

**CALIFORNIA DEPARTMENT OF  
CORRECTIONS AND REHABILITATION**

**Infrastructure Master Plan**

**MAY 2026**



**CALIFORNIA DEPARTMENT OF CORRECTIONS AND  
REHABILITATION**

**Infrastructure Master Plan**

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## Table of Contents

<b>Executive Summary .....</b>	<b>1</b>
<b>Introduction .....</b>	<b>2</b>
<b>Overview of CDCR .....</b>	<b>5</b>
<b>State of Existing Infrastructure .....</b>	<b>9</b>
<b>Strategic Plan .....</b>	<b>17</b>
<b>Five Year Capital Plan .....</b>	<b>20</b>
<b>Next Steps .....</b>	<b>21</b>

## Executive Summary

The California Department of Corrections and Rehabilitation (CDCR) has developed an adaptive Infrastructure Master Plan (Plan) to align department infrastructure with modern correctional requirements. This report presents the Department's analysis and recommendations to achieve that alignment.

**Changes to departmental mission and prison population needs necessitate a revamped approach.**

At the time of construction, most of CDCR's prisons were built for containment without significant consideration for comfort, accessibility, or rehabilitation. As the state has moved to improve the delivery of health care services, rehabilitative programming, and support the successful reentry of incarcerated individuals to the community, the department's infrastructure has been a barrier to operational effectiveness. Legislation and litigation have also resulted in significant changes to the system and pressure for changes related to health care, accessibility, conditions of confinement, and mental health.

**Infrastructure is aging, at risk of failure, and misaligned to department needs.** Much of the department's existing infrastructure has reached the end of its useful life, resulting in increased maintenance demands, operational inefficiencies, and systems failures. No facilities have recently been built or renovated to reflect the needs of evidence-based best practices in corrections; only components of some facilities align with modern corrections practices.

**CDCR has embarked on a strategic transformation of the correctional environment.** The department has undertaken a historic effort to pivot from a traditional punitive model toward a rehabilitative framework which is based in normalization, progression, and dynamic security. These principles aim to bring life in prison as close as possible to life outside and improve relationships between staff and the incarcerated to create safer, more effective prisons. CDCR has been undergoing a transformative shift in its correctional practices to normalize the correctional environment for the purposes of fostering rehabilitation, improving safety, and focusing on the health and well-being of both incarcerated people and staff.

**Significant investment in infrastructure is necessary to achieve the department's modern objectives.** The department has developed a plan to invest in significant infrastructure repair and replacement. This plan presents a pathway from legacy facilities to modern campuses which provide improved conditions of confinement and are adaptable to evolving population health and wellness needs.

## Introduction

CDCR's Facility Planning, Construction and Management Division (FPCM) developed the Infrastructure Master Plan (Plan) as a high-level, comprehensive assessment of the current institutional infrastructure, as well as to determine the appropriate long-term strategy for the Department's infrastructure and operational needs moving forward. The adaptive Plan that follows will serve as a strategic roadmap for the development and implementation of evolving correctional goals, to meet the needs of both incarcerated people and staff. The Plan is meant to be a dynamic guide to an ever-changing environment, revisited approximately every five years to assess progress and realign efforts as the Department evolves.

### Impetus

As of April 2026, the department operates 31 state prisons across 41 million square feet of buildings on over 21,000 acres of land. On average, those facilities are 50 years old; more than a third of the institutions were constructed between 1852 and 1963. Institutions that were built during the Gold Rush, prior to the establishment of many of the communities they serve, are being pressed to meet modern infrastructure and operational standards for which they were not built. Prisons built during the 1980s prison boom also suffer from inadequate design. The 1980s prison construction program was aimed at increasing capacity to address Three Strikes legislation with a focus on housing and security. Little thought was given to building adequate treatment and programming space, amplifying the struggle to adapt to modern demands. In the past several decades, significant changes in department operations and expectations have occurred, including:

- National requirements and opportunities such as the Americans with Disabilities Act (ADA), the Prison Rape Elimination Act, Medi-Cal eligibility changes, and the availability of federal Pell grants to incarcerated students;
- California's 2011 public safety realignment;
- Class action litigation related to health care services, mental health, and disability access, among others;
- Increased programming access by expanding rehabilitative programs in the last 20 years to offer more than 100,000 rehabilitative slots in an array of programs, including academic, career technical education and training, in-prison and transitional reentry, and community reentry services. Incarcerated people can earn Milestone Completion Credits and/or Educational Merit Credits through the programming offered;
- Changes to security operations through litigation and legislation, such as the use of restricted housing, gang identification, or others;
- Expansion of reentry programming for individuals both pre- and post-release;
- Significant reduction in the in-prison population;
- Changes in the prison population, including an increase in the aging population, the disabled population, or those with serious mental health conditions;
- Closure of the Division of Juvenile Justice;
- Development and evolution of indoor heating and cooling standards; and
- Closure of all contracted and several state-owned and operated prisons.

The Plan is driven by the need to address a variety of internal and external factors. Much of the department's existing infrastructure has reached the end of its useful life, resulting in increased maintenance demands, operational inefficiencies, and systems failures. Many of the institutions' primary housing, program, and support facilities have reached or exceeded their intended useful life. From a systemwide perspective, the institution's original design capacity, configuration, and building typologies reflect CDCR's former mission, which prioritized secure containment and static security. Efforts to proactively mitigate potential litigation, or respond to active litigation, associated with accessibility improvements, indoor heat conditions, fire and life safety systems, and mental health treatment have also increased. Aging facilities present heightened challenges due to inherent design limitations that are difficult and costly to correct through incremental upgrades alone.

With a reduced, shifting, and aging incarcerated demographic to consider, and a commitment to normalization for both the incarcerated and staff, there is a need to modernize facilities and improve conditions. The current asset portfolio was largely developed for higher population levels, younger demographics, and significantly fewer support and rehabilitative services, resulting in a disparity between available capacity, housing layouts, and present-day needs. In contrast, newer correctional facility designs incorporate flexible housing, accessible design, enhanced clinical and program spaces, and improved staff support environments aligned with contemporary correctional practices.

At the time of construction, most of California's prisons were designed for one person per cell or dorm bunk. During periods of overcrowding, the Department accommodated significantly larger populations by prioritizing the use of space for housing, rather than for rehabilitation, services, and recreation. As the state has moved to improve the delivery of health care services, the provision of rehabilitative programs, and the successful reentry of incarcerated individuals to the community, the appropriate operational environment is a critical component of CDCR's ability to provide meaningful and diverse rehabilitative opportunities to people in custody and to fostering a correctional system focused on the wellness and professional development of staff.

In prior decades, CDCR had programming slots for less than one in three incarcerated individuals; now, systemwide the Department has enough programming slots for every person to enroll in at least one program. When many prisons were designed, they did not account for this significant increase in programming opportunities, nor did they consider the operational challenges with providing these services.

Additionally, compared to prior decades, the current CDCR population is older and has more complex needs. These changes in the population have created unique challenges when it comes to operational capacity. More people require medication, which can result in long medication lines. Many individuals have specific needs (such as a lower bunk) that can limit the usability of certain types of cells or beds. Individuals may have difficulty reaching certain areas because of physical disabilities (such as housing units at the top of a hill) or may be limited in the areas of the state in which they can live (for example, due to *Coccidiomycosis* risk). These real-life factors can result in the need for a variety of space/capacity statewide to accommodate each person's unique circumstances and needs.

Compounding the challenges described above is a fundamental shift in CDCR’s organizational mission and goals to incorporate normative principles, reflected in an increased focus on reentry and associated focus on programming and treatment. System changes also include addressing a post-pandemic reduced and aging population, including a shift to a behavioral-based incarceration model and increased use of dynamic security. These changes further reinforce the need for facilities that can support these efforts. The Plan provides a framework to transition institutions from aging, legacy facilities to modern campuses aligned with CDCR’s contemporary mission and long-term objectives.

