

**COVER PAGE**  
**Department of Human Services**

FY 2019-20 CAPITAL CONSTRUCTION REQUESTS (LISTED IN OSPB PRIORITY ORDER)

RECOMMENDED FOR FUNDING BY OSPB:

- Facility Refurbishment for Safety, Risk Mitigation, and Modernization, DYS (*continuation*)
- Upgrade Campus Utility Infrastructure, CMHI at Pueblo (Capital Renewal) (*continuation*)
- F2 and F3 Cottage Renovation
- Capital Improvements at Regional Centers (*cash-funded*)
- Facility Master Plan, Department-Wide (*cash-funded*)

NOT RECOMMENDED FOR FUNDING BY OSPB:

- Upgrade Campus Utility Infrastructure, CMHI at Fort Logan (Capital Renewal)
- Suicide Risk Mitigation Continuation

TOTAL: FY 2019-20 CAPITAL CONSTRUCTION STATE-FUNDED REQUEST AMOUNT = **\$51,185,857**

FY 2019-20 CONTROLLED MAINTENANCE REQUESTS (14)

RECOMMENDED FOR FUNDING BY OSPB:

LEVEL I:

- Repair/Replace Fire Protection Systems, GYSC and LMYSC
- Replace Fire Control System, CMHIP, RVYSC

LEVEL II:

- Refurbish HVAC Systems, B Building, CMHIFL

NOT RECOMMENDED FOR FUNDING BY OSPB:

LEVEL II:

- Refurbish HVAC and Mechanical Equipment, DYS
- Refurbish Ash Conveyor System, Heat Plant, CMHIP
- Replace Roofs, Five Buildings, CMHIFL
- Hydronic Valves, Southern District
- Refurbish HVAC Systems, Three Youth Services Sites

LEVEL III:

- Refurbish Secondary and Emergency Electrical Systems, Tier 1, CMHIP
- Replace Patient Buildings Windows, CMHIP
- Replace Roofs, DYS, Three Sites
- Replace Gym Floors, DYS
- Replace Flooring, Five Buildings, CMHIFL
- Upgrade Interiors Group Home, PRC, DC

## COVER PAGE

### Department of Human Services (Cont.)

#### HISTORY OF STATE FUNDING

- **\$123.3 million** has been appropriated to the department on behalf of capital projects since FY 2014-15. This represents **12.3 percent** of the total amount appropriated on behalf of all capital construction and controlled maintenance projects during this period.
  
- **\$58.5 million** was appropriated in FY 2018-19, including \$23.9 million authorized through Senate Bill 17-267 for controlled maintenance.

#### INVENTORY OF GENERAL FUND SUPPORTED FACILITIES

- The General Fund supported inventory of department facilities totals **3,556,073 GSF**. This total represents **7.3 percent** of the entire General Fund supported inventory of state buildings.

#### RECENT CDC VISITS

- Colorado Veterans Community Living Center at Homelake (May 2018)
- Colorado Mental Health Institute at Fort Logan (October 2017)
- Colorado Mental Health Institute at Pueblo (June 2017)
- Pueblo Youth Services Center (June 2017)
- Colorado Veterans Community Living Center at Rifle (June 2016)
- Grand Junction Regional Center Campus (June 2016)
- Zebulon Pike Youth Services Center, Colorado Springs (June 2015)
- Colorado Veterans Community Living Center at Fitzsimons, Aurora (August 2014)

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Facility Refurbishment for Safety, Risk Mitigation, and Modernization, Division of Youth Services*

### PROGRAM PLAN STATUS

2015-031

Approved Program Plan?  Yes  No

Date Approved:

### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	3 of 10	
OSPB	2 of 62	Recommended for funding.

### PRIOR APPROPRIATION AND REQUEST INFORMATION

<u>Fund Source</u>	<u>Prior Approp.</u>	<u>FY 2019-20</u>	<u>FY 2020-21</u>	<u>Future Requests</u>	<u>Total Cost</u>
CCF	\$18,211,822	\$2,638,927	\$0	\$0	\$20,850,749
<b>Total</b>	<b>\$18,211,822</b>	<b>\$2,638,927</b>	<b>\$0</b>	<b>\$0</b>	<b>\$20,850,749</b>

### ITEMIZED COST INFORMATION

<u>Cost Item</u>	<u>Prior Approp.</u>	<u>FY 2019-20</u>	<u>FY 2020-21</u>	<u>Future Requests</u>	<u>Total Cost</u>
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$2,266,668	\$192,510	\$0	\$0	\$2,459,178
Construction	\$14,129,117	\$2,206,515	\$0	\$0	\$16,335,632
Equipment	\$300,000	\$0	\$0	\$0	\$300,000
Miscellaneous	\$28,173	\$0	\$0	\$0	\$28,173
Contingency	\$1,487,864	\$239,902	\$0	\$0	\$1,727,766
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$18,211,822</b>	<b>\$2,638,927</b>	<b>\$0</b>	<b>\$0</b>	<b>\$20,850,749</b>

### PROJECT STATUS

This is the final phase of a continuation request. Phase V was funded in FY 2018-19.

To date, the project has completed a comprehensive safety and risk mitigation assessment at 12 facilities, made critical security upgrades to five homes, replaced metal detectors in six homes, and completed design to mitigate the risk of self-harm in two homes. Design work on self-harm mitigation and security is underway for four homes.

### PROJECT DESCRIPTION / SCOPE OF WORK

The Division of Youth Services (DYS) within the Department of Human Services is requesting state funds for the final phase of a six-phase project to address safety and self-harm risks in 12 DYS facilities. The project mitigates the risk of self-harm in sleeping rooms, restrooms, and seclusion rooms and replaces components of the security and electronic systems, as needed.

Phase I conducted a comprehensive assessment of, and planning process for, the necessary renovations at division facilities. The assessment was completed in December 2014, and department staff priced and prioritized the needs for future requests in spring 2015. The assessment identified 787 distinct deficiencies at division facilities. The department has altered the scope for Phase VI to address recent suicides and escapes, or escape attempts, at the DYS facilities. Phase VI performs the following improvements:

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Facility Refurbishment for Safety, Risk Mitigation, and Modernization, Division of Youth Services*

- replacing sleeping room tube steel beds that present a self-harm risk with rotationally molded beds at Mount View, Gilliam, Marvin W. Foote, Spring Creek, Platte Valley, and Grand Mesa Youth Services Centers (YSCs); and
- supplementing the existing perimeter fence with climb- and cut-resistant fencing at Lookout Mountain and Mountview YSCs.

The department explains that it is seeking a supplemental appropriation to fund the replacement of tube steel beds at Lookout Mountain, Pueblo, and Zebulon Pike YSCs.

**Cost assumption.** The cost assumption is based on the detailed cost estimates provided by the private firm that conducted the safety and risk mitigation assessment. The costs for Phase VI were updated in September 2018 by the original firm to address the more pressing needs facing DYS. Another firm added cost estimates for secure fencing. The project cost accounts for future inflation. The project is not required to meet the Art in Public Places Program requirements because the requirements have been waived by the manager of the program. It is not required to meet the requirements of the High-Performance Certification Program because it does not involve the substantial renovation of a facility.

