FORM E



FINANCIAL OPERATIONS ADMINISTRATION BUREAU OF ORGANIZATIONAL SERVICES

Five-Year Capital Outlay Plan FY2017 – FY2021

October 30, 2015

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I. MISSION STATEMENT JUVENILE JUSTICE PROGRAMS

Mission:

The Juvenile Justice Program will be a national leader in prevention and treatment for juvenile delinquency, building safe and healthy communities through our balanced approach, professionalism, and shared commitment to innovation and effective partnerships.

Vision:

The vision of the Juvenile Justice Program is to promote safe communities by:

- Providing comprehensive treatment and services for juvenile offenders through which they will develop competencies to assist in achieving independence and responsibility.
- Holding juvenile offenders accountable for their behavior and working towards repairing harm done to the victim and the community.
- Providing leadership within the juvenile justice community by promoting best practices and comprehensive treatment and services for juvenile offenders in Michigan.
- Providing targeted high-need communities with the necessary resources or information to create purposeful and collaborative juvenile delinquency prevention programs.

II. PROGRAMMING CHANGES JUVENILE JUSTICE PROGRAM

Health and safety projects, such as fire suppression systems, man down and security continue to be the priority for DHHS capital outlay planning.

Energy efficient building materials will be used in new construction/renovation of DHHS facilities to comply with the governor's reduction of energy directive.

Assessment Services

Beginning in FY 2013 the state juvenile justice facilities began offering comprehensive assessment services to counties and local court jurisdictions. These services include risk assessment, mental health screening, educational and physical health assessments, and psychiatric or psychological evaluations as necessary. These services assist jurisdictions in identifying the appropriate treatment settings and key areas for treatment intervention.

III: INDIVIDUAL FACILITY ASSESSMENT BAY PINES CENTER

2425 N. 30th Street Escanaba, MI 49829

Facility Function:	Bureau of Child Welfare Funding, and Juvenile Programs (CWFJP)
Year built or date of occupancy:	1994
Facility size:	38,760 square feet

Providing secure residential detention services for youth of either gender awaiting a court decision as well as residential treatment programs for youth adjudicated for criminal offenses, Bay Pines Center is licensed to accept up to 40 youth age 12 to 21. Bay Pines is a state operated residential facility that offers treatment programs for young women requiring secure facilities.

Amount of Land and Assessment:

• The Bay Pines site currently comprises 24 acres, which appears to be very adequate for present day needs and should be fully capable of providing additional space for any program development which may occur during the next five years.

Building Utilization Rate:

• The Bay Pines Center has a ratio of 773 sf./bed which yields a 93% efficiency.

Physical Assessment (architectural, structural, civic/site, etc.):

• Sealcoat existing pavement and restripe.

Utilities Systems Assessment:

Electrical:

- The existing systems appear to be adequate at this time. Building Controls:
- The existing systems appear to be adequate at this time. Security:
- Replace all interior and exterior locks to keyless pads.

Adequacy of Utilities and Infrastructure Systems to Current and Five Year Needs:

• Reviews remain underway to assess routine maintenance issues and current conditions.

III: INDIVIDUAL FACILITY ASSESSMENT W.J. MAXEY TRAINING SCHOOL

FACILITY CLOSED 10/1/15 PER LEGISLATIVE ORDER

8701 East M-36	
Whitmore Lake, MI 48189	
Facility Function:	Bureau of Child Welfare Funding, and Juvenile Programs (CWFJP)
Year built or date of occupancy:	1958 original building was constructed/New Addition January, 2011

Description of former facility/current assessment of facility:

W.J. Maxey Training School covers 90 acres and is primarily undeveloped except for the southwest corner, where Maxey Training School, the Powerhouse/Warehouse/Laundry building, and the emergency generator buildings are located.

W.J. Maxey Training School is a state operated residential treatment facility for delinquent male youth, 12 to 21 years of age. The 60 bed facility serves the needs of Michigan youth who require intensive or specialized rehabilitation treatment and a high level of program security and structure to provide personal and community safety.

