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by Kathy Robertson, Senior Staff Writer
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FOLSOM PRISON CONSTRUCTION PROGRAM FOCUSES ON HEALTH CARE

Job-skills program aims to reduce recidivism, also may improve inmate access to health care

Like any business, the California Prison Industry Authority is responding to a changing market. Inmates at Folsom State Prison who build modular buildings have found a new product — in health care.

The program serves a dual purpose, helping inmates learn a trade and improving access to health care within California's prison system.

The first modular telemedicine building made at the prison's career training lab was shipped to Pelican Bay State Prison in Crescent City last week. Three mobile medical units, which will provide space for on-site medical exams but can be moved to meet changing needs, are ready for delivery to other correctional facilities.

Sales to state agencies of modular buildings built by the California Prison Authority during the construction boom once totaled \$30 million annually. State cutbacks reduced sales over the last three years to less than \$2 million.

Challenged to come up with a new product that would attract customers or risk losing training slots for about 100 inmates, PIA began looking at health care.

Medical care in the state's prisons was taken over by a federal receiver in 2005 after a federal class action alleged that care was so poor that it amounted to cruel and unusual punishment.



Reginald Gilmore works in the California Prison Industry Authority's shop at Folsom State Prison.

The initiative could help the federal receiver that oversees the prison health system cut costs and improve access, but the real goal is to give inmates jobs and training that will keep them from returning to prison once they are released, PIA spokesman Eric Reslock said.

The one-year recidivism rate for inmates who participate in PIA's Career Technical Education Program is 7 percent,

compared to more than 42 percent for the general prison population. The three-year recidivism rate for participants is about 11 percent, compared to more than 65 percent for corrections as a whole.

This difference saved the state general fund \$19.6 million in incarceration costs — about \$49,000 per inmate per year — between 2007 and 2011.

The telemedicine buildings are expected to reduce transportation and staff costs by providing state-of-the-art facilities that use video and other equipment to allow specialists to provide remote exams or psychiatric evaluations.

Designed for permanent installation, the buildings can be moved, if necessary.

“We have difficulty getting specialists,” said Nancy Kincaid, spokeswoman for federal receiver Clark Kelso. “Telemedicine reduces costs and improves access.”

Staff costs alone for transporting prisoners to medical appointments outside the prison system came to more than \$315,000 in 2011, she said. The figure doesn’t include fuel or vehicle costs.

The 960-square-foot telemedicine modular building delivered to Pelican Bay is considered a prototype, Kincaid said.

The prison system paid only \$6 to use the prototype building for five years. The estimated market value for that use is \$518,400, based on standard commercial office-lease rates in the surrounding area.

While PIA has been criticized in the past for high prices in a market where the state has bought their products, the proposed \$163 per-square-foot installed cost estimate “seems low,” said Tom Rush, manager of construction and design at the UC Davis Medical Center, a leader in telemedicine.

“We build modular-type buildings, but they are quite sophisticated and intended for permanent location,” Rush said. The big cost for telemedicine is the equipment itself, he added.

Rush said he was unaware of any company in the private sector that builds similar buildings.

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