

THIRD READING

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Bill No: SB 942  
Author: Caballero (D), et al.  
Amended: 4/6/26  
Vote: 21

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SENATE HEALTH COMMITTEE: 9-0, 4/15/26

AYES: Weber Pierson, Caballero, Durazo, Gonzalez, Grove, Padilla, Pérez,  
Rubio, Smallwood-Cuevas

NO VOTE RECORDED: Valladares, Menjivar

SENATE JUDICIARY COMMITTEE: 13-0, 4/21/26

AYES: Umberg, Niello, Allen, Ashby, Caballero, Durazo, Laird, Reyes, Stern,  
Valladares, Wahab, Weber Pierson, Wiener

SENATE APPROPRIATIONS COMMITTEE: 7-0, 5/14/26

AYES: Cervantes, Seyarto, Cabaldon, Dahle, Grayson, Richardson, Wahab

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**SUBJECT:** Civil confinement facilities

**SOURCE:** Immigrant Defense Advocates

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**DIGEST:** This bill requires a civil confinement facility not otherwise licensed, certified, designated, or approved under state law to file an annual registration with the California Department of Public Health (CDPH). Requires the facility to identify the operator, facility location, contracting entity, maximum capacity, and the standards of care and confinement in any operating contract of the facility. Requires an operator to comply with specified standards and requirements, including any applicable federal, state, and local health and safety law, and any standards set forth in a contract. Permits CDPH, for civil confinement facilities that are not licensed but are instead registered under this bill, to enforce this bill with cease and desist orders, with civil penalties up to \$25,000 per violation per day.

**ANALYSIS:**

Existing law:

- 1) Defines a “detention facility” as a facility in which persons are incarcerated or otherwise involuntarily confined for purposes of execution of a punitive sentence imposed by a court or detention pending a trial hearing or other judicial or administrative proceeding. Defines a “private detention facility” as a detention facility that is operated by a private, nongovernmental, for-profit entity pursuant to a contract or agreement with a governmental entity. Excludes various types of facilities from the definition of detention facility, including a facility providing specified health services, residential care facilities, and facilities used for quarantine. [Government Code (GOV) §7320]
- 2) Requires, until July 1, 2027, the Attorney General to engage in reviews of county, local, or private locked detention facilities in which noncitizens are being housed or detained for purposes of civil immigration proceedings in California. Requires the review to include conditions of confinement, and requires the Department of Justice (DOJ) to provide a written summary of findings regarding the progress of these reviews and any relevant findings. [GOV §12532]
- 3) Establishes provisions for investigations of detention facilities by local health officers (LHOs) for health and sanitary conditions in every publicly operated detention facility in the county or city (including county and city jails), and permits LHOs to make additional investigations of a county jail, private detention facility, or other detention facility of the county as determined necessary. Defines “private detention facility,” for purposes of these provisions, as having same definition in 1) above. [Health and Safety Code (HSC) §101045]
- 4) Establishes the Lanterman-Petris-Short (LPS) Act to end the inappropriate, indefinite, and involuntary commitment of persons with mental health disorders, developmental disabilities, and chronic alcoholism, as well as to safeguard a person’s rights, provide prompt evaluation and treatment, and provide services in the least restrictive setting appropriate to the needs of each person. Permits involuntary detention of a person deemed to be a danger to self or others, or “gravely disabled” for periods of up to 72 hours for evaluation and treatment, or for up-to 14 days and up-to 30 days for additional intensive treatment in “county-designated facilities.” [Welfare and Institutions Code (WIC) §5000, et seq.]

- 5) Licenses and regulates various types of health facilities by CDPH, including general acute care hospitals, acute psychiatric hospitals, and skilled nursing facilities, and licenses and regulates psychiatric health facilities (PHFs) and mental health rehabilitation centers (MHRCs) by the Department of Health Care Services (DHCS). [HSC §1250, et seq., WIC §4080 and §5675]

This bill:

- 1) Defines “covered civil confinement facility” to mean a nonpenal, 24-hour facility in which persons may be detained, committed, held for evaluation, treatment, stabilization, or civil immigration custody, and that is operated by a private entity or by a government entity through a contract with a private entity.
- 2) Specifies that a “covered civil confinement facility” includes, but is not limited to, a private detention facility; a facility designated or approved by the county for evaluation and treatment of persons under the LPS Act; or, a PHF or MHRC licensed by DHCS.
- 3) Requires a covered civil confinement facility that is already licensed, certified, designated, or approved under state law or local ordinance to remain subject to its existing licensure, certification, designation, or approval regime.
- 4) Requires a covered civil confinement facility not otherwise licensed, certified, designated, or approved under state law or local ordinance to file an annual registration with CDPH in a form and manner prescribed by CDPH. Requires the facility, in its registration, to identify the operator, facility location, contracting entity, maximum capacity, and the standards of care and confinement in any operating contract of the facility.
- 5) Specifies that the filing of a complete registration satisfies the requirements to be registered and prohibits CDPH from denying registration except for failure to submit required information.
- 6) Requires CDPH, and any applicable enforcing agency, to coordinate with, or delegate to, any other state or local government entity with existing regulatory authority, any inspection, information sharing, reporting, or enforcement activity to avoid duplication of effort and to promote consistent oversight.