### PROJECT JUSTIFICATION

The original scope of the project included addressing the facility deficiencies identified during the first phase of the project by the hired consultant, with safety and risk mitigation taking priority over facility modernization and less critical items. The department, with the help of the consultant, has changed the scope of Phase VI to address the most exigent needs brought to light by recent events. Since spring 2017, there have been two successful suicides, and three escape incidents at DYS-operated facilities that the department characterizes as sophisticated and dangerous. In FY 2017-18, seven youth escaped secure custody by cutting or climbing perimeter fences at three different YSC sites. Lookout Mountain also recently experienced a security breach because the perimeter fence was easily approached without being detected. The department explains that the existing fencing at Lookout Mountain and Mount View YSCs is vulnerable to security breach due to the length and proximity of the fences, which enclose between 18 and 21 acres of land, and because the fences can be quickly and easily cut.

According to the department, failing to fund Phase VI means that the state will knowingly accept the increased, compounded liability and safety hazards identified by the third-party assessment, and DYS would need to divert funds from its operating budget to address the critical needs, potentially at a higher cost.

### PROGRAM INFORMATION

The Division of Youth Services oversees the state's juvenile detention, commitment, and parole programs and is statutorily mandated to provide for the care and supervision of youth committed to the custody of the Colorado Department of Human Services. The DYS serves youth between the ages of 10 and 21 who are pre-adjudicated, sentenced, or committed to the division. The division also manages and oversees state-funded and locally administered programs that provide services to youth at risk of further progressing into the juvenile justice system. The division has 12 facilities located throughout the state; ten facilities are operated directly by the division, and two are privately operated. Many of the buildings in the system were remodeled in 1988, but there have been no substantive upgrades since that time.

The homes addressed through the current request are located in Colorado Springs (Spring Creek), Englewood (Marvin W. Foote), Greeley (Platte Valley), Lakewood (Mount View), Denver (Gilliam), Grand Junction (Grand Mesa), and Golden (Lookout Mountain).

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

Facility Refurbishment for Safety, Risk Mitigation, and Modernization, Division of Youth Services

### PROJECT SCHEDULE

	Start Date	Completion Date
Design	October 2019	December 2019
Construction	January 2020	August 2020
Equipment		
Occupancy		August 2020

### SOURCE OF CASH FUNDS

This project is not funded from cash sources.

### OPERATING BUDGET

DHS says the request will not materially impact operating expenses, and there may be some minor savings on building repairs once the project is complete.

### STAFF QUESTIONS AND ISSUES

1. Once the final phase of this project is funded, will the department bring forward a new project for FY 2020-21 or beyond to address upgrades identified in the 2015 assessment that are outside of the scope of the current project, such as reconfiguring program space or making upgrades to finishes and systems past their useful life?

*The department is continuing to assess outstanding facility physical plant needs outside the scope of the Facility Refurbishment project although a specific time frame or scope for a new request has not yet been established. As previously reported, the existing project covers only a portion of the deficiencies identified in the 2015 statewide facility assessment as part of the Reilly Johnson Architecture Facility Refurbishment capital construction project. However, in the summer of 2017 DYS experienced the tragedy of two youth suicides in its Mount View Youth Services Center facility. These incidents are driving the division to reassess priorities for self-harm mitigation in light of lessons learned from these incidents.*

*Additionally, the DYS had initiated and completed the planning process for three facilities (Zebulon Pike, Grand Mesa and Platte Valley). An Operational Program Plan (OPP) to be followed by a Facility Program Plan (FPP) were funded through DYS Operational Funds and completed by June 30, 2018. The facilities identified for this initiative range in age from 20-30 years old. Subsequently DYS has determined that the best means of integrating all the ongoing Division-wide in a cohesive manner in light of extant conditions would be to expand the scope of the facility planning project and undertake a system-wide facility master plan for DYS. All DYS facilities were designed for a different clientele than are currently served. The youth in the DYS today have a myriad of needs, especially in the realm of vocational training and trauma responsive treatment, to help reintegrate them into their communities and reduce recidivism. Also, facilities built 20-30 years ago cannot provide optimal program delivery due to the changes in program delivery philosophies. DYS facilities have unique needs based on the youth demographic they serve; but face challenges due to the lack of funding. Some of the deficiencies identified at these facilities include inadequate space for vocational educational programming, medical clinics, youth calming rooms, meetings, and rooms to engage and host families.*

*Finally, HB17-1329 requires the division to begin a 24-bed pilot project on the grounds of Lookout Mountain YSC to enhance trauma responsive programming and a home-like, non-institutional environment. This pilot will serve as a model to further cultural and programmatic change throughout the Division of Youth Services. Lessons learned from operating the pilot project in current physical plant space may result in further facility planning dependent on funding availability and program identified deficiencies.*

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Upgrade Campus Utility Infrastructure, CMHI at Pueblo (Capital Renewal)*

### PROGRAM PLAN STATUS

2015-049

Approved Program Plan?  Date Approved:

### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	8 of 10	
OSPB	8 of 62	Recommended for funding.

### PRIOR APPROPRIATION AND REQUEST INFORMATION

Fund Source	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
CCF	\$0	\$9,155,876	\$12,595,526	\$14,269,096	\$36,020,498
<b>Total</b>	<b>\$0</b>	<b>\$9,155,876</b>	<b>\$12,595,526</b>	<b>\$14,269,096</b>	<b>\$36,020,498</b>

### ITEMIZED COST INFORMATION

Cost Item	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$1,995,816	\$753,938	\$1,284,088	\$4,033,842
Construction	\$0	\$6,327,708	\$10,696,540	\$11,687,817	\$28,712,065
Equipment	\$0	\$0	\$0	\$0	\$0
Miscellaneous	\$0	\$0	\$0	\$0	\$0
Contingency	\$0	\$832,352	\$1,145,048	\$1,297,191	\$3,274,591
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$9,155,876</b>	<b>\$12,595,526</b>	<b>\$14,269,096</b>	<b>\$36,020,498</b>

### PROJECT STATUS

This is the fifth request for funding. Funding was first requested for FY 2014-15.

### PROJECT DESCRIPTION / SCOPE OF WORK

The Department of Human Services (DHS) is requesting state funds for the first phase of a three-phase capital renewal project to complete a number of critical controlled maintenance projects on the Colorado Mental Health Institute (CMHI) at Pueblo campus. The capital renewal approach focuses on upgrading building systems, infrastructure, and the basic building components within existing state-owned buildings on a building-by-building basis, rather than the project-by-project approach used for controlled maintenance. The project installs new water and sewer systems, reinforces the tunnel infrastructure, replaces fire hydrants, and installs new roadways, parking lots, and sidewalks. The department will work south to north to complete the campus infrastructure repairs.

