

SENATE JUDICIARY COMMITTEE
Senator Thomas Umberg, Chair
2025-2026 Regular Session

SB 942 (Caballero)
Version: April 6, 2026
Hearing Date: April 21, 2026
Fiscal: Yes
Urgency: No
ID

SUBJECT

Civil confinement facilities

DIGEST

This bill requires all civil confinement facilities in the state to register with the Department of Public Health, if not already licensed, certified, designated, or approved under state law or local ordinance, and requires enforcing agencies to conduct regular inspections and enforcement of applicable health and safety laws and regulations, standards of care and confinement, and approved facility policies and procedures, as specified.

EXECUTIVE SUMMARY

There are various types of civil confinement facilities that operate in the state. These include facilities under the Lanterman-Petris-Short Act for the involuntary confinement of individuals with mental health illnesses who are a danger to themselves and others, psychiatric health facilities, mental health rehabilitation centers, psychiatric residential treatment facilities, and private detention facilities for immigration detention. Immigration detention is the civil, non-punitive confinement of an individual pending a deportation proceeding or the effectuation of a deportation order. SB 942 requires all civil confinement facilities within the state to register with the Department of Public Health, if they are not already otherwise licensed through applicable state law. It requires enforcing agencies to regularly inspect civil confinement facilities, and provides for enforcement of applicable health and safety laws and regulations, standards of care and confinement, and approved facility policies and procedures.

SB 942 is sponsored by Immigrant Defense Advocates, and is supported by CFT – a Union of Educators & Classified Professionals, AFT, AFL-CIO, Indivisible CA: StateStrong, La Cosecha, the Riverside Sheriff’s Association, and Secure Justice. The Committee has received no timely letters of opposition. SB 942 previously passed out of the Senate Health Committee by a vote of 9 to 0.

PROPOSED CHANGES TO THE LAW

Existing law:

- 1) Prohibits law enforcement agencies from using agency or department moneys or personnel to investigate, interrogate, detain, detect, or arrest persons for immigration enforcement purposes, as specified, place peace officers under the supervision of federal agencies, use immigration authorities as interpreters for law enforcement matters, transfer an individual to immigration authorities unless authorized by a judicial warrant, provide office space exclusively dedicated to immigration authorities, and contract with the federal government for the use of law enforcement agency facilities to house individuals as federal detainees for the purposes of civil immigration custody, as specified. (Gov. Code § 7284.6.)
- 2) Defines “private detention facility” as a detention facility that is operated by a private, nongovernmental, for-profit entity, and operating pursuant to a contract or agreement with a governmental entity. (Pen. Code § 9500(b).)
- 3) Defines “detention facility” to mean any facility in which persons are incarcerated or otherwise involuntarily confined for purposes of the execution of a punitive sentence imposed by a court or detention pending a trial, hearing, or other judicial or administrative proceeding. (Pen. Code § 9500(a).)
- 4) Requires a private detention facility responsible for the custody and control of a prisoner or civil detainee to comply with various requirements, including:
 - a) All appropriate state and local building, zoning, health, safety, and fire statutes, ordinances, and regulations, and with the minimum jail standards, as specified;
 - b) That it select and train personnel in accordance with selection and training requirements adopted by the Board of State and Community Corrections; and
 - c) That it maintain insurance coverages, as specified. (Pen. Code § 9506.)
- 5) Requires a private detention facility to comply with and adhere to the detention standards of care and confinement agreed upon in the facility’s contract for operations, and permits an individual injured by a tortious action of an operator of a private detention facility when the operator commits a tortious action that fails to comply with the detention standards of care and confinement to bring a civil action for relief. Permits such an individual to recover their reasonable attorney’s fees and costs, in the court’s discretion. (Gov. Code § 7320.)
- 6) Requires, until July 1, 2027, the Attorney General, or their designee, 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 the

state, including any county, local, or private locked detention facility in which an accompanied or unaccompanied minor is housed or detained, as specified. Requires the Attorney General to provide updates and information regarding their findings, as specified. (Gov. Code § 12532.)

