resources to expand bachelor’s degree programs to additional prisons modeled on the CSULA program offered at LAC. However, the proposal was later withdrawn due to the expected fiscal impact of the pandemic. Despite this, CDCR reports that it has established bachelor’s degree programs at three additional prisons since the original proposal was withdrawn by using existing funding in its budget associated with vacant positions. (When positions approved in the budget go unfilled, the funding received by departments associated with the positions—known as vacant position funding—is often redirected by departments for other purposes.) Accordingly, the state did not provide dedicated funds to establish these three bachelor’s degree programs. We note, however, that the 2021-22 budget provided $13.7 million General Fund (decreasing to $3 million in 2023-24 and ongoing) to expand rehabilitation programs available at Valley State Prison in Chowchilla, including establishing a bachelor’s degree program.

**Governor’s Proposal**

The Governor proposes $5 million General Fund (decreasing to $4.7 million in 2024-25 and ongoing) and 15 positions to maintain and expand the number of prisons offering bachelor’s degree programs. Specifically, the resources would be used to maintain programs at the four prisons that do not currently have dedicated state funding for bachelor’s degree programs. According to the department, this is because the funding supporting those programs will no longer be available beginning in 2024-25 (for the CSULA program) and 2022-23 (for the three subsequently established programs). In addition, the funding would be used to establish new bachelor’s degree programs at three additional prisons that would be modeled on the CSULA program.

The proposal includes funding for administrative support positions and a customized database subscription for inmates to access scholarly journal articles. The proposal assumes federal funds would be accessible to most participating inmates and estimates that participants will be enrolled on a full-time basis at a cost of about $10,000 per inmate. When fully implemented, the funding would allow CDCR to serve 420 inmates annually, with 180 of those inmates being served by newly established programs.
Assessment

Expanding Higher Education Is Promising...
The Governor’s proposal to expand access to higher education opportunities is promising because various studies show that higher education—when well designed and implemented effectively—reduces the number of offenders who recidivate (or reoffend) and that the resulting correctional savings can more than offset program costs. For example, a study from the Urban Institute found that in three states recidivism rates were lower for inmates who participated in higher education programs, some of which included bachelor’s degree programs (after accounting for several factors). In addition, the proposal could increase the number of inmates who obtain sentencing credits for earning bachelor’s degrees, which would create state savings from reduced prison sentences.

...But Unclear Whether Level of Funding Requested Is Necessary. While we find that the proposal is promising, the department has not provided information on why the funding currently supporting four of the existing bachelor’s degree programs will no longer be available. For example, it is unclear why the programs supported with vacant position funding will now require dedicated funds to continue to operate. This is because the department has not been able to explain:

(1) how much funding from vacant positions was used to support the programs; (2) what the vacant positions were intended for; (3) why the positions were vacant; (4) why the funding from the vacant positions will no longer be available (including what the funding will now be used for); and (5) what the operational impacts would be if the Legislature redirected the vacant position funding for other purposes, such as expanding bachelor’s degree programs. Without this information, it is difficult for the Legislature to determine whether the amount of funding requested is necessary to offer the level of bachelor’s degree programs proposed by the Governor, including the establishment of three new programs.

Recommendation

Withhold Action Until the Department Can Provide Information on Current Program Funding. We recommend that the Legislature withhold action on the Governor’s proposal to maintain and expand the number of prisons offering bachelor’s degree programs, as well as direct the administration to provide information, no later than April 1, 2022, on why the funding currently supporting four of the five existing bachelor’s degree programs will no longer be available in 2022-23. This information would allow the Legislature to determine what level of state funding is necessary to the extent it wants to maintain and/or expand bachelor’s degree programs for inmates.
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This report was prepared by Caitlin O’Neil and Orlando Sanchez Zavala, and reviewed by Drew Soderborg and Anthony Simbol. The Legislative Analyst’s Office (LAO) is a nonpartisan office that provides fiscal and policy information and advice to the Legislature.

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