<u>Structures</u>	<u>Size</u> sq. ft.	<u>Year Built</u>
W.J. Maxey Training School	73,422	1958 New Addition 2011
Laundry & Heating	10,390	1965

Amount of Land and Assessment:

• 90 Acre campus (Northern Parcel of M-36)

Building Utilization Rate:

• Utilization rate is a measure of facility efficiency. The ratio of program and support space in the new facility now under construction is used here as a basis of measure. The program space/bed ratio of this new construction is 720 s.f. The same ratio for the existing facility is 749 s.f. yielding a utilization of 96%.

Physical Assessment (architectural, structural, civic/site, etc.):

• Maxey Training School is located immediately north of the Powerhouse/Warehouse/Laundry facility which forms a small courtyard with the Vocation/Shop wing of Maxey, and an outdoor, double gated Sallyport vehicular entrance is located just south of Maxey between the Powerhouse and the south wing of the residential section of the facility. A staff parking lot and public entrance is located immediately west of Maxey. The property is completely contained with security fencing. The interior security fence separates the outdoor area into separate activity zones for each of the various residential wings. The largest portion of this activity space is to the north and contains a soccer/football field and baseball diamond.

Maxey consists of an administrative section at the west end of the facility, instructional facilities at the center section, and a treatment component. Renovations were made to

the existing building with the new addition, completed January, 2011. The east side is a new addition that houses 60 youth. Renovations were made to reconfigure the existing building, consisting of painting, plaster, carpet, ceiling tiles, floor tiles in areas as needed. HVAC system was updated, a new boiler installed, new windows installed, dining/kitchen area was completely renovated, and pool locker room renovated.

The building is a one-story structure constructed of load bearing concrete unit masonry with a brick veneer exterior. The treatment portion of the facility is constructed with precast concrete plank roof decking. Most of the facility was built with a low slope roof, though the residential wings as well as the Gymnasium and Pool were built with a visibly pitched roof structure.

Resurfacing of the existing staff parking lot and service drives was completed fall 2013. A constructed Visitor Entrance Vestibule is located at the west Visitors/Administrative Office entry. This entrance is handicapped accessible.

The original building was constructed in 1958, and has a gross floor area of 30,473 sq. ft. New addition was completed 2011, gross floor area of 32,259 sq. ft.

Roof replacement over clinic was completed in 2013.

• **Powerhouse/Maintenance Building-** is located immediately south of Maxey. The building is bounded by Maxey to the north, staff parking for Maxey to the west, a service drive to the south, and undeveloped property to the east.

This building is broken into two district components, the Powerhouse and the Warehouse/Laundry facility. Both buildings are constructed of load bearing unit masonry with brick veneer with structural steel bar joists and metal deck roof structures. The two facilities are physically separated by a unit masonry firewall. The roof structure of the warehouse/laundry facility terminates against the higher vertical walls enclosing the Powerhouse. Roof replacement was completed in 2013 to the powerhouse and maintenance buildings. The exterior doors to this facility are either in fair condition or have been previously replaced.

The Laundry & Heating building was constructed in 1965, and has a gross floor of 10,390 sq. ft. It is in generally good condition.

Utilities Systems Assessment:

Mechanical:

- Installation of new HVA controls throughout the building to enable maintenance department to better control the working/living environment and save on utility costs. Electrical:
- The existing systems appear to be adequate at this time. Security:
- The existing systems appear to be adequate at this time.

Adequacy of Utilities and Infrastructure Systems to Current and 5-year needs:

• Reviews remain underway to assess routine maintenance issues and current conditions.