## Process

Collaborating with an outside consultant, CDCR initiated a visioning session with CDCR leadership and key stakeholders in February 2025. Participants identified their shared goals and ambitions for the department over a 20-year time horizon, envisioning an identity for the department beyond current operational challenges. Beginning in April 2025, comprehensive site visits were conducted at all CDCR institutions to engage onsite stakeholders from all disciplines, identify operational impediments, and solicit ideas for operational and infrastructural changes. Relevant infrastructure and utilities data was aggregated to develop a portfolio-wide assessment of current infrastructure conditions.

The site walks were aimed at understanding operational and programmatic challenges and successes for both staff and the incarcerated, visually inventorying space constraints and physical plant deficiencies, and to learn more about each institution’s vision for CDCR.

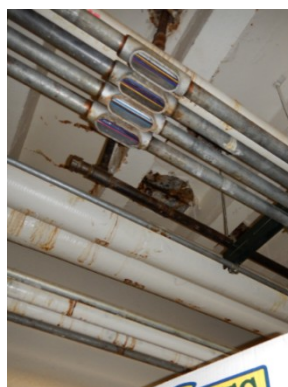
The focus of these site visits was to identify infrastructure, facility condition, and maintenance concerns. After processing the data gathered from interviews and visits, the most critical findings revolved around how decaying infrastructure and building utility systems impact not only the ability for the incarcerated to effectively participate in opportunities for rehabilitation, but how such conditions impact staff, external stakeholders, and ultimately, the greater community as well.

Leaking roofs in both programming and administrative spaces is a common occurrence. At one institution, mental health staff are compressed into one area of a building because part of the roof substantially leaks over a portion of staff workstations and offices. At another, the roof collapsed into a kitchen, impacting food service operations.

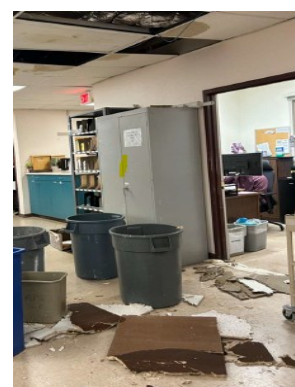
CMF – Program Space



CTF – Kitchen/Dining



NKSP – Records Department



At one institution, the lack of heating/cooling systems and proper building insulation in educational spaces greatly impacts the interior ambient temperature, making it either too cold or too hot to hold classes during certain parts of the year. At another location, to improve air circulation in housing unit cells, the incarcerated population will break exterior windows for ventilation and cooling relief. Obsolete and non-functional campus-wide fire alarm systems have forced institutions to provide 24-hour fire watch at a considerable financial expense and risk of staff burnout. Not only is it a detriment to how and when programs are operated, but deteriorated work environments and conditions also prohibit staff from effectively performing their jobs and feeling safe, secure, and satisfied in their work.

To ensure that all institution systems and utilities were identified and captured in the reporting, CDCR also surveyed every institution to assess the condition of every building, utility system, and element of sitework. The department's cost estimating consultant then identified unit replacement costs for each building and utility system, using standard correctional construction cost methods. Combining the condition assessment and replacement costs, the department developed an anticipated cost for replacement of the existing system within the next 20 years. Based on that analysis, the overall replacement costs for all systems at all institutions are roughly \$73 billion.

## Overview of CDCR

### **Departmental Mission and Responsibilities**

CDCR's vision is to enhance public safety and promote successful community reintegration through education, treatment, and active participation in rehabilitative and restorative justice programs. The Department's mission is to facilitate the successful reintegration of the individuals in the department's care back to their communities equipped with the tools to be drug-free, healthy, and employable members of society by providing education, treatment, rehabilitative, and restorative justice programs, all in a safe and humane environment.

The Department is responsible for the custody and care of adults convicted of specified felonies. CDCR provides rehabilitation programs, vocational training, education, and health care services to the individuals in its custody. As of April 2026, CDCR was responsible for roughly 89,700 incarcerated individuals. Most incarcerated individuals are housed in the state's 31 prisons, though approximately 1,250 individuals near the end of their sentences reside in community reentry facilities. The Department also supervises about 33,600 adults on state parole.

### **Organization**

CDCR traces its institutional lineage back over a century, evolving significantly over time in response to shifting penal philosophies, judicial mandates, and legislative reforms. The contemporary structure of the CDCR was established in July 2005 following a comprehensive reorganization initiated by Governor Arnold Schwarzenegger. Prior to this restructuring, the state's correctional system operated under the Youth and Adult Correctional Agency. The 2005 reform consolidated various fragmented boards and departments into a singular entity and deliberately appended "Rehabilitation" to its title, signaling a strategic policy shift from purely custody toward reducing

recidivism through education, vocational training, and substance use disorder treatment. This ideological pivot was partly driven by severe institutional overcrowding in the early 2000s, which precipitated extensive litigation and federal scrutiny over perceived systemic inadequacy of living conditions and programming.

Currently, CDCR's expansive institutional framework is structured into three primary functional domains, each overseen by an Undersecretary: Operations, Administration, and Health Care Services. The Operations branch forms the core of the department's custodial and rehabilitative mandate, encompassing the Division of Adult Institutions, which manages the secure housing of incarcerated people, as well as the Division of Adult Parole Operations (DAPO) and the Division of Rehabilitative Programs (DRP). The Administration branch facilitates the logistical, infrastructural, fiscal, and human resources required to maintain the vast departmental infrastructure. Concurrently, California Correctional Health Care Services (CCHCS) is tasked with providing medical, dental, and mental health care to the incarcerated population. Notably, owing to historical deficiencies that culminated in landmark federal litigation (*Plata v. Newsom* and *Coleman v. Newsom*), the delivery of medical care and mental health care, respectively, operate under the collaborative oversight of federally appointed Receivers.

As one of the largest correctional systems in the United States, CDCR employs roughly 50,000 staff and maintains an operating budget of approximately \$13.6 billion, drawn predominantly from the state's General Fund, with significant allocations dedicated to security and health care. When adjusted for inflation, however, that is an approximately 11 percent decrease in spending between 2006-07 and 2026-27.

Despite recent population declines driven by broader state sentencing reforms and demographic shifts, CDCR continues to navigate complex administrative challenges, including infrastructural modernization, ongoing litigation, and achieving rehabilitative outcomes within a constrained fiscal environment.

## **Population**

Between 1977 and 2006, the CDCR population increased nearly eightfold, peaking at over 173,000 people in custody in 2006. Since that time, various reforms have been enacted that have reduced CDCR population. In 2011, the Public Safety Realignment was enacted, which was a significant shift in California's correctional system by transferring responsibility for supervision of certain low-level felons from state prisons to county jails. Additionally, in 2016, California voters passed Proposition 57 which aimed at alleviating prison overcrowding by establishing parole considerations for non-violent offenders and allowing opportunities to earn credits for sentence reduction. These changes, along with the infectious control measures taken during the COVID-19 pandemic – such as the expedited release of individuals with 180 days or less remaining on their sentence, compassionate release, and pausing intake from county jails – have decreased the incarcerated population significantly.

This reduction has allowed CDCR to assess its capacity needs, while considering public safety, staff and community impacts, continuity of services and care for the incarcerated population, the ability

to recruit and retain workforce, and annual operating costs. This has led to the closure of several institutions and the deactivation of housing units and yards at multiple facilities.