- 7) Specifies that this bill does not authorize duplicative state licensing or oversight for a facility that is already licensed, certified, designated, or approved under state law or local ordinance.
- 8) Specifies that this bill does not apply to a state prison, county jail, city jail, juvenile hall, or a facility operated directly by the Department of Corrections and Rehabilitation or a local correctional authority.
- 9) Requires an enforcing agency, in carrying out this bill, to use as applicable benchmarks for oversight and enforcement, all of the following to the extent they govern the operation of a covered civil confinement facility:
  - a) Any applicable federal, state, and local health and safety law, regulation, or order;
  - b) Any applicable licensure, certification, designation, approval, or program requirement governing the covered civil confinement facility;
  - c) Any standards of care and confinement set forth in a contract or agreement under which an operator manages, staffs, or provides custodial, medical, mental health, food sanitation, transportation, or other direct services in the facility; and,
  - d) Any approved facility policies and procedures governing direct services, reporting, health and safety, medical or mental health care, sanitation, food service, records, grievance procedures, and use of force, restrain, or seclusion, if applicable.
- 10) Specifies that this bill does not require a governmental entity to include particular terms in a contract agreement or authorize the state to prescribe the contents of a federal contract.
- 11) Specifies that the existence or absence of a contractual provision does not limit the operator's duty to comply with otherwise applicable law.
- 12) Requires this bill to be applied in the same manner and to the same extent to private detention facilities as it is applied to other similarly situated covered civil confinement facilities. Prohibits any additional standard, inspection requirement, corrective action requirement, penalty, or remedy from being imposed on a private detention facility under this bill unless an analogous requirement can be imposed on a similar covered civil confinement facility.
- 13) Requires an enforcing agency to conduct regular inspections of covered civil confinement facilities within its jurisdiction consistent with otherwise

applicable law, and permits an enforcement agency to conduct additional inspections as necessary based on complaints or risk indicators.

- 14) Requires an operator to furnish all information, records, and documentation requested by the enforcing agency that are reasonably necessary to review compliance with this bill and other applicable health and safety requirements.
- 15) Requires an operator to preserve books, records, papers, accounts, documents, video, and other writings reasonably necessary to review compliance with this bill for not less than four years.
- 16) Requires an operator to report unusual occurrences and other significant health or safety incidents, including deaths, serious injuries, serious medical events, and uses of force, restraint, or seclusion, if applicable, to the enforcing agency within 24 hours of the incident.
- 17) Permits an enforcing agency to require a covered civil confinement facility to take specified actions to correct any noncompliance with this bill. Requires an operator to submit a corrective action plan for any noncompliance for approval by the enforcing agency, and requires an operator to comply with the plan.
- 18) Permits an enforcement agency to use its existing enforcement authority to enforce this bill for covered civil confinement facilities that are licensed.
- 19) Permits CDPH, for covered civil confinement facilities that are not licensed or certified but are instead registered pursuant to this bill, to enforce this bill by taking any or all of the following actions: issuing a cease and desist order; imposing civil penalties not exceeding \$25,000 per violation per day; requiring compliance with a mandatory corrective action plan; or, suspending the facility's registration for repeated or uncured violations.
- 20) Requires CDPH or the enforcement agency, before imposing any monetary penalty, suspension, or comparable sanction under this bill, to provide notice and an opportunity to be heard consistent with any applicable law.
- 21) Prohibits an operator from retaliating against any employee, detainee, contractor, patient, resident, family member, attorney, advocate, volunteer, or other person who reports, or participates in an investigation or proceeding concerning, a violation of this bill or any applicable health or safety standard.

- 22) Specifies that this bill does not authorize the state to regulate or review decisions regarding apprehension, charging, detention, placement, transfer, release, removal, sentencing, or contractor responsibility determinations made by the federal government, the state, or a local governmental entity. Specifies that this bill regulates only facility conditions, standards of care and confinement, and related health and safety requirements.
- 23) Contains a severability clause, so that if any provision of this bill is held invalid, that invalidity will not affect other provisions of this bill that can be given effect without the invalid provision.

## Comments

According to the author of this bill:

California has a constitutional responsibility to ensure the health and safety of every individual within its borders. Currently, a dangerous regulatory gap allows private, for-profit detention facilities to operate without oversight. While California regulates other similarly situated civil-confinement facilities, such as psychiatric health facilities, private detention centers have escaped state scrutiny despite a track record of systemic failure. Last year was the deadliest on record for federal immigration detention in two decades. In California, where all immigrants in federal custody are held in private facilities, reports from the Department of Justice (DOJ) and the federal Office of the Inspector General have documented unsanitary conditions, medical neglect, and preventable deaths. These for-profit entities prioritize their bottom line over the health of those in their care, ignoring the very standards set in their federal contracts. This bill addresses this crisis by requiring all civil-confinement facilities, including private detention facilities, to file an annual registration with CDPH. This filing must include details about the facility operator, facility location, contracting entity, maximum capacity, and the standards of care and confinement found within the facility's operating contract. The bill provides CDPH with the power to conduct oversight and enforcement through regular and unannounced inspections, issuing corrective action plans, and assessing civil penalties. By passing this bill, California asserts that no corporation is above the law when it comes to the basic human rights of those in our state, and guarantees that we hold all civil-confinement facilities in our state to the same health and safety standards.