III: INDIVIDUAL FACILITY ASSESSMENT SHAWONO CENTER

10 North Howes Lake Road Grayling, MI 49738

Facility Function:	Bureau of Child Welfare Funding, and Juvenile Programs (CWFJP)
Year built or date of occupancy:	1974
Facility size:	53,738 square feet

Shawono Center is located on a ten-acre parcel that is heavily wooded and contains a small lake in a secluded area, a few miles from the City of Grayling. The parcel of land is owned by the U.S. Military Affairs. The Shawono Center is a secure treatment facility for male juveniles between the ages of 12 and 21 years who have been adjudicated for one or more felony counts. The Center offers 3 specialized treatment programs. The Sex Offenders program has 20 beds and limits the contact with the other treatment groups. The Addictions/Substance Abuse Treatment group and the General Delinquents Treatment group, with mild to medium mental health issues, each have 9 treatment beds. Shawono Center also has up to 6 detention beds available for youth through 20 years of age.

<u>Structures</u>	<u>Size</u> sq. ft.	Year Built
Main Building	48,018	1994
DNR Building	5,500	1974
Gas Storage Shed	120	1974
Generator Housing	100	1979

Amount of Land and Assessment:

• The Shawono Center is situated on a ten acre site with a small lake which is well suited to meet the facility's current program needs. There is ample room for future building expansion should there be a need to expand the Treatment/Detention Program or accommodate other specific building space needs.

Building Utilization Rate:

• The Shawono Challenge Center has a ratio of 1,322 sf/bed, which yields a 54% efficiency rating.

Physical Assessment (architectural, structural, civic/site, etc.):

• Separate buildings appear in good condition and need minor maintenance repairs, with the exception to ongoing concerns related to Main Building roof and E.I.F.S.

Utilities Systems Assessment:

- Electrical Needs: The electrical service in the Administration area is presently at capacity and occasionally overloads existing circuit breakers.
- Building Controls: Replacement of metal doors and frames.
- HVAC: Replace in Administration office and dining area.
- Security: The original mechanical locks are beginning to wear out and will need to be replaced in the near future.

Adequacy of Utilities and Infrastructure Systems to Current and Five Year Needs:

• Current utilities and infrastructure systems are adequate to meet the programmatic needs of the facility five years into the future with the exception of the electrical upgrades required in the Administration Offices Area. Changing technology and the need for additional computer network systems are taxing the electrical service in this area. Additionally, air conditioning upgrades from the compressor/air handling equipment would severely affect service in this section of the complex. Increasing the available electrical power, with a reserve for future technology and building square footage growth will serve current and future needs.

IV. IMPLEMENTATION PLAN JUVENILE JUSTICE FACILITIES

The juvenile justice facilities are currently not requesting major capital projects.

I. MISSION STATEMENT AND PROGRAM DESCRIPTION MICHIGAN REHABILITATION SERVICES MICHIGAN CAREER & TECHNICAL INSTITUTE

Mission

The Michigan Career & Technical Institute conducts vocational and technical training programs and provides the supportive services needed to prepare Michigan residents with disabilities for competitive employment.

Program Description

A separate entity from the traditional community college or technical school, Michigan Career & Technical Institute (MCTI) has provided training for adults with in Michigan since 1944. MCTI offers a unique blend of caring support services and state-of the-art training for business and industry today. MCTI operates under the auspices of the Michigan Department of Health and Human Services, Michigan Rehabilitation Services.

The campus–located on the shores of Pine Lake in southwestern Barry County–is fully accessible. For eligible adults who have a physical or mental disability, tuition and room and board in the dormitory are free. Career assessment services are available to help students explore career options. A full spectrum of health, psychological and social work services is also provided. All classrooms, dormitory rooms, cafeteria, library and leisure services are located in one building for easy accessibility. Depending on aptitude and interest, students may choose to enroll in one of several technical training programs. Each training area has an active Business Advisory Committee comprised of employers in that field. Their participation assures students that the curriculum and equipment meet business and industry standards. MCTI is accredited by the North Central Association-Commission on Accreditation and School Improvement (NCA-CASI) and by the Commission on Accreditation of Rehabilitation Facilities (CARF). MCTI continues to work with the U.S. Department of Veterans Affairs.