- 7) Requires a county health officer and any city health officer to investigate health and safety conditions in a county jail, publicly operated detention facility in the county, and a private work furlough facility and program, at least annually, as specified. Permits the county health officer and city health officer to make additional investigations as they deem necessary, and requires them to submit a report to the respective investigated entities, as specified. (Health & Safety Code § 101045.)

This bill:

- 1) Defines, for its purposes, the following:
- a) “covered civil confinement facility” to mean a non-penal, 24-hour facility in which persons may be detained, committed, held for evaluation, treatment, stabilization, restoration, or civil immigration custody, and that is operated by a private entity or by a governmental entity through a contract with a private entity. Specifies that a covered civil confinement facility includes, but is not limited to:
 - i. A private detention facility;
 - ii. A facility designated or approved under the Lanterman-Petris-Short Act for the evaluation and treatment of individuals with mental health illnesses that are a danger to themselves or others;
 - iii. A psychiatric health facility;
 - iv. A mental health rehabilitation center; and
 - v. A psychiatric residential treatment facility;
 - b) “enforcing agency” to mean a state or local entity that licenses, certifies, designates, or approves the operation of, and regulates, a covered civil confinement facility under state or local law;
 - c) “operator” to mean any private person, corporation, partnership, contractor, subcontractor, or other nongovernmental entity that owns, manages, staffs, or provides direct custodial, medical, mental health, food, sanitation, transportation, or other direct services in a covered civil confinement facility;
 - d) “private detention facility” as defined in Government Code section 7320; and
 - e) “standards of care and confinement” to mean written contractual requirements, policies, procedures, and legally applicable standards of governing conditions of confinement, sanitation, food service, medical care, mental health care, use of force, restraint or seclusion where applicable, records, grievance procedures, and other health and safety requirements applicable to a covered civil confinement facility.

- 2) Applies its requirements to every covered civil confinement facility.
- 3) Specifies that a covered civil confinement facility that is already licensed, certified, designated, or approved under state law or local ordinance shall remain subject to its existing licensure, certification, designation, or approval regime.
- 4) Specifies that a covered civil confinement facility not otherwise licensed, certified, designated, or approved under state law or local ordinance must file an annual registration with the Department of Public Health (Department) in a form and manner prescribed by the Department, and requires this registration to:
 - a) Identify the operator, facility location, contracting entity, maximum capacity, and the standards of care and confinement in any operating contract of the facility.
- 5) Requires the Department to adopt rules and regulations necessary to implement the bill's provisions.
- 6) Specifies that the filing of a complete registration pursuant to 4), above, satisfies the registration requirement, and that the Department may not deny a facility's registration unless it fails to submit the required information.
- 7) Permits the Department 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. Specifies that its provisions do 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 its provisions do 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) Specifies that, in carrying out these provisions, an enforcing agency must use, as applicable benchmarks for oversight and enforcement, all of the following, to the extent that 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) requirements of this division;
 - c) any applicable licensure, certification, designation, approval, or program requirement governing the covered civil confinement facility;
 - d) any standards of care and confinement set forth in a contract or agreement under which an operator manages, staffs, or provides custodial services,

medical care, mental health care, food sanitation, transportation, or other direct services in the facility; and

- e) 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, restraint, or seclusion, if applicable.
- 10) Requires an operator of a covered civil confinement facility to comply with the standards and requirements described in 9), above, to the extent applicable.
 - 11) Specifies that its provisions do 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, and 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 its provisions to be applied in the same manner and to the same extent to a private detention facility as it is applied to other similarly situated covered civil confinement facilities, and specifies that any additional standard, inspection requirement, or corrective action may not be imposed on a private detention facility under the bill's provisions unless an analogous requirement may be imposed on a similarly-situated 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 enforcing agencies to conduct additional inspections as necessary based on complaints, unusual occurrences, 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 the bill's provisions and other applicable health and safety requirements.
 - 15) Requires an operator to preserve all books, records, papers, accounts, documents, video, and other writings that are reasonably necessary to review compliance with the bill's provisions for at least four years, or for any longer period otherwise required by law.
 - 16) Requires an operator to report unusual occurrences and other significant health and 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, in a form and manner prescribed by the enforcing agency.