The Department's population of approximately 89,700 is mostly male; more than 20 percent of the population is 55 years old or older, and more than 83 percent of the incarcerated population is in prison for crimes against persons. Since 2010, the share of incarcerated individuals aged 55 and older has grown from 7 percent to 21 percent, with a significant portion serving life terms. Aging adults in prison have more complex medical needs than those in the community and typically experience age-related decline in both mental and physical health about a decade earlier than non-incarcerated individuals. In addition to the increasing population of older individuals in CDCR, health care for this population is more costly and complex than care in the community and poses unique challenges because correctional structures complicate age-appropriate medical care practices.

The department is projecting the average daily prison population to be 87,600 in 2026-27, a decrease of about 2,000 people from its current level, as a result of various sentencing changes that have occurred in recent years. The state is required to limit its prison overcrowding to less than 137.5 of the design capacity of the system's prisons, creating a population cap of about 98,500 individuals that could be accommodated within the existing facilities.

## **Facilities**

By the end of 2026, CDCR will have 30 active adult male and female institutions, comprised of 28 male institutions and 2 female institutions, located along California's northern and southern borders and throughout the Central Valley, Central Coast, Bay Area, Sacramento Valley Region, and beyond. CDCR is the largest state agency footprint-wise, occupying over 41 million square feet on over 21,000 acres of land. CDCR has two historical institutions, San Quentin Rehabilitation Center (SQRC) and Folsom State Prison, both constructed in the 1850s and has another 10 institutions that collectively are part of the 12 Original Prisons due to their construction prior to the "New Prison Construction Program" building boom of the 1980s and 1990s. The older institutions are comprised of a variety of building styles and materials and have reached the end of the useful life of not only their infrastructure, utility, and building systems, but also their superstructures in general. CDCR has deactivated 44 housing units across various institutions over the last two years and closed three institutions in the last five years. CDCR closed Deuel Vocational Institution (DVI) in September 2021, California Correctional Center (CCC) in June 2023, and Chuckawalla Valley State Prison (CVSP) in November 2024. Additionally, CDCR has announced its intent to close the California Rehabilitation Center (CRC) by Fall 2026.

There are also 30 conservation (fire) camps that work with the California Department of Forestry and Fire Protection (CAL FIRE) and the Los Angeles County Fire Department throughout the state and are supported by Sierra Conservation Center (SCC) and the California Institution for Women.

CDCR prisons are 24-hour facilities responsible for the daily care of thousands of incarcerated individuals. These institutions rely on a wide range of infrastructure, such as industrial kitchens; laundry facilities; boilers; electrical generators; storm water distribution systems; fire alarm and suppression systems; water and wastewater treatment plants; and medical, mental health and

dental treatment space. Practically speaking, these institutions are miniature cities. Infrastructure failure – such as failed roofs, fire alarm systems, electrical systems, or wastewater systems – can pose significant health and safety risks to incarcerated population and staff. Institution infrastructure can also significantly impact the state’s ability to deliver services to the incarcerated population. The table below provides basic information about each CDCR prison, and additional detail on each facility can be found in Appendix 1.

**CDCR Institutions  
as of April 2026**

Institution Name	Year Activated	Square Footage	Design Capacity	Current Population
Avenal State Prison*	1987	1,670,880	2,424	3,840
Calipatria State Prison	1992	1,157,873	1,808	2,539
California Correctional Institution	1954	1,558,393	1,508	2,376
Central California Women's Facility	1990	864,468	1,986	2,178
Centinela State Prison	1993	1,158,274	2,308	3,229
California Health Care Facility, Stockton	2013	1,513,000	2,953	2,431
California Institution for Men*	1941	1,398,611	2,200	2,283
California Institution for Women	1952	601,596	1,281	1,124
California's Men's Colony	1954	1,421,718	2,613	2,140
California Medical Facility	1955	874,378	2,316	2,133
California State Prison, Corcoran	1988	1,760,224	3,114	2,618
Correctional Training Facility	1946	1,458,166	2,800	4,352
Folsom State Prison	1880	1,121,481	2,065	2,797
High Desert State Prison	1995	1,230,785	2,081	2,855
Ironwood State Prison	1994	1,125,271	2,208	3,481
Kern Valley State Prison	2005	1,441,786	2,448	3,325
California State Prison, Los Angeles County	1993	1,229,337	2,300	3,346
Mule Creek State Prison	1987	1,640,639	3,284	3,752
North Kern State Prison	1993	922,063	1,910	2,711
Pelican Bay State Prison	1989	1,219,660	1,804	1,734
Pleasant Valley State Prison	1994	1,172,052	2,308	3,208
R.J. Donovan Correctional Facility	1987	1,611,310	2,992	3,907
California State Prison, Sacramento	1986	1,337,271	1,828	2,219
California Substance Abuse Treatment Facility	1997	1,693,044	3,424	5,269
Sierra Conservation Center	1965	697,986	4,592	4,136
California State Prison, Solano*	1984	1,271,322	1,904	2,925
San Quentin Rehabilitation Center	1852	1,623,250	3,084	2,380
Salinas Valley State Prison	1996	1,322,596	2,452	2,332
Valley State Prison	1995	796,490	1,961	3,017
Wasco State Prison	1991	982,547	2,384	3,276
<b>TOTALS:</b>		<b>37,876,471</b>	<b>72,340</b>	<b>87,913</b>

\*Design capacity for these institutions reflect recent yard activations/deactivations

Note: California Rehabilitation Center is not included based on pending closure.

**Application of a Scandinavian Model of Corrections**

In 2023, CDCR initiated a historic effort to pivot toward a more modern rehabilitative framework. This evolution is rooted in the success of the Scandinavian Model, specifically the "Norwegian Exception."

As part of the department’s work, they drew upon the lessons of Scandinavian custodial systems, particularly the Norwegian Correctional Service. Norway’s transformation was born out of necessity. Until the 1990s, Norwegian correctional facilities were operated similarly to California facilities, and the country had a 70 percent recidivism rate. In the 1990s, however, Norway made significant

changes to its prison system, prioritizing rehabilitation and reentry. Recidivism in Norway is now approximately 20 percent. The Norwegian transformation was driven by three main principles:

- **Normality (The Principle of Continuity):** This principle dictates that the punishment of incarceration is the restriction of liberty itself; no other rights should be taken away unless necessary for security. In practice, this means creating environments that mimic the "outside" world. Incarcerated people continue to cook their own meals, wear their own clothes, and maintain a sense of personal responsibility, so that they do not lose the basic life skills required for a successful return to society.
- **Progression (The Seamless Reentry):** Rehabilitation is viewed as a ladder. As individuals move through their sentences, they gradually transition to lower-security environments—such as "open" prisons or halfway houses—before full release. This "step-down" approach ensures that the "cliff" between prison and the community is replaced by a bridge, reducing the shock of reentry that often leads to re-offending.
- **Dynamic Security (Safety through Relationship):** Unlike "static security" (walls, bars, and cameras), dynamic security relies on the daily, professional interactions between staff and incarcerated individuals. When officers eat with, talk to, and mentor those in their care, they can detect tension or potential conflict long before it escalates. This approach transforms the role of the correctional officer from solely a "guard" to also be considered a "resource", significantly reducing staff trauma and workplace violence.

California's adoption of these elements—often referred to as the California Model—is not a carbon copy of the Norwegian system, but a culturally adapted version. It recognizes that California's facilities are larger, more complex, and face unique issues. By incorporating Trauma-Informed Care and Peer Support in its model, CDCR is building on the Scandinavian foundation to address the specific needs of the California population.

The ultimate goal is a safer California: by treating incarcerated individuals as "neighbors-in-waiting," the state aims to ensure that when people leave prison, they return to their communities as stable, employed, and law-abiding citizens.