II: PROGRAMMING CHANGES MICHIGAN REHABILITATION SERVICES MICHIGAN CAREER & TECHNICAL INSTITUTE

<u>Youth</u>

In support of the Michigan Department of Health and Human Services rehabilitation services program priorities, MCTI is focusing on providing enhanced services to youth (ages 18-22) with cognitive, autism, and physical disabilities.

The following information supports program priorities:

- Michigan Department of Education data reflects in excess of 60,000 high school students (between the ages of 14 and 19) are currently receiving special education services. Transition services leading to appropriate post-secondary training and placement will continue to be in high demand.
- MCTI student demographics reflect 78% of enrollees are under the age of 23, which is an increase of 23% over the last four years.
- Michigan businesses continue to have a shortage of trained employees. People with disabilities are consistently underutilized in the workforce.

• Collaboration within the Michigan Works! Service System has resulted in an increased connectivity of services for people with disabilities across the workforce development system.

MCTI has recently redefined its initial phase of student programming to meet the extensive need for reading and math remediation currently demonstrated by MCTI students. The "Pine Lake Experience," a two-week summer camp for high school students in which the student spends time in all trade training programs, has also been developed. MCTI is assessing trade training programs to ensure they meet employer needs and are of interest to younger consumers such as building trades and applied manufacturing.

Staff Development

MCTI is preparing to respond to the agency-wide need for cost effective staff development and training. The facility offers an existing site that is used to train individuals with disabilities as well as a facility that will assist in training professional staff who provide services to persons with disabilities. The Americans with Disabilities Act (ADA) and disability-related accommodations information and available equipment include: voice activated software, ergonomic workstations, computer-aided assistive technology, literacy specialists, life-skills specialists and occupational therapists on-site are a valuable resource to staff that may need information and experience on these topics. Staff training occurs when students are not being served during holidays and the short summer recess.

Additional parking is required to permit program expansion allowing for year-round facility use. Expanded services would require students to commute to the MCTI campus which is not typical for the majority of our current student population.

III: INDIVIDUAL FACILITY ASSESSMENT MICHIGAN CAREER & TECHNICAL INSTITUTE

11611 W. Pine Lake Road Plainwell, MI 49080

Facility Function:	Michigan Rehabilitation Services
Year built or date of occupancy:	The original portion of the MCTI facility was built circa 1944. Since then there have been numerous building additions and upgrades to the original building, primarily in 1968 and 1974.

The MCTI facility is located on a site of 72 acres, with the majority of the MCTI facility on approximately 40 acres, fronted on an inland lake, Pine Lake. Site amenities include a 200 space parking lot and various recreational features which include a softball field, tennis courts, "initiatives course," and swimming dock on Pine Lake.

The facility consists of various building sections joined together under one roof and consisting of one-story, two-story, three-story, and four-story components. The overall square footage of the facility is approximately 266,000 square feet. The facility includes three and four-story dormitories, food service and recreational facilities, a two-story administrative facility, a one-story instructional and maintenance facility, as well as a gymnasium and an indoor swimming pool, together with other miscellaneous support facilities.

MCTI conducts vocational and technical training programs and provides the supportive services needed to prepare Michigan citizens with disabilities for competitive employment. These training programs are conducted within ten-week terms at four terms per year. Presently the facility provides services to approximately 350 students of ages 18 to 25 years. Nearly all of the students have some type of learning disability.

Mechanical:

• Most of the mechanical systems are nearing the end of their useful life. The aging systems have been maintained well and repaired to continue operation as designated. However, the majority of the facility is heated and cooled utilizing a two-pipe switch-over system. The two-pipe switch-over is capable of heating or cooling, but cannot accomplish both simultaneously. This type of system results in extremely poor temperature control and inefficient energy usage. Recommendation is a complete mechanical system replacement.