- 17) Permits an enforcing agency to require a covered civil confinement facility to take specified actions to correct any noncompliance, 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 an approved corrective plan.
- 18) For a covered civil confinement facility already licensed by existing law, permits an applicable enforcement agency to enforce this bill's provisions using its existing corrective action, probation, civil sanction, suspension, or other enforcement authority.
- 19) For a covered civil confinement facility not otherwise licensed, permits the Department to enforce the bill's provisions by: 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, material, or uncured violations that create a substantial threat to health and safety.
- 20) Specifies that, before imposing any monetary penalty under 18) or 19), the Department or enforcing agency must provide notice and an opportunity to be heard consistent with any applicable law.
- 21) Prohibits an operator of a covered civil confinement facility from retaliating against any employee, detainee, contractor, patient, resident, detainee, family member, attorney, advocate, volunteer, or other person who reports, or participates in an investigation or proceeding concerning a violation of the bill's provisions or any applicable health or safety standard.
- 22) Specifies that its provisions do 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 its provisions only regulate facility conditions, standards of care and confinement, and related health and safety requirements applicable to covered civil confinement facilities.
- 23) Makes its provisions severable, and makes various findings and declarations.

COMMENTS

1. Author's statement

According to the author:

All states have both the obligation and legal authority, as granted by the Tenth Amendment to the United States Constitution, to maintain the health and safety

of residents within their borders. California has long been a leader in protecting the health and safety of its residents, yet a significant segment of our custodial population remains vulnerable due to a lack of state oversight. Private detention facilities function as for-profit businesses within our borders, but they currently operate without the comprehensive state licensing required of nearly every other congregate care or healthcare-related entity in California. SB 942 closes this regulatory gap, ensuring that profit-driven motives never supersede the basic human rights and safety of individuals held in detention.

The urgency of this legislation cannot be overstated. Recent data confirms that the past year was the deadliest for U.S. Immigration and Customs Enforcement in over twenty years, with thirty-two confirmed deaths in custody. In California, the impact is particularly acute because all immigrants held in federal detention are housed in privately operated facilities. These centers have become notorious for a pattern of neglect. Independent investigations by the California Department of Justice and the federal Office of the Inspector General have consistently revealed inhumane conditions, including extreme medical and mental health neglect, unsanitary living conditions, contaminated food and water supplies, and the misuse of solitary confinement and physical abuse.

While these facilities are bound by federal contracts to maintain specific standards, oversight has been functionally non-existent. Federal authorities have repeatedly identified contractual violations but have failed to force remediation, allowing a culture of impunity to thrive. California cannot wait for federal intervention to protect the people within its own borders. SB 942 establishes a state-level licensure framework through the State Department of Public Health. Under this bill, private detention operators must secure and maintain a state license as a condition of their operation. This licensure is directly tied to the health and safety standards already outlined in their federal contracts, meaning the state is simply holding them to the promises they have already made.

To ensure this is more than just a paper requirement, SB 942 provides the state with aggressive enforcement mechanisms. The state gains the authority to issue, deny, suspend, or revoke licenses based on performance. The bill also authorizes civil penalties of up to \$25,000 per violation, per day, ensuring that neglect becomes a liability rather than a cost-saving measure. Additionally, facilities found in violation must implement and follow mandatory corrective action plans. Finally and crucially, the bill prohibits retaliation against employees or detained individuals who report health and safety violations, which ensures the truth can reach state regulators.

California has a moral and legal interest in overseeing the conditions of confinement within its geography. Private corporations should not be allowed to operate shadow carceral systems that bypass state safety norms. SB 942 brings

these facilities into the light, demanding transparency, accountability, and a commitment to the basic dignity of every human being.