## Background

*Immigration detention facilities in California, and history of deaths.* The federal government contracts with private detention facilities across the country to house federal inmates and immigration detainees. There are currently seven private detention facilities operating in California:

- a) Adelanto ICE Processing Center in San Bernardino County (capacity 1,940);
- b) Desert View Annex in San Bernardino County (capacity 750);
- c) California City in Kern County (capacity 2,560);
- d) Golden State Annex in Kern County (700 capacity);
- e) Mesa Verde ICE Processing Center in Kern County (capacity 400);
- f) Otay Mesa Detention Center in San Diego County (1,994 capacity); and,
- g) Imperial Regional Detention Facility in Imperial County (704 capacity).

CoreCivic operates the Otay Mesa and California City facilities, Management & Training Corporation operates the Imperial Regional Detention Facility, while the remainder are operated by the GEO Group. According to a February 6, 2026 article in the *Sacramento Bee*, at that time roughly 6,400 people were being held on a given day in these private facilities, which was more than double the figure from the prior year. Part of this growth was the opening of the California City Immigration Processing Center in 2025, which is now the largest immigration detention center in the state.

According to a research report by KFF, as of March 18, 2026, U.S. Immigration and Customs Enforcement (ICE) reported that 46 people died while in their custody or detention facilities since the start of the second Trump administration in January 2025. The number of deaths of people in detention during 2025 exceeded the highest seen in over two decades, and deaths in 2026 are on track to meet or exceed that number. On March 30, 2026, the *Los Angeles Times* reported that a detainee at Adelanto ICE Processing Center died on March 25, which was the fourth fatality at Adelanto since September of last year. Nationwide, the death toll in ICE custody in just the last three months was 14 people.

**FISCAL EFFECT:** Appropriation: No Fiscal Com.: Yes Local: Yes

According to the Senate Appropriations Committee there are unknown ongoing General Fund costs, likely hundreds of thousands, for CDPH for state administration and enforcement activities, unknown potential costs to local agencies. Costs to local agencies would be potentially reimbursable by the state, subject to a determination by the Commission on State Mandates. There are also unknown potential cost pressures to the courts related to additional enforcement

mechanisms provided in this measure (Trial Court Trust Fund, General Fund). While the courts are not funded on a workload basis, an increase in workload could result in delayed court services and would put pressure on the General Fund to fund additional staff and resources.

**SUPPORT:** (Verified 5/14/26)

Immigrant Defense Advocates (source)  
Acacia Center for Justice  
Alianza Sacramento  
California Collaborative for Immigrant Justice  
California Federation of Teachers  
California Rural Legal Assistance Foundation  
Center for Gender & Refugee Studies – California  
City of San Diego  
Disability Rights California  
Episcopal Diocese of San Joaquin  
Friends Committee on Legislation of California  
Health in Partnership  
Indivisible CA: StateStrong  
La Cosecha  
Riverside Sheriffs' Association  
Secure Justice  
Southeast Asia Resource Action Center  
Southern California Human Rights Center  
St. James Episcopal Church Sonora CA  
The Robert & Ethel Kennedy Human Rights Center

**OPPOSITION:** (Verified 5/14/26)

None received

**ARGUMENTS IN SUPPORT:** This bill is sponsored by Immigrant Defense Advocates (IDA) to make clear that California has a compelling interest, and lawful authority, to protect the health, safety, and welfare of people held in privately operated detention facilities located in our state. IDA states that California has repeatedly seen breakdowns in health oversight inside private detention settings, and that California's own oversight work underscores these systemic problems, pointing to the 2025 DOJ report. According to IDA, in early 2026 a federal court ordered significant remedial measures, including an independent monitor at the California City detention facility after allegations of severe neglect and inadequate medical care. Private detention operators are

businesses operating within California, yet too often health oversight is treated as fragmented or optional, particularly where the operator points to federal contracts or internal policies as sufficient. This bill directly addresses that gap by affirming that private detention operators remain subject to California's legitimate health and safety authority, and may be required, as a condition of doing business here, to meet or exceed standards they have already agreed to follow under federal contracts. IDA states this bill is a necessary step to protect public health and human wellbeing, strengthen transparency and accountability, and prevent the recurring health failures that have harmed detained people and strained surrounding communities. Secure Justice writes that over the last several years, state and federal authorities have documented a persistent pattern of dangerous living conditions and substandard medical care in for-profit detention centers. Unfortunately, this problem is not improving, and is worsening nationwide, with multiple reports documenting that 2025 was the deadliest year for ICE custody in more than two decades. Other supporters make similar arguments.

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5/16/26 9:55:11

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