Electrical:

• A portion of the main electrical distribution has recently been upgraded and is in good condition in the lower level of the Kitchen/Dining wing. However the remainder of the electrical infrastructure is aging and nearing the end of its useful life throughout the remainder of the building. The distribution panels and bus ducts are becoming antiquated and obtaining comparable parts and pieces is becoming difficult in servicing the equipment. The typical useful life for a panel is approximately 40 years. In most of

the sections of the building these panels are original and are beyond their useful life. The lighting systems are in a transition process. The facility has made an effort to replace the old T12 fluorescent lamps with T8 lamps that are more energy friendly and better quality fixtures. There are a number of areas that still will need to be converted but this can be a tedious project and staging the replacements is an economical way of implementing a better quality of fixture. The exit lighting is in poor condition and still utilizes incandescent lamps in numerous locations. The useful life of these fixtures is approximately 20 years. Within the past 10 years the facility had an emergency system installed for emergency power for the dormitory and kitchen areas in the event of a utility company power loss. This emergency system is limited to a particular area and doesn't cover enough of the building. The existing public address system is very antiquated and does not allow for paging separate areas. A new public address system will be necessary. The fire alarm system is in very good condition. The system was installed within the past 2-3 years.

Recommendations are to begin to replace electrical panels over time. The panels are becoming very antiquated and have not been routinely operated and maintained. The lighting fixtures that have not been upgraded with electronic ballast and T8 fluorescent lamps need to be retrofitted.

	Building	Year	Sq Footage
1	Water Tower and Building	1928	100
2	West Cabin	1932	480
3	Shop Building	1944	6,700
4	Waste Water Treatment	1962	204
5	Dorm and Commons	1964	79,300
6	Shop Building	1968	64,000
7	Cooling Tower	1968	600
8	Classrooms and Administration	1970	61,000
9	Warehouse/Maintenance Shop	1974	6,000
10	Health and Recreation	1974	43,000
11	Compressor House	1982	204
12	Flammable Storage	1989	1,400
13	Kellogg Chapman House	2005	1,800
14	Boat house	2008	650

The MCTI dormitory can house 352 students. There are two dormitory wings with 3 floors on each wing, with a common area and dining hall in the center. The dorm is set up with two rooms (four students) sharing a common bathroom.

The roads throughout the facility are asphalt, as well as the parking areas.

Major Facility Improvements

The facility has had several major improvements/upgrades including:

- 1982 Remodel Dorm Kitchen
- 1994 Connect to Sanitary Sewer System
- 1998 Parking Lot Resurface and striping
- 2004 Fire System Upgrade
- 2007 Elevator Replacement (3)
- 2011 Exterior Opening Replacements (doors and windows) (ARRA funding)
- 2011 Upgrade Dust Collection in Cabinetmaking, Air Conditioning and HVAC upgrades in some classrooms (ARRA Funding)
- 2015 Pool roof replacement

IV. IMPLEMENTATION PLAN MICHIGAN CAREER & TECHNICAL INSTITUTE

This facility is currently not requesting major capital projects.

I. MISSION STATEMENT AND PROGRAM DESCRIPTION CARO CENTER

The mission of Caro Center is to provide an appropriate range of active inpatient psychiatric treatment services to best meet the needs of adults with severe mental illness in collaboration with community health agencies and authorities. Divisions of specialized care are identified to meet ongoing treatment needs that reflect multiple medical and psychiatric diagnoses. Consistent with Centers for Medicare and Medicaid (CMS), Joint Commission Standards and other applicable public acts, the environmental needs require ongoing assessment and extensive remodeling to ensure safety and clinical functionality. The prevalence of clinical behaviors and medical disorders that demonstrate self-injurious acts, increased violence and medical needs have created the need for more intensive treatment and physical plant modifications to ensure safety and security measures are maintained in order to provide therapeutic activities for the patients and staff.