2. Private detention facilities in the United States

The federal government, primarily through the Immigration and Customs Enforcement agency (ICE), enforces federal immigration laws in the interior of the country by placing individuals suspected of being deportable into deportation proceedings, carrying out expedited removals in certain circumstances, or executing outstanding deportation orders.¹ When someone is arrested by ICE for immigration enforcement, they may be detained to await adjudication of their deportation case or the effectuation of their deportation. Any person in the United States who is not a citizen has some level of risk that they could be deported from the United States, and individuals of all varieties of immigration status, from lawful permanent residents to those who are applying for asylum or who are undocumented, may be detained pending adjudication of their cases or a charge of deportability. Most individuals detained can request a hearing regarding their release on bond. Immigration detention is considered civil, non-punitive.² Nonetheless, DHS detains many immigrants for months or even years, often subjecting them to harsh conditions of confinement.

The Trump Administration has substantially increased immigration detention in the past year. It has asserted the power to detain virtually all immigrants indefinitely without review, despite the majority of courts repeatedly rejecting this assertion of authority.³ This has meant an increasing number of individuals being detained for immigration enforcement, and for longer periods of time. As of February 2026, 68,289 individuals were in immigration detention, a 65 percent increase from February of last year.⁴ In California, there are 6,459 individuals currently being detained in immigration detention facilities.⁵

¹ Deportation proceedings are administrative proceedings that are adjudicated by an immigration judge, who must make the determination of whether the non-citizen respondent is deportable, and whether they qualify for relief from deportation, like asylum. Expedited removal is a process by which an immigration officer, not an immigration judge, may remove an individual from the United States without a hearing on their deportability. While expedited removal has historically been limited to narrow circumstances where an individual is apprehended close to the border, the Trump Administration has significantly expanded the circumstances to which it applies, despite significant due process and other constitutional concerns with the practice.

² *Zadvydas v. Davis* (2001) 533 U.S. 678, 690.

³ Kyle Cheney, "Our running list of judges who have ruled on ICE's mass detention policy," Politico (Feb. 18, 2026) https://www.politico.com/news/2026/02/18/trump-judges-immigration-detention-00784614?sp_pass_consent=true.

⁴ TRAC Immigration, "ICE Detainees," TRAC Reports (accessed Mar. 30, 2026) https://tracreports.org/immigration/detentionstats/pop_agen_table.html.

⁵ *Id.*

Almost all immigration detention centers in the United States are owned and operated by private companies that contract with the federal government to provide immigration detention. All immigration detention centers in California are operated as private detention centers. Currently, there are seven private detention centers in California: the Golden State Annex; Mesa Verde ICE processing center; Adelanto ICE processing center; Desert View Annex; Otay Mesa Detention Center; Imperial Regional Detention Facility; and the California City Detention Center.

While private detention centers are required to meet a variety of health and safety standards set by ICE, they regularly fail to meet those standards and are plagued by reports of unsafe and inhumane conditions.⁶ These include reports of inadequate medical care, a lack of access to safe drinking water, inedible or spoiled food, the use of solitary confinement and extreme temperatures or 24-hour overhead lighting, poor and unsanitary amenities, overcrowding, and harassment and abuse.⁷ In addition, there are numerous deaths in ICE custody every year; in the past year, 46 individuals have died in ICE custody or detention, the highest number in over two decades.⁸

3. Recent California laws meant to ensure the safety of federal detention facilities

Given the regular reports of inhumane conditions in private detention facilities, the state has passed a variety of laws aimed at regulating these facilities and ensuring they meet their health and safety requirements. In 2017, the Legislature enacted SB 29 (Lara, Ch. 494, Stats. 2017) to prohibit a city, a county, or a local law enforcement agency from entering into a contract to detain individuals for immigration enforcement. SB 29 also prohibited a city or county or public agency from approving or signing a deed or approving a permit for the construction or use of an existing building for private immigration detention facilities, unless the agency has provided notice to the public and heard public comments about the proposed detention facility. That same year, the Legislature passed SB 54 (De Leon, Ch. 495, Stats. 2017) to prohibit state and local law enforcement agencies from using money or personnel to investigate, interrogate, detain, detect, or arrest individuals for immigration enforcement purposes. The Legislature also

⁶ Akash Pillai et al., “Health issues for immigrants in detention centers,” Kaiser Family Foundation (Sept. 30, 2025), <https://www.kff.org/racial-equity-and-health-policy/health-issues-for-immigrants-in-detention-centers>.