## State of Existing Infrastructure

### Infrastructure Funding

Funding to maintain, repair, and replace aging or faulty equipment and infrastructure at CDCR's facilities is managed by the department's FPCM Division. The department's annual budget includes \$26 million for maintenance and repairs, typically called Special Repair (SR). These are projects that, irrespective of cost, sustain the usability of a major system, building or facility at its designed level of service. The nature of all SR projects is considered preventive and avoids or minimizes the following: collateral damage to other systems or structures; increased demand for recurring maintenance resources and/or minor repairs; regulatory fines; energy consumption as new

equipment is more energy efficient than previous models; disruption of health care service space, rehabilitative program space, and other critical services such as kitchens; and the risk that housing units may become uninhabitable due to building system failures or site-wide infrastructure failures. SR project needs are typically extraordinary in scope, amount and/or occurrence and therefore the process of needs identification, prioritization, project development and funding allocation is managed centrally by CDCR through FPCM. SR funding is utilized for all project phases including pre-design studies, architectural and engineering design, and construction and inspection.

The Department's existing \$26 million SR funding baseline is inadequate and can only fund approximately 14 percent of emergent projects each year. However, existing funds must address both urgent new needs and backlogged critical projects, and at current funding levels CDCR is unable to address either effectively, while the backlog continues to grow. Currently, CDCR has a SR project funding request backlog exceeding \$1 billion, which is 38 times more than CDCR's current \$26 million annual baseline funding.

Planned projects must often be delayed from one fiscal year to the next due to changing priorities within a fiscal year. These changing priorities can either be caused by emergency projects resulting from infrastructure failures or storm damage, or by the need for facility improvements tied to policy changes. This is especially true for projects in the greater than \$1 million to \$2 million cost range, as that represents a significant allocation of limited SR resources.

In addition to SR funds, the department receives prison maintenance and plant operations funding and can request funding on an ad hoc basis for specific support or capital outlay projects. Prison maintenance and plant operations funding is the sole source of funds provided to CDCR for a wide variety of activities such as periodic maintenance and equipment replacement, planned and minor emergency repairs, and the purchase of parts and material supplies necessary for these functions. CDCR receives approximately \$70 million annually for prison maintenance for contracts required for specialized maintenance, repair, and rental services in case of equipment breakdown; required annual fees to regulatory agencies; and parts and materials necessary to provide for the planned level of repairs and equipment replacements during the fiscal year.

Additionally, since 2015, the Budget Acts have provided several one-time allocations for Deferred Maintenance (DM) which have allowed several critical projects to move forward. Since 2017, Budget Acts have also provided funding for roof replacements. These combined investments have allowed CDCR to make progress addressing priority areas such as mechanical systems; roads; roofs; fire alarm/suppression; security and alarm systems protecting incarcerated individuals, staff, and visitors; sitewide electrical systems; and increasing regulatory compliance related to air quality, water, storm water, and wastewater collection and distribution systems. CDCR has also received capital outlay appropriations for new construction projects to address a variety of needs including mental health treatment and housing facilities, educational space, treatment space, fire and life safety improvements, potable water treatment and storage, and heating and cooling. However, this one-time funding for repairs and modernization have been insufficient compared to the overall infrastructure repair and replacement backlog that exists in the department.

At current funding levels CDCR cannot plan and execute project development and funding effectively. Newly identified urgent issues and emergency needs drive previously unplanned projects and dominate project funding allocations. Funding for projects planned and scheduled to address known non-emergency issues and/or to fund backlogged needs is often redirected to emergencies or reprioritized as other urgent repair issues and needs for facility rehabilitation tied to policy changes emerge throughout the fiscal year.

Overall, investment in CDCR facilities has not kept pace with the infrastructural needs of its facilities. Industry averages for annual facility reinvestment for system renewal and replacement range from 1 to 4 percent of current replacement value. In a publication titled *Predicting Outcomes from Investments in Maintenance and Repair for Federal Facilities*, released in 2012, the National Research Council recommended a range of from 2 to 4 percent. CDCR's current rate of investment is less than either of these benchmarks. CDCR's current owned and managed facility portfolio represents approximately \$20 billion in current replacement value. CDCR's \$26 million annual SR budget represents 1/10th of one percent of that value.

To highlight this shortfall CDCR's portfolio includes approximately 30 million square feet of roofs. Commercial low-slope roofs are expected to last for approximately 15 to 20 years. With appropriate interim repairs, roofs can last up to 30 years. Based on a 30-year life, and roughly 30 million square feet, approximately 1,000,000 square feet of roofs will need to be replaced each year, requiring an estimated annual expenditure of \$40 million. However, absent any separate dedicated requests, CDCR is only provided with \$26 million each year to repair or replace all its aging systems, including roofs, roadways, plumbing and electrical systems and all other key infrastructure. CDCR's entire annual repair allocation plus additional funds would be needed just to replace roofs on a scheduled basis.

## **12 Prison Study**

In 2019, CDCR completed a systems level Facility Condition Assessment (FCA) of the department's original 12 prisons. The purpose was to evaluate the existing housing, program, and service buildings, and related infrastructure, of those locations, and to develop recommendations for repair, renovation, or replacement necessary to maintain the current level of operations for the foreseeable future. The major goal of the FCA was to understand the physical condition of the 12 original prisons. After the assessment was completed, the overall condition of each facility was represented through calculation of a Facility Condition Index (FCI). The results of that study found that all 12 prisons were in poor condition, with anticipated Facility Condition Indices (10-year FCIs) ranging between 35 and 63 percent and averaging 48 percent. In total, the study recommended \$11 billion of construction projects at the 12 institutions.

According to the report:

*"The 12 original prisons were constructed between the mid to late 1800's and the 1960's. Together, these prisons contain more than one-third of the total Design Capacity of CDCR's adult prison portfolio. Most of the infrastructure (i.e. buildings and utility systems) at these prisons date to the prisons' original construction. The physical plant layouts designed reflected both national and state correctional policies of the time. As the character of prison populations has changed*

over time, and reformation of correctional institutions has gained traction amongst correctional agencies including CDCR, the majority of these older institutions physical plants have not significantly changed...The existing academic and vocational program buildings at all of these locations largely reflect the program modalities of the period in which they were constructed, often requiring renovation/repair and upgrades (especially of electrical and telecommunications systems) in order to meet current program requirements. The healthcare spaces at these and other prisons also present challenges to meeting modern healthcare delivery models. CDCR's \$1 billion Healthcare Facility Improvement Project (HCFIP) is currently underway.

However, unlike the large-scale investment in improving healthcare spaces, a similar investment of that magnitude has not yet been made for aging facilities...Typically, the individual system and building components are functioning beyond their expected useful life."

The table below provides the Consultant's cost estimates for the total recommended projects at each of prisons that remain open, as well as a revised costing to show the Consultant's estimates in today's dollars, and further escalated costs to align with the Plan cost methodology. The final column provides CDCR's estimate for holistic repairs/replacements at each institution according to the Plan. This comparison demonstrates the identified institutional needs in the Plan are similar to the professional Consultant's estimated costs overall when comparing projects; however, it is important to note that costs identified for this Plan are comprehensive for each location for life-cycle replacements for all systems and structures, whereas, the costs identified for the 12-Prison Study were restricted to recommended projects at that point in time, with exclusion of newer facilities at certain institutions (such as CCI-Facilities A, B, and C).