**Cost assumption.** The cost assumption is based on estimates from local contractors and engineers, and on recent projects. The project cost accounts for future inflation at a rate of 4 percent per year. As a capital renewal request, the project is not required to comply with the requirements of the Art in Public Places or High-Performance Certification programs.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Upgrade Campus Utility Infrastructure, CMHI at Pueblo (Capital Renewal)*

### PROJECT JUSTIFICATION

According to the department, the project completes upgrades and improvements initiated in the last 15 years through various capital construction, controlled maintenance, and emergency controlled maintenance projects. DHS anticipates that completing the various improvements detailed in this request as a single project rather than multiple controlled maintenance requests will be less expensive. These savings will be made possible through an accelerated construction schedule resulting in limited cost escalation and a reduction in overhead costs. Furthermore, the state will likely avoid future emergency controlled maintenance costs for repairs on the campus.

The department says that the deterioration of the campus infrastructure causes disruptions to patient care and management and leads to expensive ongoing and controlled maintenance costs. Specifically, the project abates asbestos in and improves the safety of the ingress to and egress from the campus tunnel system, improves sidewalks to comply with accessibility code, addresses electrical code issues, and replaces other systems that have exceeded their useful life. Specific concerns with existing infrastructure include:

- the sewer mains are an outdated clay tile pipe system and are cracked and brittle;
- there is significant root incursion in the sanitary sewers, and they do not meet code;
- the steps in the manholes are degraded in many locations;
- the water lines are made, in part, of cast iron and pose ongoing water quality and reliability issues;
- most campus fire hydrants have exceeded their useful life and at least 21 have been identified for replacement under the project;
- the oldest sections of the utility tunnel system require renovation, including removal of asbestos-containing materials; and
- moisture and heavy traffic have deteriorated campus roads and sidewalks.

### PROGRAM INFORMATION

The mental health institutes provide residential services to individuals of all ages with complex, serious, and persistent mental illness. The majority of the patients are referred to the facility by community mental health centers when patients are deemed too unstable for community services to be effective.

CMHI at Pueblo was established in 1879. The campus spans 300 acres and houses the mental health institute, and some Division of Youth Services and Department of Corrections functions. The latter two functions range in security level from minimum to maximum, with multiple secure units.

### PROJECT SCHEDULE

	Start Date	Completion Date
Design	July 2019	April 2020 - April 2022
Construction	April 2020	April 2022 - April 2024
Equipment		
Occupancy		

### SOURCE OF CASH FUNDS

This project is not funded from cash sources.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Upgrade Campus Utility Infrastructure, CMHI at Pueblo (Capital Renewal)*

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### OPERATING BUDGET

The operating impact is unknown; however, it is anticipated that the department will realize cost savings from a reduction in ongoing maintenance and repair costs.

### STAFF QUESTIONS AND ISSUES

None.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*F2 and F3 Cottage Renovation*

### PROGRAM PLAN STATUS

2020-042

Approved Program Plan?  Date Approved:

### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	1 of 10	
OSPB	14 of 62	Recommended for funding.

### PRIOR APPROPRIATION AND REQUEST INFORMATION

Fund Source	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
CCF	\$0	\$17,835,851	\$0	\$0	\$17,835,851
<b>Total</b>	<b>\$0</b>	<b>\$17,835,851</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,835,851</b>

### ITEMIZED COST INFORMATION

Cost Item	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$1,438,101	\$0	\$0	\$1,438,101
Construction	\$0	\$14,150,991	\$0	\$0	\$14,150,991
Equipment	\$0	\$483,808	\$0	\$0	\$483,808
Miscellaneous	\$0	\$141,510	\$0	\$0	\$141,510
Contingency	\$0	\$1,621,441	\$0	\$0	\$1,621,441
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$17,835,851</b>	<b>\$0</b>	<b>\$0</b>	<b>\$17,835,851</b>

### PROJECT STATUS

This is a new, never-before-requested project.

### PROJECT DESCRIPTION / SCOPE OF WORK

The Department of Human Services (DHS) is request state funds to renovate 17,532 GSF in two housing units at the Colorado Mental Health Institute (CMHI) at Fort Logan, and to construct additions to the units totaling 2,059 GSF. The renovations will add 44 inpatient psychiatric beds to the DHS inventory, helping to alleviate a bed shortage driven by an increase in court referrals and a settlement agreement stemming from a lawsuit against the department concerning the wait times that pretrial detainees in Colorado jails experience before receiving competency evaluations or restorative treatment.

Under the project, the two buildings will be substantially demolished while retaining building foundations, structural steel, and roofing substructures. The buildings will then be reconstructed to match the floor plan of an existing CMHI at Fort Logan facility, including constructing additions to add program and staff space and to create secure facility entrances. A portion of the crawl space in each building will be excavated to create a basement for installing new mechanical, plumbing, electrical, and data equipment. This new basement space will be positioned to connect the new systems to existing utilities in the campus tunnel complex, and will free up space for additional patient rooms and program space.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *F2 and F3 Cottage Renovation*

**Cost assumption.** The cost assumption was developed by a private contractor based on current industry standards for renovation and new construction of similar facilities. The cost per GSF is \$824. The project cost includes 4.0 percent inflation to the start of construction. The project meets the Art in Public Places and High-Performance Certification Program requirements.

#### PROJECT JUSTIFICATION

DHS cites an unanticipated increase in the number of competency evaluations and court referrals and the stipulations of a lawsuit settlement as the factors leading to a deficit of inpatient psychiatric bed space at its mental health institutes.

**Court referrals.** The department says the number of competency restorations and court referrals it must accommodate is not within its control, and stems from a number of issues such as judicial system practices and the increase in the overall state population. When a court orders a defendant to undergo a forensic evaluation, such as a sanity or competency evaluation, DHS admits the defendant to one of its mental health institutes to conduct the evaluation. If a defendant is found incompetent to stand trial, the department also admits the defendant to restore competency so that he or she may continue through the legal process. To determine its bed needs, DHS has been preparing projections using actual data over ten years, but this method has resulted in underestimations. From FY 2001-02 to FY 2016-17, the number of court referrals has increased from 538 to 3,174, or 490 percent over that time period. Using data from the past two fiscal years, the department now projects that the number of court referrals will rise to 12,307 in FY 2022-23, for a 288 percent increase from FY 2016-17. Based on a study commissioned by the department, it anticipates a need to expand CMHIFL alone by 150 beds and replace the facility's 94 beds.

In 2011, a public interest advocacy firm brought suit against DHS for failing to timely admit criminal defendants for competency evaluations and to perform competency restorations. Under a 2012 settlement agreement, the department agreed to admit pretrial detainees for these services no later than 28 days after a detainee is ready for admission. As court filings continue to rise, DHS says that failure to comply with the settlement agreement may result in further legal action, including a possible contempt of court judgment or reopening of the original court case, which would potentially lead to significant costs to the state.

**Project alternatives.** Based on the commissioned study, the department considers this project to be the most timely, short-term solution to its bed deficit situation. Renovating the cottages represents a less expensive and time-consuming alternative to constructing new, equivalent-size facilities. The department may pursue a funding request for new mental health institutes, but it says this is a large undertaking that would not provide additional bed capacity until at least 2027.