⁷ *Id.*; Disability Rights California, “Newly Opened California City ICE Detention Facility: Dangerous for Disabled People” (Nov. 3, 2025) <https://www.disabilityrightscalifornia.org/reports/california-city-ice-processing-center-a-dangerous-expansion-of-immigration-detention-in>; Muzaffar Chisti & Valerie Lacarte, “U.S. detention grows to record heights under Trump Administration,” Migration Policy Institute (Oct. 29, 2025) <https://www.migrationpolicy.org/article/trump-immigrant-detention>.

⁸ Akash Pillai et al., “Deaths and health care issues in ICE detention centers under the second Trump Administration,” Kaiser Family Foundation (Mar. 25, 2026), <https://www.kff.org/racial-equity-and-health-policy/deaths-and-health-care-issues-in-ice-detention-centers-under-the-second-trump-administration/>.

attempted to ban new private detention facilities in the state by passing AB 32 (Bonta, Ch. 739, Stats. 2019); however, that law was overturned as unconstitutional in 2022.⁹

The Legislature also has enacted a number of laws permitting the inspection of private detention facilities and requiring compliance with health and safety standards. In 2017, AB 103 (Committee on Budget, Ch. 17, Stats. 2017) required the Attorney General to review and report on the conditions of confinement, standard of care, and due process rights in immigration detention facilities in the state. The Attorney General's most recent report from 2025 found deficiencies in suicide prevention practices, excessive use of force, poor mental health care, due process issues, and multiple violations of ICE detention standards at all of the immigration detention centers in the state.¹⁰ In 2024, SB 1132 (Durazo, Ch. 183, Stats. 2024) also authorized county health officials to inspect private detention facilities to evaluate health and safety conditions.

In 2020, the Legislature enacted AB 3228 (Bonta, Ch. 190, Stats. 2020) to require any private detention facility to comply with ICE's detention standards of care and confinement that the facility agreed upon in its contract with the federal government. If these standards are not complied with, AB 3228 provides any individual injured by that tortious act of noncompliance to bring a civil action for relief, and permits a court to award a prevailing plaintiff reasonable attorney's fees and costs. (Gov. Code § 7320.)

4. SB 942 requires civil confinement facilities to register with the state and comply with applicable health and safety requirements

There are a variety of types of civil confinement facilities that operate in the state. Some facilities operate under the Lanterman-Petris-Short Act to forcibly confine individuals with mental health illnesses who are a danger to themselves and others. Other civil confinement facilities include psychiatric health facilities that provide 24-hour inpatient care for individuals with mental health disorders and severe substance use disorders, a mental health rehabilitation center through the community residential treatment system, and a psychiatric residential treatment facility, among others.

Private detention facilities in the state are not regulated for health and safety like many other civil confinement facilities in the state. SB 942 aims to apply to private detention centers the same standards and registration requirements that are applied to other civil confinement facilities where individuals are detained or committed for non-penal purposes. It provides that all civil confinement facilities not otherwise licensed, designated, or approved under state law or a local ordinance must file an annual registration with the Department of Public Health (Department). It requires the civil confinement facility to identify in its registration: the operator, facility location,

⁹ *GEO Group, Inc. v. Newsom* (2022) 50 F.4th 745.