**12 Prison Study Costing vs. CDCR Infrastructure Plan Costing**

12-Prison Study Findings/Costing			12-Prison Study Costing Adjusted to Match CDCR Infrastructure Plan Methodology	CDCR Infrastructure Plan Cost Estimates
Institution	Total Costs in 2020 for Repairs/Replacements*	Normalized to 2026 (March - CCCI: 10124)**		
California Correctional Institution	\$ 530,691,000	\$ 773,386,000	\$ 1,238,821,000	\$ 3,118,109,164
California Institution for Men	\$ 1,228,339,000	\$ 1,790,083,000	\$ 2,512,233,000	\$ 2,552,879,224
California Institution for Women	\$ 413,046,000	\$ 601,940,000	\$ 877,229,000	\$ 1,007,035,430
California Medical Facility	\$ 763,495,000	\$ 1,112,656,000	\$ 1,742,612,000	\$ 1,627,428,444
California Men's Colony	\$ 1,557,192,000	\$ 2,269,327,000	\$ 3,536,562,000	\$ 2,824,171,843
Correctional Training Facility	\$ 1,376,667,000	\$ 2,006,244,000	\$ 3,151,936,000	\$ 2,971,505,873
Folsom State Prison	\$ 799,570,000	\$ 1,165,229,000	\$ 1,814,105,000	\$ 2,123,913,487
San Quentin Rehabilitation Center	\$ 1,646,929,000	\$ 2,400,102,000	\$ 3,610,990,000	\$ 3,005,214,753
Sierra Conservation Center	\$ 504,418,000	\$ 735,098,000	\$ 1,169,288,000	\$ 1,770,571,666
<b>Totals:</b>	<b>\$ 8,820,347,000</b>	<b>\$ 12,854,065,000</b>	<b>\$ 19,653,776,000</b>	<b>\$ 21,000,829,885</b>
<b>Average/Institution:</b>	<b>\$ 980,039,000</b>	<b>\$ 1,428,229,000</b>	<b>\$ 2,183,753,000</b>	<b>\$ 2,333,426,000</b>

\*Repair/Replacement Cost in March 2020 (month Study was completed/estimated) - CCCI: 6947  
 \*\*Simple escalation to Start of Construction + Escalation to Midpoint @ 0.42% per month (equal to 5% annually).

**Current State of CDCR Infrastructure**

In the time since the 12 Prison Study, the fundamental conditions of the department's infrastructure have not significantly altered, other than continuing to age without significant maintenance, repair, or replacement. This conditioned aging of the infrastructure without investment places systems at risk of catastrophic failure. Additionally, while there has not been a similar study of the other

19 facilities, there are significant outstanding infrastructure needs at those facilities, and they also suffer from insufficient maintenance and repair funding.

To better understand the existing CDCR infrastructure, determine capital infrastructure investment repair and replacement priorities, and develop financial rough order of magnitude budgets without performing another time-consuming and invasive facility conditions assessment, the strategic master plan is relying on a relative analysis by plant operations staff of building systems, utilities, and infrastructure. While a full FCA is a helpful tool in identifying deficiencies and maintenance needs at the micro level, this analysis balances resource constraints and relies on first-hand staff knowledge and experience of the existing infrastructure conditions.

This approach relied on developing simplified conditions criteria and an assessment document that listed major systems for consideration. Leveraging institutional knowledge and experience, systems were assigned one of the following designations by local staff:

- Plus – Expected to exceed 20 years of operation
- Good – Generally well maintained
- Fair – Needs repairs, typical wear and tear
- Poor – Significant disrepair, not well maintained
- Failing – At risk of failure or unusable

Additionally, the 48 utility and infrastructure systems were further prioritized into the following categories:

- Critical impact – the loss of this system is due to a full shut down or catastrophic failure and has adverse effects on mission-critical operations such as securing the incarcerated population and access to licensed health.
- Major impact – the loss of this system could require modified program and prioritizing sequence of operations. Examples include electrical load shedding in emergency power situations, renting boilers, and limiting program due to an inoperable elevator.
- Minor impact – the loss of this system or disruption in services is inconvenient but not long-lasting. Examples include momentarily shifting to cell-side feeding if a dining room is unavailable or manning towers if the lethal electrified fence is down.

Weighting the systems and validating the data ensured an accurate assessment of the current condition of infrastructure at the institution level and appropriately accounted for the impact each system has on the critical operations of the prison, which can be seen in Appendix 2.

In addition to accounting for the state of existing infrastructure, the analysis also estimated the cost of necessary upgrades to existing systems, such as construction required to comply with the ADA and necessary upgrades of heating and cooling infrastructure.

Concurrent with re-baselining scores and priorities, estimators developed replacement costs by system and institution. This approach allowed utilities to be grouped together into projects across institutions (such as roofs or boiler replacements), or for projects to focus on several systems at a single institution. Lastly, a project summary document identified the projects anticipated to be

needed within 20 years and those post-20 years for all site utilities, sitework, and building systems. It further subdivided those estimates into five-year intervals for project funding and support. The table below provides a summary of that analysis by institution; the full analysis can be seen in Appendix 3.

### CDCR Infrastructure – Needs Assessment

Location	2026 - 2031	2031-2036	2036-2041	2041-2046	Total
Avenal State Prison	\$ -	\$ 1,451,028,228	\$ 1,196,844,603	\$ 162,548,904	\$ 2,810,421,735
California Correctional Institution	\$ 1,170,266	\$ 853,559,087	\$ 2,120,011,728	\$ 143,368,084	\$ 3,118,109,164
California Health Care Facility, Stockton	\$ 24,614,599	\$ 73,227,373	\$ 1,143,460,776	\$ 2,283,158,232	\$ 3,524,460,980
California Institution for Men	\$ 945,493,578	\$ 823,240,567	\$ 663,139,100	\$ 121,005,979	\$ 2,552,879,224
California Institution for Women	\$ 131,813,209	\$ 546,147,563	\$ 326,776,607	\$ 2,296,050	\$ 1,007,035,430
California Medical Facility	\$ 75,446,617	\$ 678,671,096	\$ 645,807,418	\$ 227,503,313	\$ 1,627,428,444
California Men's Colony	\$ -	\$ 1,246,461,631	\$ 1,462,947,633	\$ 114,762,579	\$ 2,824,171,843
California State Prison, Corcoran	\$ 114,060,521	\$ 1,137,964,354	\$ 1,465,022,097	\$ 90,416,409	\$ 2,807,463,381
California State Prison, Los Angeles County	\$ 9,910,626	\$ 697,253,511	\$ 1,232,943,877	\$ 375,487,996	\$ 2,315,596,010
California State Prison, Sacramento	\$ -	\$ 877,953,918	\$ 1,211,254,247	\$ 304,793,969	\$ 2,394,002,133
California State Prison, Solano	\$ 108,131,391	\$ 890,755,225	\$ 1,030,413,353	\$ 226,949,838	\$ 2,256,249,807
Calipatria State Prison	\$ 164,709,752	\$ 745,769,258	\$ 874,083,195	\$ -	\$ 1,784,562,205
Centinela State Prison	\$ 624,163,417	\$ 755,803,029	\$ 511,919,780	\$ 184,149,900	\$ 2,076,036,026
Central California Women's Facility	\$ 16,987,991	\$ 568,739,914	\$ 942,043,354	\$ 284,844,291	\$ 1,812,615,549
Correctional Training Center	\$ -	\$ 131,860,881	\$ 488,283,160	\$ -	\$ 620,144,041
Correctional Training Facility	\$ -	\$ 1,041,641,524	\$ 1,929,864,349	\$ -	\$ 2,971,505,873
Folsom State Prison	\$ -	\$ 998,649,101	\$ 990,799,450	\$ 134,464,937	\$ 2,123,913,487
High Desert State Prison	\$ 11,365,734	\$ 930,959,113	\$ 1,472,336,007	\$ 298,336,666	\$ 2,713,037,521
Ironwood State Prison	\$ 43,037,026	\$ 270,272,272	\$ 683,199,721	\$ 1,695,474,306	\$ 2,691,983,924
Kern Valley State Prison	\$ 66,573,227	\$ 505,435,830	\$ 1,838,701,252	\$ 606,567,097	\$ 3,017,277,405
Mule Creek State Prison	\$ 455,160,556	\$ 1,419,842,801	\$ 433,465,865	\$ -	\$ 2,308,469,221
North Kern State Prison	\$ 37,782,128	\$ 583,510,184	\$ 892,608,048	\$ 83,524,235	\$ 1,597,424,595
Pelican Bay State Prison	\$ 234,349,874	\$ 471,400,495	\$ 860,254,030	\$ 1,245,157,326	\$ 2,811,161,725
Pleasant Valley State Prison	\$ 47,521,958	\$ 517,240,508	\$ 1,485,398,296	\$ 417,992,388	\$ 2,468,153,150
R.J. Donovan Correctional Facility	\$ 40,733,202	\$ 1,585,449,628	\$ 976,351,567	\$ 523,413,817	\$ 3,125,948,213
Salinas Valley State Prison	\$ 22,111,413	\$ 818,729,652	\$ 1,437,281,959	\$ 463,926,821	\$ 2,742,049,845
San Quentin Rehabilitation Center	\$ 37,349,247	\$ 1,783,999,458	\$ 1,172,235,595	\$ 11,630,452	\$ 3,005,214,753
Sierra Conservation Center	\$ 36,379,527	\$ 602,924,398	\$ 938,586,931	\$ 192,680,810	\$ 1,770,571,666
Substance Abuse Treatment Facility and State Prison, Corcoran	\$ 62,894,254	\$ 1,074,594,929	\$ 1,400,421,696	\$ 447,874,299	\$ 2,985,785,177
Valley State Prison	\$ 305,468,459	\$ 583,310,292	\$ 416,906,310	\$ 229,955,186	\$ 1,535,640,248
Wasco State Prison	\$ 10,331,192	\$ 623,491,270	\$ 1,192,020,642	\$ 85,580,823	\$ 1,911,423,928
<b>Construction Cost -- April 2026</b>	<b>\$ 3,627,559,765</b>	<b>\$ 25,289,927,088</b>	<b>\$ 33,435,384,645</b>	<b>\$ 10,957,865,205</b>	<b>\$ 73,310,736,704</b>