#### PROGRAM INFORMATION

CMHI at Fort Logan operates 94 inpatient psychiatric beds for adults with serious mental illness, most of whom are referred by community mental health centers and are on civil commitments. The CMHI at Pueblo operates 449 inpatient psychiatric beds providing mental health treatment for adolescent, adult, and geriatric civil patients and forensic patients. Most CMHI at Pueblo patients are court-ordered for evaluation and treatment. Over the past five years, DHS says it has undertaken a multi-faceted approach to addressing the increasing demand for inpatient psychiatric care. The department secured funding for two jail-based restoration programs totaling 52 beds, which are operating at full capacity, as well as funding for a 24-bed expansion of the Robert L. Hawkins High-Security Forensic Institute. DHS has also worked with the Judicial Branch and the Joint Budget Committee on legislation that would limit inpatient court-ordered competency evaluations to only those cases for which inpatient evaluation is necessary.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### F2 and F3 Cottage Renovation

#### PROJECT SCHEDULE

	Start Date	Completion Date
Design	October 2019	May 2020
Construction	August 2020	August 2021
Equipment	August 2021	December 2021
Occupancy		December 2021

#### SOURCE OF CASH FUNDS

This project is not funded from cash sources.

#### OPERATING BUDGET

For all 44 beds, DHS estimates operating costs of about \$13 million annually.

#### STAFF QUESTIONS AND ISSUES

1. The department received an appropriation in FY 2009-10 of almost \$2.0 million for life-safety improvements in the F2 Cottage (HVAC, electrical, asbestos abatement, suicide risk mitigation, etc.). Will any of these improvements be preserved during the renovation?

*While the department was initially appropriated funds in FY 2009-10 (SB 09-280) for life-safety improvements, the department was later required to revert the money back to the General Fund as part of budget cuts during the recession. This included the entire amount (close to \$2M) appropriated for a CC project in FY 2008-09 for work to be undertaken in F2 Cottage. Thus, there are no improvements made from a previous appropriation for consideration.*

2. Will any patients be displaced during the renovations? If so, what accommodations will be made for them?

*No patients would be displaced during renovations. The F2 & F3 Cottages are currently being used as "swing space" for staff and patients from Teams 3 & 5 due to construction currently underway at those Fort Logan units. It is anticipated that construction activities in Teams 3 & 5 will be complete by the end of 2019, at which time the staff and patients will move out of F2 & F3 Cottages and back to their permanent units. At that time, both cottages will revert back to a vacant status.*

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Upgrade Campus Utility Infrastructure, CMHI at Fort Logan (Capital Renewal)*

### PROGRAM PLAN STATUS

2002-108

Approved Program Plan?

Date Approved:

### PRIORITY NUMBERS

Prioritized By	Priority	
Dept/Inst	9 of 10	
OSP/BS	19 of 62	Not recommended for funding.

### PRIOR APPROPRIATION AND REQUEST INFORMATION

Fund Source	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
CCF	\$7,752,796	\$10,493,712	\$6,861,006	\$0	\$25,107,514
CCFE	\$1,347,521	\$0	\$0	\$0	\$1,347,521
<b>Total</b>	<b>\$9,100,317</b>	<b>\$10,493,712</b>	<b>\$6,861,006</b>	<b>\$0</b>	<b>\$26,455,035</b>

### ITEMIZED COST INFORMATION

Cost Item	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$1,276,699	\$733,709	\$479,309	\$0	\$2,489,717
Construction	\$7,011,332	\$8,806,029	\$5,757,969	\$0	\$21,575,330
Equipment	\$0	\$0	\$0	\$0	\$0
Miscellaneous	\$0	\$0	\$0	\$0	\$0
Contingency	\$812,286	\$953,974	\$623,728	\$0	\$2,389,988
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$9,100,317</b>	<b>\$10,493,712</b>	<b>\$6,861,006</b>	<b>\$0</b>	<b>\$26,455,035</b>

### PROJECT STATUS

This is a continuation request. The Department of Human Services (DHS) has requested controlled maintenance funding for various components of the project each year for almost 20 years.

The department says 15 emergency controlled maintenance projects associated with infrastructure failures on the campus have been funded since 2002, with 11 of them occurring in the last eight years. The average amount spent per year on emergency controlled maintenance in each of the last six years is \$74,015.

### PROJECT DESCRIPTION / SCOPE OF WORK

DHS is requesting state funds for the second phase of a three-phase capital renewal project to repair or replace underground campus infrastructure on the Colorado Mental Health Institute at Fort Logan (CMHIFL) campus, such as domestic water mains, sewer mains, storm water drainage, irrigation lines, and fire lines. The project also replaces roads, parking lots, and sidewalks and adds underground conduit for future communication cabling. The capital renewal approach focuses on upgrading building systems, infrastructure, and the basic building components within existing state-owned buildings on a building-by-building basis, rather than the project-by-project approach used for controlled maintenance.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Upgrade Campus Utility Infrastructure, CMHI at Fort Logan (Capital Renewal)*

The Fort Logan campus infrastructure has exceeded its useful life and experiences frequent failures. This year's request for Phase 2 continues work on pavement, sidewalks, fire and water lines, sewers, storm drains, and communication trenches. Phase 1, which is currently underway, is conducting a site survey and initiating construction along certain roadways. The project is phased in order to reduce disruption and maintain access to critical facilities on the campus for the duration of the project.

**Cost assumption.** The cost assumption is based on an April 2017 report by a third-party consultant. Phase 1 of the project includes a site survey, which will be used to verify the costs and scope of the remaining phases. The project cost accounts for future inflation at a rate of 4 percent a year. As a capital renewal request, the project is not required to comply with the requirements of the Art in Public Places or High-Performance Certification programs.

### PROJECT JUSTIFICATION

According to the department, the infrastructure at CMHIFL is in poor condition and the capital renewal approach is the most cost effective way to make the needed improvements to the campus. DHS anticipates that completing the various improvements detailed in this request as a single project rather than several controlled maintenance requests will save about \$2.3 million over the cost of completing the projects through the regular controlled maintenance process. These savings will be made possible through an accelerated construction schedule resulting in limited cost escalation and a reduction in overhead costs. Furthermore, the state will likely avoid future emergency controlled maintenance costs for related repairs on the campus. The department explains that numerous emergency controlled maintenance projects have been funded in the recent years due, in part, to water and sewer line failures on the campus.

Specifically, the project addresses concerns with water mains and sewer lines that have exceeded their useful life, roads and sidewalks that are failing due to high traffic volume, inadequate storm water drainage, and failing fire hydrant lines. DHS says some of the water mains and sewer lines are more than 100 years old. Some roads and sidewalks are hazardous due to cracks, heaving, and uneven surfaces. The storm water drainage system has failed in places, which has resulted in basement floods and road damage. The fire hydrant lines are between 19 and 92 years old and sometimes break or have low water pressure. The department says that the deterioration of the campus infrastructure causes disruptions to patient care and management and leads to expensive ongoing and controlled maintenance costs. According to DHS, maintaining the status quo with respect to infrastructure will increase the likelihood of health and safety issues, building and street closures, liability problems, loss of certifications, and increased costs to address infrastructure in the future.