II: PROGRAMMING CHANGES CARO CENTER

Therapeutic programmatic changes have involved the modification and the expansion of the Psychosocial Rehabilitation Program (PSR) that provides treatment for adults with chronic mental illness. The programs have an interdisciplinary approach that provides treatment focused on improving the biopsychosocial aspects for the individual patient as well as safety enhancements. The programs provide opportunities to participate in normalized roles and positive therapeutic relationships in an effort to prepare patients for community reintegration. Patient education, individual and group therapies involving recreational, occupational, music and activity therapies are planned in accordance with the person-centered plan of service. The wide range of therapeutic activities are delivered at Building 26, the Recreation Center, Building 55, the annex to Building 27 and some service delivery in Buildings 14, 15 and 16.

Programmatic revisions in the therapeutic delivery system for patients with neuropsychiatric disorders are anticipated in the next five years in accordance with clinical symptomatology and staffing resources. Because this population has demonstrated increased multiple neurological, physical and mental impairments, the environment requires specialized physical modifications in order to maximize independence and ensure safety, particularly for the elderly who are often physically frail and fragile. Currently, Building 27 North provides residential accommodations for 32 patients who require this type of specialized service.

III: INDIVIDUAL FACILITY ASSESSMENT CARO CENTER

Caro Center consists of 37 buildings with a total square footage of 503,537 sq. ft. The oldest building was constructed in the early 1900's, while the newest non-residential building was constructed in the 1950's. Some residential buildings were remodeled in the 1970's to meet then existing regulatory standards for the population served. There has been no major remodeling since 1979. Several buildings on the premises of Caro Center are over sixty years old and require maintenance on an ongoing basis. Cosmetic improvements are needed more frequently to create an aesthetic environment compatible for treatment and operational support. All buildings need exterior improvements to facilitate an appropriate and safe presentation for patients, staff and visitors. The general physical condition is considered adequate. However, ongoing replacements are needed to the exterior of all buildings including windows, doors, improved parking lots, and standard cosmetic enhancements to building interiors. Some buildings need roofing replacements, central air conditioning and improved space utilization for visitor and office space are needed to improve interior conditions.

a. Building utilization rates compared to industry standards - Caro Center is one of three public hospitals that provides adult inpatient psychiatric services to residents of the state. The current average census for mentally ill patients is 150.

b. Mandated facility standard for program implementation - The buildings in use are currently in compliance with Joint Commission and the Center for Medicaid and Medicare Services (CMS) standards but recommendations have been made to upgrade facilities and create a more home-like and safer environment for patients and staff consistent with accrediting/certifying regulatory agencies. All buildings should be upgraded to become A.D.A. compliant to facilitate functionality, particularly for individuals with physical disabilities.

c. Functionality of existing structures and space allocation to program areas served -Buildings currently used meet the minimal necessary requirements for existing and projected space for program areas. Increased safety/security concern for patient therapeutic activities and specialized clinical needs require building renovations to address safety and active treatment needs. Minor renovations and cosmetic enhancements are made by hospital maintenance staff only if resources are available.

The physical plant in its current status continues to require extensive modifications to improve orientation and therapeutic measures for the patients, particularly those with neurological impairments. Improved safety measures need to be developed to control access and enhance the lighting for visual contrast. Flooring in multiple buildings require replacement and a specialized weave in carpeted areas. Sleeping areas require sufficient storage and floor space to accommodate prosthetic devices such as wheelchairs, walkers and crutches for safe and independent mobility. Bathing, showering and toileting accommodations with prosthetic grab bars and devices are needed in each sleeping area for convenience and privacy, as well as facilitating and maintaining adult daily living skills and independence. Additional visiting room space is needed to accommodate social gatherings for patients and visitors.

Shared living areas, such as dining rooms and social areas, require a home-like atmosphere that reflects appropriate size. Dining areas must be large enough to accommodate large

prosthetic devices and appliances but small enough to foster a social climate that avoids over-stimulation preventing confusion and agitation.

d. Replacement value of existing facilities – Unknown at this time.