\*Includes Sitework, Utilities, and Building Systems (All costs shown have been escalated to either 5, 10, 15, or 20 years based on the current condition of the existing system)

The information gathered as part of this project identified roughly \$73 billion in outstanding infrastructure repair or replacement needs over the next 20 years. That figure reflects the amount of funding that would be needed to maintain current CDCR system operations and footprint and mitigate system failures over that time period. This cost highlights the significant repair and replacement backlog the department faces. However, understanding the substantial infrastructure investment needed to maintain operations, and accounting for the cost savings associated with replacement over repair, also provides the department with an opportunity to consider alternative infrastructure when replacing existing systems and structures.

### Alternative Design and Construction Models

CDCR has been undergoing a transformative shift in its correctional practices to normalize the correctional environment for the purposes of fostering rehabilitation, improving safety, and focusing on the health and well-being of both incarcerated people and staff. The overarching goal is to improve outcomes through a comprehensive approach that emphasizes reentry, reduces trauma and stress, and enhances rehabilitation within California's prison system. It is well established that living and working within prisons can negatively impact the health and well-being of both staff and

incarcerated people, and CDCR has undertaken efforts, described below, to improve the living and working environments in its facilities.

### ***Remaking San Quentin Rehabilitation Center***

In an effort to implement the lessons learned from the Scandinavian Model of Corrections, CDCR recently announced the completion of its innovative educational complex, the San Quentin Learning Center. The \$240 million project used the Progressive Design-Build (PDB) project delivery method and nearly tripled the existing campus classroom space, provided staff meeting areas and included a one-stop reentry program. This Administration initiative was announced by the Governor in March 2023, started design in September 2023 and completed construction in December 2025; operations began in March 2026. The PDB delivery method accelerated the traditionally used CDCR project delivery methods and was completed within 30 months, start to finish.

Grounded in the principles of the California Model and inspired by Nordic precedents, the project introduced a cultural shift aimed at promoting empowerment, self-agency, and personal responsibility. It strives to mirror life outside to better facilitate transition from incarceration to reentry, aiming to reduce recidivism and improve public safety. The project also prioritized the health and well-being of both incarcerated individuals and staff.

The Learning Center is approximately 80,000 square feet and consists of two three-story buildings, and one two-story building. These buildings include showcase spaces such as a technology and media center, a comprehensive library, a multipurpose gathering space, and a café. The design was deliberate in its materials and finishes, and is conceived as a welcoming, campus-like environment that actively supports rehabilitation.



Its identity is rooted in the principles of openness and integration with nature. Building placement optimizes views and encourages positive interaction between incarcerated individuals and staff, supporting efforts toward dynamic security. Learning extends beyond traditional classroom walls, intentionally blurring the boundary between outdoor and indoor spaces. The landscape integrates outdoor classrooms, set among newly planted native species plants and trees, while rooftop terraces provide additional learning spaces.

### ***California State Prison, Corcoran 3C - Honor Housing***

As requested for inclusion within the 2026 Budget Act, CDCR plans to reactivate two housing units in the California State Prison, Corcoran (COR) 3C facility to implement the first of its kind, behavioral-based housing for the Level III population. This facility would house incarcerated people in a supportive community environment where they can develop personal responsibility, prior to their release from prison. If approved in the 2026 Budget Act, the facility will embrace California Model concepts such as normalization, dynamic security, and progression. The COR 3C facility is

envisioned to be reactivated in two phases as Level III Non-Designated Programming housing, activating one housing unit in September 2026 and the second housing unit in February 2027.

Participation in the program will be voluntary, and those who are interested must apply and agree to specific conditions, including active participation in programming and remaining discipline free. Only individuals exhibiting dedication and commitment to living in 3C will be accepted on the facility. The incarcerated people living in 3C will be provided the opportunity to participate in a behavior-based collective community where responsible behavior is rewarded. Overall, the facility will seek a more normalized environment. The population will be encouraged to develop autonomy with more control over their rehabilitative schedule as well as their medical appointments. They will have the ability to schedule medical appointments directly with healthcare staff, will complete medical forms at the clinics, and will receive appointment reminders via their tablets, aligning with standard community healthcare practices. The facility is also expected to serve as a feeder program to the Male Community Reentry Program (MCRP).

Each participant will have the option to live in a single-cell assignment, eliminating the negative impacts and potential conflict between two people being forced to share a small, confined living space, with the goal of decreasing opportunities for violence. Offering single-celled housing may also benefit individuals by reducing sleep disturbances and the resulting negative impacts.

The facility will have a more normalized environment, moving away from the physically oppressive prison architecture, by:

- Including greenery which promotes aesthetic calmness,
- Providing furniture similar to what is found in the community,
- Using new paint and colors to transform the environment,
- Allowing the incarcerated to paint/decorate their assigned space to reflect their personality,
- Providing participants with access to a “convenience store” within the unit where incarcerated people can directly access their own food and personal needs,
- Phasing in the responsibility to clean/maintain their spaces as well as communal spaces within the housing units.

This project allows the Department to further its rehabilitative efforts through implementation of the Scandinavian Model concepts with a higher security population. This model is designed to make the correctional landscape better for people in the care of CDCR, enhance the overall wellness of employees, and make the state safer for all citizens.

### ***Expansion of Reentry Programs***

The MCRP/Female Community Reentry Program (FCRP) is a voluntary program for incarcerated people who meet the eligibility criteria. Approved participants serve the end of their sentences in the community, in lieu of confinement in state prison. The MCRP/FCRP is facilitated by DRP.