### PROGRAM INFORMATION

The Fort Logan campus was originally constructed as a military outpost in 1881. In 1961, the campus was transferred to the state for use as a mental health institute. The campus is comprised of 231 acres, 74 buildings, and 643,196 GSF of building space. The campus houses offices and programs within a number of department divisions, including the Office of Behavioral Health, the Division of Youth Services, and the Division of Facilities Management; the campus also houses programs within other state agencies such as the Governor's Office of Information Technology and the University of Colorado.

About 859 people are employed on the campus and campus programs serve about 2,500 clients.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Upgrade Campus Utility Infrastructure, CMHI at Fort Logan (Capital Renewal)*

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### PROJECT SCHEDULE

	Start Date	Completion Date
Design	July 2018	April 2019 - April 2021
Construction	April 2019	April 2021 - April 2023
Equipment		
Occupancy		

### SOURCE OF CASH FUNDS

This project is not funded from cash sources.

### OPERATING BUDGET

The department did not report an operating impact, but says it will see a reduction in expenditures based on a reduction in emergency maintenance and repair costs. Additionally, the department expects the project will allow it to devote more resources to routine maintenance, which will extend the useful life of various systems.

### STAFF QUESTIONS AND ISSUES

None.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Suicide Risk Mitigation Continuation*

#### PROGRAM PLAN STATUS

2020-039

Approved Program Plan?

Date Approved:

#### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	4 of 10	
OSPB	21 of 62	Not recommended for funding.

#### PRIOR APPROPRIATION AND REQUEST INFORMATION

<u>Fund Source</u>	<u>Prior Approp.</u>	<u>FY 2019-20</u>	<u>FY 2020-21</u>	<u>Future Requests</u>	<u>Total Cost</u>
CCF	\$0	\$11,061,491	\$3,500,000	\$3,500,000	\$18,061,491
<b>Total</b>	<b>\$0</b>	<b>\$11,061,491</b>	<b>\$3,500,000</b>	<b>\$3,500,000</b>	<b>\$18,061,491</b>

#### ITEMIZED COST INFORMATION

<u>Cost Item</u>	<u>Prior Approp.</u>	<u>FY 2019-20</u>	<u>FY 2020-21</u>	<u>Future Requests</u>	<u>Total Cost</u>
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$1,290,167	\$420,000	\$420,000	\$2,130,167
Construction	\$0	\$8,686,279	\$2,730,000	\$2,730,000	\$14,146,279
Equipment	\$0	\$0	\$0	\$0	\$0
Miscellaneous	\$0	\$79,454	\$0	\$0	\$79,454
Contingency	\$0	\$1,005,591	\$350,000	\$350,000	\$1,705,591
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$11,061,491</b>	<b>\$3,500,000</b>	<b>\$3,500,000</b>	<b>\$18,061,491</b>

#### PROJECT STATUS

This is a new, never-before-requested project.

Major components of the project were requested for funding in FY 2018-19 through the Replace Windows, CMHI at Fort Logan (Capital Renewal) request.

Prior suicide risk mitigation efforts were funded at the state's mental health institutes between FY 2014-15 and FY 2016-17. In total, \$11.0 million in state funds was appropriated for mitigation projects during this time. Earlier projects made improvements in areas where residents are most vulnerable, e.g., restrooms, sleeping rooms, and treatment rooms, in order to mitigate the risk of patient suicide or self-harm. These projects also funded the construction of additional patient units, including admissions, treatment, and clinic areas.

#### PROJECT DESCRIPTION / SCOPE OF WORK

The Department of Human Services (DHS) is requesting state funds for the first year of an ongoing project to mitigate suicide risk at the state's mental health institutes. The proposed improvements were largely identified through a recent survey by the Joint Commission, the body that accredits the state's mental health institutes. Additional improvements were identified by department staff.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Suicide Risk Mitigation Continuation*

In February and May 2018, a survey of five buildings at the Colorado Mental Health Institute (CMHI) at Pueblo was made by the Joint Commission. The survey cited 380 locations that presented a risk of self-harm or suicide. The department extrapolated the survey results to other buildings on the campus that are similar in style and population and identified more than 1,000 total needed improvements. Examples of these improvements includes the installation of:

- ligature-resistant plumbing fixtures at sinks and toilets;
- ligature-resistant toilet partitions;
- door alarms to mitigate pinch points;
- continuous hinges in place of three-point hinges;
- shorter cords to wall-mounted phones;
- hard ceilings in place of a drop-in ceiling grid; and
- wall-mounted bottle-filling sinks.

The department says that although all outstanding citations at the CMHI at Fort Logan have been addressed, staff have identified potential citations related to the CMHI at Pueblo survey in two buildings. The project makes improvements in these two buildings, including installing non-ligature paper towel, toilet paper, and soap dispensers and replacing the drop ceiling in a lounge/dining area with a hard ceiling.

Additionally, the project replaces 123 windows on the Team 1, 3, and 5 living units, including 84 patient room windows and 39 day hall and living area windows at CMHI at Fort Logan. The new windows will be double-glazed with laminated security glass and will include built-in mini blinds that can be rotated vertically.

**Cost assumption.** The cost assumption is based on estimates prepared by a professional estimator for specific suicide mitigation items at both mental health institutes. The project is not required to meet the Art in Public Places or High-Performance Certification Program requirements.

**Associated supplemental request.** The department indicated in its submission that it plans to seek funding through a regular supplemental for the ceiling replacements included in this project. If supplemental funding is awarded, the overall request amount of this project will be slightly decreased.

## PROJECT JUSTIFICATION

The department has been engaged in suicide prevention efforts at the mental health institutes for more than two decades. Comprehensive assessments of the physical suicide risks at both facilities were completed in the late 1990s, and the department has been continuously mitigating suicide risks since that time. The department reports that, as a result of past patient suicides, including two at the Pueblo facility since 2009, it has undertaken a detailed effort to systematically analyze its direct care facilities for physical suicide risks. However, accreditation standards are updated annually, so the department is engaged in continuous improvements related to evolving standards, regulations, and evaluation tools. For instance, the department once proposed a solution to the suicide risk posed by drop ceilings. Its solution was to glue drop ceiling tiles in place. This solution was originally accepted but later rejected by an oversight agency, leading the department to request funds to replace drop ceilings entirely.

See Staff Questions and Issues for substantive responses from the department about the various certification requirements and the nature of this ongoing request.

## PROGRAM INFORMATION

The mental health institutes provide residential services to individuals of all ages with complex, serious, and persistent mental illness.

The Fort Logan campus operates 94 inpatient psychiatric beds for adults with serious mental illness. The patients treated at CMHI at Fort Logan are referred by community mental health centers.