e. Utility system condition - In 1989, an Energy Audit Report recommended decentralization of the Center's heating system by installing individual boilers in each occupied building. The recommendation was made because the Center's heating plant, distribution and condensate system are deteriorating. This project has been completed for several buildings on the southern part of the 650 acre campus. The water system consists of two (2) deep wells and distribution systems that currently meet Department of Natural Resources and Environment standards. Several improvements are being recommended by the Department of Natural Resources and Environment including water main improvements. The Center is connected to the Caro municipality waste water system. The existing underground primary wire system is over the 25-year life expectancy with several failures noted in recent years. All utilized buildings should have the electrical capabilities increased to meet current demands for power particularly due to increased technology. The central air conditioning systems at Cottage 13 and Cottage 14 need to be replaced as there is no air conditioning in these buildings. The remaining patient occupied buildings have partial air conditioning provided by several window units which need to be replaced by a more energy efficient central air conditioning system.

f. Facility infrastructure condition - In 2004, Campus Drive and several service driveways were repaved. Most of the Center's roadways were capped with an asphalt surface several years ago. All parking lots require repair or expansion for the safety of patients, visitors and employees. Intermittent patching of these areas is inadequate thereby, creating safety hazards and potential hazards to vehicles.

g. Adequacy of existing utilities and infrastructure systems - The existing infrastructure and utilities will meet current and future projected needs once current projects are implemented. Failure to make these improvements would jeopardize continued operations and safety.

h. Energy audit - The most recent energy audit was completed in 1989.

i. Land capacity - Currently, all land on the main campus is utilized by the Caro Center. Local non-profit units of government and private entities have expressed interest in parcels of land that are separate from the main campus; however, these buildings continue to deteriorate with each passing year. All utilities to these buildings have been disconnected. Several breaking and entering incidents have occurred causing damage. These incidents increase the potential of liability to the Caro Center.

IV. IMPLEMENTATION PLAN CARO CENTER

The following is an itemized listing of major capital outlay projects by priority:

- 1. Replace the Air Conditioning at Buildings 13, 14, 15 & 16
- 2. Remodel Building 27
- 3. Primary and Secondary Electrical Distribution
- 4. Replace Flooring at Buildings 13, 14, 27, 51, 55 & 66
- 5. Exterior Improvements to Buildings 13, 14, 15, 16, 27, 51, 55, 63, 66 & 68
- 6. Road and Parking Lot Replacement
- 7. Roof Replacement at Building 55
- 8. Demolish Buildings 1, 3, 5, 7, 9, 10, 11, 12, 17, 57, 106, 110 112 & 114

Failure to provide special maintenance funding to maintain the facility consistent with industry standards and national patient safety goals creates increased facility repair costs and unnecessary demands on facility maintenance staff; creates potential health and safety problems for patients and staff; and typically results in taking programming areas out of service while critical projects are being performed. Delaying needed repairs until they become critical usually results in more costly special maintenance project costs and disruption in the hospital's mission of providing safe patient care and treatment.

I. MISSION STATEMENT AND PROGRAM DESCRIPTION CENTER FOR FORENSIC PSYCHIATRY

The Center for Forensic Psychiatry's (CFP) mission is to provide quality forensic mental health services to individuals and the Michigan court system.

II: PROGRAMMING CHANGES CENTER FOR FORENSIC PSYCHIATRY

There are no major programming changes planned.

III: INDIVIDUAL FACILITY ASSESSMENT CENTER FOR FORENSIC PSYCHIATRY

The CFP is a 335,000 square foot facility that opened in 2005. The building is a two-story structure constructed of masonry, brick, concrete, and steel. The physical exterior of the building is in very good condition.

CFP is in the design phase for the construction of a warehouse. When the new CFP facility was planned and built in 2001, no provision was made for an on-site warehouse. The CFP has improvised with its storage capabilities over the past seven years, but the existing storage needs have grown to a level which cannot be accommodated in an efficient manner.

a. Building utilization rates compared to industry standards - The CFP, which is Michigan's sole certified forensic facility, conducts evaluations for all of the district and circuit criminal courts in the state's 83 counties pursuant to state statutory requirements. The center is a 210 bed psychiatric facility that provides both diagnostic services to the criminal justice system and psychiatric treatment for criminal defendants adjudicated as incompetent to stand trial and/or acquitted by reason of insanity.