Launched in 2015, the program is designed to provide a range of community-based, rehabilitative services. The goal of the program is to help participants successfully reenter the community from incarceration, as well as contributing to reduced recidivism. Rehabilitative services may include but

are not limited to guidance and support, family reunification, community resources, education, employment, health care services, recovery groups, and assistance obtaining housing upon release.

MCRPs/FCRPs, which are operated at a per person cost that is less than the average cost of incarceration in traditional prisons, also contribute to reduced recidivism. According to a study by researchers at Stanford University, for offenders who participate in MCRP for at least seven months, MCRP decreases the likelihood of rearrest by 8 percentage points, and for offenders who participate in MCRP for at least nine months, MCRP decreases the likelihood of rearrest by 13 percentage points and reconviction by 11 percentage points. The current MCRP/FCRP program operates 13 locations serving about 1,250 individuals at a time. MCRPs currently exist in Los Angeles (three locations), San Diego, Butte, Kern, and Fresno counties. FCRPs exist in Los Angeles, Bakersfield, Sacramento, San Diego, Santa Fe Springs, and Stockton.

## Strategic Plan

In 2026, CDCR is striving to become a modern correctional system. It has meaningfully expanded rehabilitative programming, substantially improved access to medical and mental health services, supported increased family connections, and significantly expanded reentry opportunities. But, as noted above, it is striving to do so *in spite of* the space that is provided.

CDCR is facing increasing pressure to do more with aging and failing infrastructure, and the magnitude of the outstanding infrastructure replacement and repair needs is immense. The department is managing aging facilities, evolving legal requirements, and a fundamental realignment of the Department's mission toward reentry and evidence-based programming. By transitioning from a reactive to a proactive operational model, the department aims to create environments that meet modern community standards for safety, health, and rehabilitation.

As noted in earlier sections of this report, the Department's infrastructure will require significant investment in the coming decades to maintain its current level of operability. The Department is facing the likelihood of needing more than \$1 billion each year to adequately address its infrastructure challenges over that period. However, that challenge also presents an opportunity. The Department has proven with its SQRC project that it is capable of developing and constructing modern space. The SQRC project, delivered on time and on budget, supports the normalized, progressive, and dynamically secure operations that the Department is building toward with the California Model.

Building on the successes seen at SQRC, the department has developed a high-level strategic vision for the next 20 years.

This roadmap does not lay out the construction and operational changes that will be needed to achieve that vision across all 20 years; that is by design. The department has undergone significant transformation in the previous 20 years – the population has declined by nearly half, significant changes have been made to health care facilities and operations, and rehabilitative programming

has expanded dramatically. In 2006, with a population in excess of 170,000, CDCR would not have been able to predict the system that exists today. In the same way, the department cannot predict today the system operations in 2046.

Recognizing the need for a strategic plan that evolves with the evolving needs of the Department, CDCR has developed a Plan that sets forth a set of high-level organizational objectives for the next 20 years. That set of overall objectives is then applied to discrete, actionable efforts in the next five years that would move the department toward achieving the long-term objectives. Under this adaptive Plan, the Department would, at five-year intervals, reassess the needs of the department, developing subsequent five-year action plans that move the department forward in achieving the objectives below. This strategy ensures that as the department's operational needs change, any proposed infrastructure improvements are consistent with the evolving needs. For example, if there are changes in the size or demographics of the population, new accessibility requirements, or new programming opportunities, the department would incorporate those as part of the iterative process imbedded in this master planning effort.

CDCR has an opportunity to improve the living and working environment for people in custody and employees, while also improving public safety for all Californians. Every employee has the potential to positively impact the lives of incarcerated individuals, and most incarcerated people will return to California's communities. With appropriate investments in infrastructure to achieve the department's mission, CDCR can improve their outcomes while also making its facilities better places to work.

The section that follows lays out the strategic objectives that the department plans to pursue over the next 20 years. The subsequent section sets forth the capital improvement efforts the department is proposing in pursuit of those objectives. Projects detailed below are subject to the standard deliberative budget process, including review and consideration with the Department of Finance and the Legislature. All proposals will be submitted as part of future budget processes for consideration and will only proceed upon approval.

### **Objective I: Health and Safety**

Cultivate a working and living environment that adheres to modern correctional safety and, to the extent feasible, community standards. This shift aims to improve the working environment impacting staff burnout, improve staff safety, and reduce costs. It also aims to improve the living environment for the incarcerated population, creating a safer, healthier environment for residents.

- **Integrated Healthcare Infrastructure:** Design should ensure dedicated spaces across disciplines to provide medical, mental health, dental, and substance use disorder (SUD) services that mirror community-level care.
- **Geriatric and Specialized Housing:** Recognizing a shifting demographic, the plan prioritizes housing for an aging population, including infrastructure for aging in place and potential facilities for hospice, dementia care, and assisted living.
- **Safety and Accessibility:** Infrastructure will be updated to meet design standards for disability access and provide a safe physical environment for both staff and the incarcerated population.

- **Environmental Utility Standards:** Modernization extends to fundamental utility systems, ensuring that roofs, water quality, and heating, ventilation and air conditioning systems meet contemporary community standards.

### **Objective II: Normalization**

In this plan, normalization involves utilizing community-standard architecture to create a healing, useful, and safe prison environment. The goal is to provide dignity for staff and the population, ultimately fostering a higher state of readiness for reentry.

- **Community-Mirrored Architecture:** Future construction should mirror "high-traffic" spaces found in the community, moving away from traditional institutional aesthetics while maintaining appropriate security grades.
- **Local Agency and Variety:** To reduce institutional monotony, the plan allows for "perceptual variety" through color and finishes; design choices would, when feasible, be made with staff and the population to build shared ownership and trust.
- **Social Connectivity:** Facilities should provide meaningful spaces for educators, volunteers, and family, acknowledging that community integration is vital for long-term success.
- **Personal Responsibility and Wellness:** Inclusion of spaces designed to promote autonomy and self-responsibility, including private sleeping areas and facilities for cooking and laundry for the population, as well as dedicated wellness spaces for staff.

### **Objective III: Wellness**

As part of its infrastructure planning, the department would create spaces that support positive engagement and meaningful work. From a strategic standpoint, reducing environmental stress is viewed as a primary method for reducing violence, recidivism, and staff burnout.

- **Digital and Physical Connections:** The Plan incorporates technology and physical space aiming to help staff maintain wellness and allow the incarcerated population to stay connected with outside support systems.
- **Privacy and Individuation:** Wellness is supported by providing staff with spaces for rest and recovery, while offering incarcerated individuals private sleeping areas that allow for personalization.
- **Biophilic Design Elements:** A key component involves the incorporation of natural light, green spaces, and views of the surrounding topography to improve the psychological health of all occupants.
- **Human-Scale Design:** Future construction would prioritize smaller housing units and subdivided yards to reduce the density of the population, thereby lowering overall risk and environmental stress.

### **Objective IV: Progression**

The plan prioritizes infrastructure as a tool to support a "progressive responsibility and independence" model throughout the incarceration life cycle. This acknowledges that most individuals return to the community and should do so "ready".

- **Autonomy Gradation:** The system should offer a variety of institution types and programs that allow for different levels of responsibility and autonomy.

- **Dynamic Placement:** The infrastructure should support the ability for individuals to both progress toward more independence or regress to higher security if necessary.
- **Comprehensive Housing Continuum:** The Plan envisions a spectrum of spaces ranging from high-security environments to targeted supportive housing and dedicated reentry facilities. Part of that vision is to house approximately 10 percent of the incarcerated population in MCRP/FCRPs.
- **Capacity Alignment:** A core goal is to ensure that reentry and programming capacity is sufficient to accommodate all eligible individuals, ensuring no gaps in the rehabilitative pipeline.