The Pueblo campus operates 449 inpatient psychiatric beds for adults with serious mental illness. The patients

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Suicide Risk Mitigation Continuation*

treated at CMHI at Pueblo are either court ordered for evaluation or treatment or referred by community mental health centers.

The state mental health hospitals are licensed by the Colorado Department of Public Health and Environment, certified for Medicare and Medicaid participation by the federal Centers for Medicare and Medicaid Services, and accredited by the Joint Commission.

#### PROJECT SCHEDULE

	Start Date	Completion Date
Design	July 2019	May 2020
Construction	June 2020	December 2021
Equipment		
Occupancy		

#### SOURCE OF CASH FUNDS

This project is not funded from cash sources.

#### OPERATING BUDGET

This request is not anticipated to increase routine operating costs.

#### STAFF QUESTIONS AND ISSUES

1. Provide more information about some of the potential changes that the Joint Commission may recommend that could lead to additional findings in the future.

*The Joint Commission (JC) publishes standards for all aspects of hospital operation and patient care on an annual basis. The standards are extensive and detailed expectations that a facility must adhere to in order to maintain its accreditation. The standards are updated continually and updates are sent to both mental health institutes annually. Additionally, when there is a significant change being proposed for a standard, the JC contacts accredited hospitals and provides them drafts of the changes and provides opportunities to submit feedback.*

*The department has incorporated all of the currently known the JC and CMS (federal Centers for Medicare and Medicaid Services) requirements into its planning for FY2019-20. There are always topics that become "hot buttons" with both the JC and CMS that are generally based on occurrence and criticality. A current example is the intense focus on suicide prevention related to ligature mitigation. Suicide Risk Assessment was always a National Patient Safety Goal for the JC, but several years ago, CMS decided there were enough instances of ligature related suicides in hospitals that it received critical attention level. As such, during JC surveys since mid-2017, nearly every hospital surveyed has been cited for potential ligature risk findings and tasked with creating and completing extensive and costly ligature mitigation projects.*

*All proposed and ongoing work undertaken by the department is and will be compliant with the JC standards.*

2. Explain the competing certification requirements from the CMS and JC. How do they differ?

*CMHI at Pueblo requires CMS certification in order to bill Medicare and Medicaid. The department obtains accreditation through the JC because it is the premier accrediting organization in the country and it is authorized to conduct surveys on behalf of CMS.*

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Suicide Risk Mitigation Continuation*

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*The standards for both CMS and the JC are similar with the CMS standards typically being more stringent. For example, CMS is the entity that has pushed the ligature mitigation issue in recent years while the JC is the entity enforcing this standard when surveying a facility.*

*The department values that standard of excellence and realizes that meeting those strict standards as well as those of CMS allows us to provide the safest and best care possible for our patients.*

*The department must meet the standards of the JC to remain accredited and absolutely must meet the CMS standards to receive payment for treatment.*

3. Is there a way for the department to be more proactive in mitigating identified suicide risks, or will it always be subject to the changing certification requirements of the CMS and JC? (Has use of SCC served to preempt any recommended changes by the CMS and JC?)

*OBH has done extensive facility suicide risk assessments and completed extensive suicide mitigation projects over the last decade. The changing requirements driven by CMS and enforced by the JC have been unpredictable and, therefore, less susceptible to long-range planning. For example, in this year's (2018) JC survey, there were findings on units that have recently undergone mitigation. These units were citation free in previous surveys. CMS has increased their attention to items that they consider ligature points before they have published their standards or guidelines. The JC does not publish standards until CMS does. Therefore, the department must make its own best decisions for suicide risk mitigation planning or can react to citations found in surveys.*

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Capital Improvements at Regional Centers*

#### PROGRAM PLAN STATUS

2017-030

Approved Program Plan?

Date Approved:

#### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	5 of 10	
OSPB	NP of 62	Recommended for funding from cash sources.

#### PRIOR APPROPRIATION AND REQUEST INFORMATION

Fund Source	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
CF	\$1,982,809	\$757,405	\$0	\$0	\$2,740,214
<b>Total</b>	<b>\$1,982,809</b>	<b>\$757,405</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,740,214</b>

#### ITEMIZED COST INFORMATION

Cost Item	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$281,661	\$72,246	\$0	\$0	\$353,907
Construction	\$1,569,966	\$552,491	\$0	\$0	\$2,122,457
Equipment	\$0	\$0	\$0	\$0	\$0
Miscellaneous	\$8,048	\$70,194	\$0	\$0	\$78,242
Contingency	\$123,134	\$62,474	\$0	\$0	\$185,608
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$1,982,809</b>	<b>\$757,405</b>	<b>\$0</b>	<b>\$0</b>	<b>\$2,740,214</b>

#### PROJECT STATUS

This is an ongoing request. This is the fourth request for cash funds spending authority under this line item. Cash funds spending authority was not approved for FY 2018-19, but approved for the two prior fiscal years. Two additional projects were funded for FY 2014-15 and FY 2015-16 from the same fund source: the Regional Center Depreciation Fund (depreciation fund). To date, \$3.3 million has been appropriated for capital improvement projects from the depreciation fund.

#### PROJECT DESCRIPTION / SCOPE OF WORK

The Department of Human Services (DHS) is requesting cash funds spending authority to make ongoing capital improvements at its three regional centers, including 40 group homes, day-programming facilities, and administrative space, in order to address the wear and tear of continuous use and to improve resident quality of life. The scope of work identified for the project is outlined below. The department explains that it will complete related upgrades one home at a time and schedule the projects in such a way as to minimize disruptions. The work is prioritized based on the condition of the homes with respect to safety, security, accessibility, and programming needs.

The scope of work planned with depreciation earned in FY 2018-19 addresses critical needs at all three regional centers.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Capital Improvements at Regional Centers*

#### **Wheat Ridge Regional Center**

- secure and/or add access control to twelve exterior doors at the Zier Building. The Zier Building houses administration, some day-programming services, and other program spaces such as medical and dental offices;
- upgrade doors to make doors accessible for individuals with mobility impairments at the Zier Building;
- add access controls and a secure entrance door at the therapeutic pool building; and
- upgrade finishes in the kitchen at the 59th Street home (7 residents).

#### **Grand Junction Regional Center**

- upgrade three bathrooms at the Cedar Street home (7 residents); and
- remove island, reconfigure living room, and update windows to improve safety and prevent elopements at the B Road home (8 residents).

#### **Pueblo Regional Center**

- relocate medication room and upgrade lighting at the Hahn's Peak Avenue home (5 residents); and
- add access control and secure eight doors at the A and B Buildings. These buildings house administration, day-programming services, a pool, and other program spaces.

**Cost assumption.** The cost assumption is based on similar, recently completed projects at other department facilities and a vendor estimate for the cost to upgrade doors at the Zier Building. The project cost includes 4 percent inflation since the FY 2018-19 funding request. The project is not required to comply with the requirements of the Art in Public Places or High Performance Certification Program.