¹⁰ Office of the Attorney General, *2025 Report: Immigration Detention in California*, Dept. of Justice (Apr. 2025), available at <https://oag.ca.gov/news/press-releases/attorney-general-bonta-sounds-alarm-releases-fourth-immigration-detention>.

contracting entity, maximum capacity, and the standards of care and confinement in any operating contract for the facility. The Department may only deny a civil confinement facility's registration for failure to provide this required information. A civil confinement facility also must comply with applicable federal, state, and local health and safety law, any applicable licensure requirements, the standards of care and confinement set forth in a contract for its operation, and any approved facility policies and procedures. The requirements of the bill are required to be applied in the same manner and to the same extent to a private detention facility as it is to other similarly-situated covered civil confinement facilities, and prohibits a standard, inspection requirement, or corrective action or remedy from being applied to a private detention facility unless an analogous requirement may be imposed on a similarly-situated covered civil confinement facility.

SB 942 requires the Department to adopt rules and regulations necessary to implement its provisions. It also permits the Department 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 responsibilities to avoid duplication of effort and to promote consistent oversight.

SB 942 specifically only applies to facilities used for civil confinement. It defines a covered "civil confinement facility" as a non-penal, 24-hour facility in which persons may be detained, committed, held for evaluation, treatment, stabilization, restoration, or civil immigration custody, operated by a private entity or a government entity through a contract with a private entity. A covered civil confinement facility includes a private detention facility, a facility for the evaluation and treatment of a person with a mental health disorder that is a danger to themselves or others under the Lanterman-Petris-Short Act (LPS Act), a psychiatric health facility, a mental health rehabilitation center, and a psychiatric residential treatment facility. SB 942 does not apply to a state prison, county jail, city jail, juvenile hall, or any facility operated by the Department of Corrections and Rehabilitation or a local correctional authority. Its application applies to facilities for civil confinement, not those for punitive or criminal incarceration.

5. SB 942 requires an enforcing agency to complete inspections and enforce health and safety requirements on civil confinement facilities

SB 942 requires an enforcing agency of the bill's provisions and state and local regulations on civil confinement facilities to conduct regular inspections of civil confinement facilities within its jurisdiction, and permits the agency to conduct any additional inspections based on complaints, unusual occurrences, or risk indicators. It requires an operator of a civil confinement facility 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, to the enforcing agency within 24 hours of the incident. It also requires an operator to preserve books, records, papers, documents, video, accounts, and other writings reasonably necessary to review the

facility's compliance for four years, and requires an operator to furnish all information, records, and documentation requested by the enforcing agency that are reasonably necessary to review the facility's compliance with the bill's provisions and applicable health and safety requirements.

If the civil confinement facility is already licensed under state law or a local ordinance, SB 942 specifies that an enforcement agency may enforce the bill's provisions using its existing corrective action, probation, civil sanction, suspension, or other existing enforcement authority. For a civil confinement facility not otherwise licensed, SB 942 permits an enforcing agency to: issue a cease and desist order; impose civil penalties not exceeding \$25,000 per violation per day; require compliance with a mandatory corrective action plan; and suspend the facility's registration for repeated, material, or uncured violations that create a substantial threat to health or safety. For any permitted imposition of a monetary penalty, suspension, or comparable sanction, the Department or enforcing agency must provide notice and an opportunity to be heard, consistent with applicable law. Lastly, SB 942 prohibits an operator of a civil confinement facility from retaliating against any employee, detainee, contractor, patient, resident, detainee, family member, attorney, advocate, volunteer, or other person who reports or participates in an investigation or proceeding concerning a violation of SB 942's requirements or health and safety standards.

6. Conclusion

The states have broad police powers to regulate for the public health, safety, and general welfare. It is within the state's general police powers to ensure the health and welfare of inmates and detainees within its borders.¹¹ A state's regulations within an area of historic state police powers are presumed to not be preempted by federal law.¹² Furthermore, private contractors do not stand on the same footing as the federal government itself, and thus may be more regulated by states than the federal government can be.¹³ While state laws cannot discriminate against the federal government under the intergovernmental immunity doctrine, a state law does not discriminate against the federal government unless it treats a non-federal government actor better than it does the federal government.¹⁴

SB 942 applies its requirements to all civil-confinement facilities, ensuring that every civil confinement facility in the state is subject to health and safety oversight. It has a number of provisions that aim to ensure that its requirements apply equally to private detention facilities as they do to similarly-situated civil confinement facilities. Moreover, these provisions apply to detention facilities run by private entities, not to

¹¹ *U.S. v. California* (2019) 921 F.3d 865, 886.