## Five-Year Plan

### Five-Year Plan

The department incorporated the strategic objectives described above with the analysis of the department’s existing infrastructure and needed replacements and repairs over the next 20 years. The department identified the priority infrastructure needs that will continue to exist over that period, including:

- High security housing options.
- Housing for individuals who are aging, disabled, or living with mental health conditions in prison.
- Specialized housing for women.
- Lower security housing options that support progression.
- Housing near incarcerated individuals’ communities of origin and related support networks.

Based on that overall portfolio need and the assessment of existing infrastructure conditions, the department would require significant capital improvement projects at five prisons in the next five years. Specifically, the department proposes pursuing projects at:

- California Medical Facility (CMF)
- Central California Women’s Facility (CCWF)
- Sierra Conservation Center (SCC)
- California State Prison, Corcoran (COR)
- California Institution for Men (CIM)

The department anticipates these projects will consist of substantial capital outlay investments, including replacement of utility systems, demolition and replacement of housing units, and other major projects. For each institution, the department will prepare a facility master plan, undertake an FCA, and plan the overall infrastructure for the institution. That master planning will be developed into a project scope and budget.

These planning and phasing efforts will be coordinated with institution staff to identify mission-critical systems for replacement prioritization. Swing space and temporary facilities must be considered, along with gauging design/construction industry interest and capacity. Based on the success with the SQRC project, the department plans to seek authority for PDB process.

## Next Steps

### **Facility Master Plan Development and Implementation**

To achieve the five-year plan set forth above, the department has developed a tentative timeline for planning and construction of the targeted institutions. CDCR is anticipating that each institution will require about 1.5 years for pre-construction activities and 3.5 years for the design-build phase of the project. These timelines assume the use of the progressive design-build process and that the department does not face external challenges related to the projects.

In July 2026, the department plans to start master planning efforts for CMF. That will include detailed FCAs, development of project scope, identification of barriers, and planning for any operational accommodations (such as population movement) associated with the work. Concurrently with the planning work at CMF, the department would also be undertaking the accessibility improvement construction work that is proposed to be funded through the 2026 Budget Act. The results of CMF pre-construction work would generate a budget estimate and project plan for a design/construction project that would begin in July 2027.

As the design/construction phase commences on the CMF and targeted special repair projects in July 2027, the department would begin planning and pre-construction work for projects at CCWF and SCC. These projects would include the same FCAs and planning work as described for CMF. These projects would begin the pre-construction phase in July 2029, at which time CMF would be in the design/build phase of its project. In July 2029 the department would also begin the pre-construction phase for COR. By January 2030, the department will be in the design/build phase for CMF, CCWF, and SCC. At that time, the department will also commence pre-design master planning work for CIM. By July 2030, the department will have commenced the pre-construction phase for CIM. The schedule can be seen in appendix 4.

Under this plan, by January 2032 work will be nearing completion at CMF, be significantly underway at CCWF and SCC, in progress at COR, and beginning at CIM. In addition, the department would also have made significant targeted investments in cooling, accessibility improvements, and fire life safety. At this point, the department would be well-positioned to review its infrastructure portfolio, re-assess the size and demographics of its population, and develop the master plan for the next five years of infrastructure investment and renewal.

### **Statewide Infrastructure Programs**

In addition to developing the infrastructure at the five prisons as outlined above, the department will still face significant pressures to proactively mitigate potential litigation associated with ADA accessibility improvements, indoor heat conditions, and fire and life safety systems. As a result,

CDCR will continue to pursue targeted investments in repairs at other CDCR prisons. To ensure cost effectiveness, CDCR will focus these investments on infrastructure that is currently identified as in good condition and will stagger projects thoughtfully – for example, replacing roofs that are at the end of their lives prior to adding cooling or making changes to building interiors.

### **Reentry Expansion**

As MCRP and FCRP got started, the program prioritized counties with large numbers of individuals who were returning to the community. The program now serves about 1,250 individuals, mostly concentrated in key hubs (e.g., Los Angeles, San Diego, and Kern counties). The department is in the process of activating six reentry expansion facilities totally roughly 600 beds through current contracts and ongoing negotiations over the next five years. To optimize statewide coverage and allow participants to reintegrate closer to their counties of commitment, the expansion should target the following underserved or high-demand regions:

- Alameda (East Bay): Building upon the recently authorized Alameda base site, expanding formal Community Reentry Center capacity here is critical for the greater San Francisco Bay Area, which historically has a large, supervised persons parolee population but limited immediate reentry infrastructure.
- Sacramento County: Efforts are underway for a brand-new construction of a 150-bed facility for male participants. This will add capacity to Northern California.
- San Bernardino County – Planned activations in San Bernardino and Ontario will capture those returning to counties east of Los Angeles.
- Shasta County (Far North): Currently, the Butte County facility services over a dozen northern counties. A northern hub in or near Redding would drastically improve access for participants returning to California's northernmost rural communities.
- San Diego County – Due to demand, negotiating for a second facility in northern San Diego County will support the growing need.
- Santa Barbara County– Currently negotiating for a site in Santa Barbara County, to accommodate those returning to smaller coastal communities.

### **Institutions and Facility Deactivation and Closures**

CDCR is committed to managing its resources responsibly to enhance public safety and best serve the people of California. As the prison population has decreased in recent years, CDCR has moved forward with closing several prisons, deactivating Conservation Camps and multiple housing units/yards within certain institutions and ceasing operations of leased facilities.

CDCR recognizes that overcrowding in correctional settings creates stressful environments for both staff and incarcerated people and has been associated with increased rates of violence, self-harm, suicide, and exacerbation of mental illness. CDCR's goal of incarceration is to provide opportunity to rehabilitate, so when the opportunity comes to reenter society, each individual will be equipped accordingly to successfully do so. As the Department continues to increase educational and other programming opportunities with an emphasis on face-to-face classes, there will continue to be challenges across the institutions to appropriately meet the needs of the population with existing infrastructure.

The Department is focused on how best to utilize and maximize the use of existing space within each institution. This includes moving to single cell/bed, when possible, and providing the incarcerated population with a more normal, humane, and safe environment. CDCR will continue to evaluate our trends in the incarcerated populations and subpopulations, current data on the ability to recruit and retain staff, and the suitability of existing, or need for new, infrastructure to meet the Department's mission and programmatic goals to determine the appropriate prison capacity moving forward.

### **Accountability and Key Performance Indicators**

The Plan will be an adaptive and iterative document that will guide CDCR's goals over the next 20 years. The Plan will be periodically revisited and checked against key performance indicators (KPIs) to ensure successful implementation and desired outcomes. In conjunction with external stakeholders and experts, the department will develop KPIs to measure success, including:

- Assignments to appropriate housing options for aging in place;
- Ability to access services and programs, such as wait time or wait list data;
- Incidences of violence against staff or other incarcerated individuals;
- Staff satisfaction and self-reported well-being;
- Staff vacancy and workers compensation data;
- Environmental data such as temperature and humidity.

Based on the data gathered and the periodic reassessment of infrastructure condition, the department will adapt its planning and construction activities to meet the evolving needs of the department and the state.

### **Beyond Five Years**

CDCR's approach is that the Plan will be a flexible, adaptive plan to reuse/improve existing correctional facilities in a strategic approach using the objectives outlined above. Every five years, CDCR will reevaluate the infrastructure and utility matrix, layered with geographical location, population, mission, custody level, and other factors to identify the next five institutions that will either be significantly rebuilt or have significant capital investments. Each cycle will provide an opportunity for reevaluation of infrastructure conditions, as well as an assessment of progress in achieving the objectives laid in this report. The department, in collaboration with external stakeholders, will be able to revise and adjust planning to match the ever-evolving needs of the California correctional system.