### **PROJECT JUSTIFICATION**

The department explains that the goal of the ongoing request is to improve the safety and security of its residents, while also promoting opportunities for independence. While the need for upgrades to the regional center system facilities outstrips the amount that will be made available from depreciation payments, DHS says this ongoing request has offset controlled maintenance needs in the system. The improvements planned for the homes address safety concerns associated with interrupted sight lines resulting from a large island constructed in the living room of the B Road home and the location of the medication cabinet in the busy kitchen area rather than a separate, secured space in the Hahn's Peak Avenue home. The planned improvements also promote independence by making the restrooms at the Cedar Street home more accessible. Finally, the improvements upgrade worn finishes in homes that were constructed almost 40 years ago. The department identifies the most pressing needs and makes improvements on a home-by-home basis, so future requests will likely address similar scope in other regional center homes.

A recent critical infrastructure security assessment of the Zier Building on the Wheat Ridge campus revealed security gaps. The department says that the doors into the building are old, hard to lock, and left unlocked during business hours with no access controls. The project will secure the building and funnel visitors through a single entrance. This will lead to enhanced monitoring of individuals entering the building, offer protection for vulnerable individuals in day programming, and better secure the medical treatment office and pharmacy. DHS says that while the assessment only studied the Zier Building, similar security gaps exist at the Pueblo A and B Buildings.

### **PROGRAM INFORMATION**

The department's regional centers serve people with developmental disabilities who have the most intensive service needs based on complex diagnoses. The regional centers serve adults in group homes, both on- and off-campus. The total capacity of all three regional centers is about 260 beds and 574,000 square feet of program delivery space. Services include 24-hour supervision; residential services; day programming; and habilitation, medical, training, and behavioral interventions.

The state's three regional centers are located in Wheat Ridge, Grand Junction, and Pueblo. The average facility age is about 50 years. The group homes are inspected for licensure and certification as Medicaid service providers by the Colorado Departments of Public Health and Environment and Public Safety. There are 40 off-campus group homes. On-campus facilities are licensed as Intermediate Care Facilities. Off-campus homes are licensed as Home and Community Based Services waiver homes. Homes typically serve between six and eight residents.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### Capital Improvements at Regional Centers

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#### PROJECT SCHEDULE

	Start Date	Completion Date
Design	July 2019	July 2020
Construction	October 2019	July 2021
Equipment		
Project Close Out		Ongoing

#### SOURCE OF CASH FUNDS

The source of cash funds for the project is the Regional Center Depreciation Fund subaccount within the Capital Construction Fund, administered pursuant to Section 24-75-302 (3.8)(a), C.R.S. The account consists of all moneys received by the Department of Health Care Policy and Financing from the federal government for the annual calculated depreciation of the state's regional centers. The FY 2019-20 request amount is based on the estimated FY 2018-19 earnings to the depreciation fund.

#### OPERATING BUDGET

The department says it does not anticipate an increase in operating costs as a result of the project. The project may lead to staff efficiencies, but associated savings have not been quantified.

#### STAFF QUESTIONS AND ISSUES

All responses to staff questions were incorporated into the project write-up.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Facility Master Plan, Department-Wide*

### PROGRAM PLAN STATUS

2017-046

Approved Program Plan?

Date Approved:

### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	3 of 10	
OSPB	NP of 62	Recommended for funding from cash sources.

### PRIOR APPROPRIATION AND REQUEST INFORMATION

Fund Source	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
CF	\$0	\$1,101,159	\$1,233,777	\$519,909	\$2,854,845
<b>Total</b>	<b>\$0</b>	<b>\$1,101,159</b>	<b>\$1,233,777</b>	<b>\$519,909</b>	<b>\$2,854,845</b>

### ITEMIZED COST INFORMATION

Cost Item	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$1,101,159	\$1,233,777	\$519,909	\$2,854,845
Construction	\$0	\$0	\$0	\$0	\$0
Equipment	\$0	\$0	\$0	\$0	\$0
Miscellaneous	\$0	\$0	\$0	\$0	\$0
Contingency	\$0	\$0	\$0	\$0	\$0
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$1,101,159</b>	<b>\$1,233,777</b>	<b>\$519,909</b>	<b>\$2,854,845</b>

### PROJECT STATUS

This is the second request for funding.

See Staff Questions and Issues section for information about recent departmental planning efforts.

### PROJECT DESCRIPTION / SCOPE OF WORK

The Department of Human Services (DHS) is requesting state funds for the first phase of a three-phase project to prepare a department-wide facility master plan. The master planning process will conduct a comprehensive analysis of the department's programmatic needs, and establish a direction for and define the department's future capital construction program. This year's request for Phase I studies the Fort Logan campus – with the exception of 15 buildings assessed under a separate planning effort – and many of the Denver Metro area facilities, including the department's headquarters building. Specifically, Phase I planning will assess 686,325 square feet and 231 acres of DHS owned and leased property. Phase II will update the 1997 campus-wide master plan for the Pueblo campus and Phase III will assess the remaining division properties and programs not addressed in earlier phases or through other planning efforts.

DHS explains that although most of the department's programs function somewhat independently, the master planning effort will involve a collaborative planning process between various programs and divisions and will be

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

### *Facility Master Plan, Department-Wide*

coordinated by the planning and technical services group within the Division of Facilities Management. The department listed the following deliverables anticipated under the master plan:

- facility condition audits;
- field audits;
- program planning;
- code compliance and standards evaluations;
- options and strategies for future property use, including: repurposing, replacing, consolidating, or divesting;
- strategies for underutilized properties; and
- implementation recommendations (including phasing and cost estimates).

**Cost estimates.** Cost estimates for the master plan were developed based on the cost per square foot of the 2014 Capitol Complex Master Plan. The cost per square foot used to calculate the cost of the Capitol Complex Master Plan was \$0.90 per square foot. In order to estimate the cost of the department-wide master plan, DHS calculated a cost of \$1.25 per square foot and a cost of \$0.25 per acre. The department explains that it used a higher cost per square foot estimate than that used to determine the cost of the Capitol Complex Master Plan because the master plan proposed under the DHS project studies 24/7 care facilities which are more complex. Additionally, DHS says the age and condition of its facilities and the planned phased approach to master planning increases the complexity and thus the cost. The project is not required to comply with the requirements of the Art in Public Places or High-Performance Certification Program.

### PROJECT JUSTIFICATION

The department explains that a department-wide master plan will allow it to manage its resources more efficiently, anticipate changing care and service philosophies, identify service overlaps and complementary programs, and coordinate planning efforts across divisions and programs in order to identify economies of scale for future capital projects. The department says that most of its facilities are aging, it is not meeting all the national standards for various client populations, and there is a backlog of deferred maintenance on its campuses. Furthermore, many of its facilities were designed for a different clientele than are currently served.

The average age of DHS-occupied buildings is about 62 years and the average Facility Condition Index (FCI) score is 63. Generally speaking, the FCI rating assumes a life span of 100 years for a building, and, if left untouched, a building loses about one point in its FCI rating each year. The Office of the State Architect's target rating for state buildings is 85. The average FCI score for facilities at the Fort Logan campus is 57.

