What is the Receivership?

In 2001, a federal class-action lawsuit alleged that the dire state of medical care in California state prisons violated the 8th amendment of the U.S. Constitution, which prohibits cruel and unusual punishment. In 2002, the State settled the lawsuit by agreeing to reform the system. After several years of little progress, the court removed control of prison medical care from the State and appointed a federal Receiver to oversee the reform process. The receiver’s job is to bring the level of medical care in California prisons to a standard which no longer violates the U.S. Constitution. Once that goal is accomplished and sustainability is ensured, the court will return control of prison medical care to the State and the Receivership will end.

The Receiver is responsible for:

- Providing health care to 135,913 inmates (93% male, 7% female).
- Delivering health care at 34 adult institutions in California.
- Overseeing more than 7,000 California prison health care positions, including doctors, nurses, pharmacists, and administrative staff.

Thousands of inmates are released into their communities each month after completing their sentence or achieving parole. If they carry a disease because of an untreated medical or mental health condition, law-abiding members of the general public may be affected.

### Receivership Timeline

- **August 20, 2001** (Plata v. Davis/Schwarzenegger) Class action lawsuit on prison health care neglect brought against State of California.
- **October 3, 2005** Federal Court establishes Receivership to oversee Prison Health Care.
- **January 23, 2008** Court Appoints J. Clark Kelso, replaces Robert Sillen as Receiver.
- **August 13, 2008** Receiver and State Officials go to Court over funding for construction projects.
- **June 13, 2002** State Reaches Settlement with Plaintiffs, promising to dramatically improve prison health care.
- **February 14, 2006** Federal Court Appoints Robert Sillen as Receiver.
- **June 3, 2010** Governor signs AB 552 (Solorio) which funds construction of integrated bed plan negotiated between Receiver and Administration.