¹² *Knox v. Brnovich* (2018) 907 F.3d 1167, 1174.

¹³ *GEO Group, Inc.*, *supra* note 9, p. 750.

¹⁴ *U.S. v. California*, *supra* note 11, p. 881.

the federal government itself. Through these requirements, SB 942 permissibly aims to ensure the public health and the health and welfare of all those civilly confined within the state.

SUPPORT

Immigrant Defense Advocates (sponsor)

CFT – a Union of Educators & Classified Professionals, AFT, AFL-CIO

Indivisible CA: StateStrong

La Cosecha

Riverside Sheriff's Association

Secure Justice

OPPOSITION

None received

RELATED LEGISLATION

Pending Legislation:

SB 1367 (Cervantes, 2026) prohibits a city or county from approving new land uses or changes of use that permit a detention facility, as specified. SB 1367 is currently pending before this Committee.

SB 995 (Pérez, 2026) creates the Involuntary Residential Facilities Health and Safety Act of 2026 to authorize the Office of the State Fire Marshall, the State Department of Public Health, the State Water Resources Control Board, and the Department of Industrial Relations to conduct periodic inspections of an involuntary residential facility, as defined, in order to evaluate compliance with applicable health, safety, building, environmental, and labor standards, and requires the operator of an involuntary residential facility to provide reasonable access to an inspecting agency, maintain records demonstrating compliance, submit reports to the inspecting agencies, and to correct any violation. SB 995 also provides a civil penalty for a violation of these provisions. SB 995 is currently pending before this Committee and will be heard on the same day as this bill.

SB 941 (Padilla, 2026) prohibits a commissary in a private detention facility from selling an article at a 35 percent or greater markup above the amount paid to a vendor for the article. SB 941 is currently pending on the floor of the Senate.

Prior Legislation:

SB 1132 (Durazo, Ch. 183, Stats. 2024) also authorized county health officials to inspect private detention facilities to evaluate health and safety conditions.

AB 3228 (Bonta, Ch. 190, Stats. 2019) required private detention facilities in the state to comply with and adhere to the detention standards of care and confinement agreed to in the facility's contract for operations, and permitted individuals injured by a private detention facility's failure to comply with these standards of care to bring a civil action.

AB 32 (Bonta, Ch. 739, Stats. 2019) prohibited, on or after January 1, 2020, the Department of Corrections and Rehabilitation from entering into or renewing a contract with a private, for-profit prison to incarcerate state prison inmates, and prohibited, any person from operating a private detention facility in the state. AB 32's prohibition on private detention facilities was subsequently struck down as unconstitutional.

SB 54 (De Leon, Ch. 495, Stats. 2017) prohibited state and local law enforcement agencies from using money or personnel to investigate, interrogate, detain, detect, or arrest individuals for immigration enforcement purposes, among other provisions.

SB 29 (Lara, Ch. 494, Stats. 2017) prohibited a city, county, city and county, or a local law enforcement agency from entering into a contract to detain noncitizens for immigration custody, and prohibited a city or county from approving or signing a deed or other document to convey land or issue a permit for the construction or reuse of a building to housing or detain noncitizens for immigration proceedings unless it has provided specified notice to the public and solicited and heard public comments regarding the proposed detention facility.

AB 103 (Committee on Budget, Ch. 17, Stats. 2017) required the Attorney General to review and report on the conditions of confinement, standard of care, and due process rights in immigration detention facilities in the state.

PRIOR VOTES:

Senate Health Committee (Ayes 9, Noes 0)