The department last master planned in 1997, and then only for the Pueblo campus. The 1997 master plan guided decisions about the construction of the High Security Forensics Institute. The last master plan for the Fort Logan campus was completed in 1989. The department says that it currently prioritizes capital funding based on the risk of imminent failure or to address life-safety risks rather than based on long-term programming needs or planning goals.

The department explains that if it does not undertake a comprehensive department-wide master plan, it will continue to assess its facilities on a building-by-building basis. DHS says this approach only addresses the immediate needs of a limited number of clients and misses the opportunities for efficiencies associated with assessing all of the department's programs, services, and facilities.

### PROGRAM INFORMATION

The department owns 285 buildings, totaling 3,767,330 square feet, and 1,541 acres. The Fort Logan campus comprises 231 acres and 74 buildings.

The project addresses 349 department-owned and -occupied buildings (including some leased space) totaling 4.2 million square feet on 1,532 acres and 20 campuses.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

Facility Master Plan, Department-Wide

### PROJECT SCHEDULE

	Start Date	Completion Date
Phase I	July 2019	June 2021
Phase II	July 2020	June 2022
Phase III	July 2021	June 2023

### SOURCE OF CASH FUNDS

The source of cash funds is the Fort Logan Land Sale Account, created in Section 24-75-302 (3.3), C.R.S. The fund consists of proceeds from the sale of up to 66 acres of the Fort Logan Campus to the Fort Logan National Cemetery. The sale, which is currently pending, was authorized by House Bills 16-1456 and 17-1346.

### OPERATING BUDGET

The project has no anticipated impact on state operating costs. However, work recommended as a result of master planning efforts could result in operational efficiencies or new costs.

### STAFF QUESTIONS AND ISSUES

1. How have departmental planning efforts to date informed capital budget requests and small projects paid from the department's operating budget?

*The department completed a facility program plan in July 2015, which directly influenced the design of the Adams Replacement Youth Services Center. The department completed an Office of Behavioral Health (OBH) planning study in December 2017, which resulted in the Mental Health Institute capital construction request for a new hospital in budget year FY 2018-19. Additionally, the OBH planning study informed the Secure Treatment Facility for Restorations request.*

*The department has planning studies that are either ongoing or to be started shortly for both DYS and the Veterans Learning Community Centers. These studies may inform future decisions for CC requests. The department has not put forth any major capital construction requests for facilities for which planning studies are underway. Rather, requests associated with those facilities are critical-need-based for operations and safety.*

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Rotunda and Workshop Renovations, Homelake VCLC*

### PROGRAM PLAN STATUS

2020-035

Approved Program Plan?

Date Approved:

### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	6 of 10	Submitted for informational purposes only.
OSPB	NP of 62	

### PRIOR APPROPRIATION AND REQUEST INFORMATION

Fund Source	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
CF	\$0	\$197,573	\$0	\$0	\$197,573
<b>Total</b>	<b>\$0</b>	<b>\$197,573</b>	<b>\$0</b>	<b>\$0</b>	<b>\$197,573</b>

### ITEMIZED COST INFORMATION

Cost Item	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$21,970	\$0	\$0	\$21,970
Construction	\$0	\$157,642	\$0	\$0	\$157,642
Equipment	\$0	\$0	\$0	\$0	\$0
Miscellaneous	\$0	\$0	\$0	\$0	\$0
Contingency	\$0	\$17,961	\$0	\$0	\$17,961
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$197,573</b>	<b>\$0</b>	<b>\$0</b>	<b>\$197,573</b>

### SUMMARY OF THE PROJECT

**Staff note: This project does not require CDC review or approval because it falls below the monetary threshold of review and the source of cash funds is continuously appropriated to the department. The project was submitted by the department for informational purposes only.**

The project expands the rotunda at the Homelake Veterans Community Living Center (VCLC) and renovates a campus barn. The Homelake VCLC is both a 60-bed skilled nursing facility and a 48-bed licensed domiciliary. The project cost estimate was developed by a third-party consultant.

The rotunda expansion will provide more group activity space for residents. The project will expand the dayroom into an adjacent media room, adding nearly 430 square feet of program space. The expansion will also construct a small office in the existing media room. The department anticipates that the rotunda will be closed to residents and staff during construction for no longer than a month.

The campus barn renovation will create more secure storage and a workshop for facilities maintenance staff. The condition of the 2,745 square foot barn has deteriorated because the roof is in poor condition. The project replaces the roof, provides electrical power to the building interior, and installs new barn doors and associated hardware.

# Fiscal Year 2019-20 Capital Construction Request

## Human Services

*Capital Improvements at Fitzsimons VCLC*

### PROGRAM PLAN STATUS

2020-036

Approved Program Plan?

Date Approved:

### PRIORITY NUMBERS

Prioritized By	Priority	
DeptInst	7 of 10	Submitted for informational purposes only.
OSPB	NP of 62	

### PRIOR APPROPRIATION AND REQUEST INFORMATION

Fund Source	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
CF	\$0	\$199,635	\$0	\$0	\$199,635
<b>Total</b>	<b>\$0</b>	<b>\$199,635</b>	<b>\$0</b>	<b>\$0</b>	<b>\$199,635</b>

### ITEMIZED COST INFORMATION

Cost Item	Prior Approp.	FY 2019-20	FY 2020-21	Future Requests	Total Cost
Land Acquisition	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$26,733	\$0	\$0	\$26,733
Construction	\$0	\$154,743	\$0	\$0	\$154,743
Equipment	\$0	\$0	\$0	\$0	\$0
Miscellaneous	\$0	\$0	\$0	\$0	\$0
Contingency	\$0	\$18,159	\$0	\$0	\$18,159
Software Acquisition	\$0	\$0	\$0	\$0	\$0
<b>Total</b>	<b>\$0</b>	<b>\$199,635</b>	<b>\$0</b>	<b>\$0</b>	<b>\$199,635</b>

### SUMMARY OF THE PROJECT

**Staff note: This project does not require CDC review or approval because it falls below the monetary threshold of review and the source of cash funds is continuously appropriated to the department. The project was submitted by the department for informational purposes only.**

The project expands the dayroom at the Fitzsimons Veterans Community Living Center (VCLC) and addresses various deferred maintenance issues. The Fitzsimons VCLC is a 180-bed skilled nursing facility. The project cost estimate was developed by a third-party consultant.

The dayroom expansion will provide more meeting space for residents. The project will expand the dayroom into an existing office and storage spaces, adding nearly 400 square feet of program space.

The deferred maintenance projects make improvements to communal spaces and to resident services. The maintenance improvements include replacing water-damaged pavement in an interior courtyard, repairing a structurally damaged floor in a public corridor, and installing a commercial-grade laundry trough in two laundry rooms. Both the courtyard and public corridor require repair because water pooling has caused soil movement, which has lifted the pavement and floor, respectively. The project makes repairs and upgrades to prevent water pooling. The laundry room drains are not commercial grade and the washing machines drain faster than the existing floor drains can handle.