b. Mandated facility standard for program implementation - The CFP maintains its accreditation by the Joint Commission and its certification by the Centers for Medicare and Medicaid Services (CMS).

c. Functionality of existing structures and space allocation to program areas served - The facility is adequate to meet the current and projected needs of the program.

d. Replacement value of existing facilities (insured value of structure to the extent available) - \$27,859,440

e. Utility system condition - The Electrical System at CFP is powered from two primary distribution systems provided by Detroit Edison. The system is in very good condition. The Emergency Power is provided from two 1000KV Generators that supply all life safety,

critical power and equipment branch power. The facility's emergency power load is approximately 600KV. The system is in very good condition.

The heating, ventilation, and air conditioning (HVAC) system is in very good condition.

CFP has a Lift Station/ bar screen building that handles all of the sewage from the facility. CFP is in the design phase to modify the building addressing the handling of the bio waste by CFP staff.

f. Infrastructure condition - The entire parking lot and all driveways will be repaired and sealed in 2015. The facility has four elevators that are in good working condition.

g. Adequacy of existing utilities and infrastructure systems - The utilities systems are currently adequate. CFP is currently in the completion phase of upgrading our data lines to fiber optic which will increase the bandwidth for data transmission.

h. Date of most recently completed energy audit, and, if an energy audit has yet to be completed, what is the plan/schedule for doing so - Last energy audit was conducted in 2006.

i. Land capacity - The CFP is located on approximately 54 acres. If there were a need to expand, there is space to do so. Space or open ground around the facility is needed to maintain the privacy and safety of the patients.

IV. IMPLEMENTATION PLAN CENTER FOR FORENSIC PSYCHIATRY

CFP is in the design phase for the construction of an on-site warehouse. Additionally, we have been working on several previously approved special maintenance projects throughout fiscal year 2015. The implementation of these projects is essential for maintaining the safety and security of the CFP.

I. MISSION STATEMENT AND PROGRAM DESCRIPTION HAWTHORN CENTER

The mission of Hawthorn Center is to provide children and adolescents with emotional disturbance, inpatient mental health services that meet the highest standards of quality and safety.

II: PROGRAMMING CHANGES HAWTHORN CENTER

Hawthorn Center is the only state hospital that offers inpatient psychiatric care to emotionally impaired and mentally ill children and adolescents who are residents of the State of Michigan. Physical plant capacity is 98 patients in six units but currently there is only staffing for four units which are open for a total of 64 beds maximum. Hawthorn Center treats children and adolescents who have a severe mental illness and serious emotional disturbances. Most of the patients have longstanding histories of trauma, extreme difficulties in functioning at home, in school, and in the community because of symptomology of serious emotional disturbance or severe mental illness. Almost all have had previous mental health interventions, including other inpatient treatment, and many have a variety of medical complications. In recent years, the problems of the patients have become much more complex - they have more severe mental illness and there are more patients with special problems resulting from trauma. There are a number of patients with minimal or no family contact, and there are patients who are the responsibility of the Department of Human Services and/or have involvement with the juvenile/family court system. There are also adolescents with ordered treatment by the court due to incompetence to stand trial (IST) and not guilty for reasons of insanity (NGRI).

An interdisciplinary team provides treatment, with the goal to provide a client centered integrated treatment approach that includes individual psychotherapy, psychoeducation, milieu and activity therapy (both in hospital and outside community), individualized special education experience, psychopharmacology treatment and family treatment. Behavior management plans are developed when therapeutically indicated.

The Hawthorn Center has educational services on site to meet the special education needs of the children and adolescents.

Hawthorn Center mission statement indicates a commitment to respond to the changing needs of the service community. All admissions, other than Incompetent to Standard Trial admissions, require Community Mental Health Authority approval and involvement during patient stay and discharge planning bearing the responsibility for post discharge treatment. Hawthorn Center accepts both long-term patients and short-term patients. In FY2013 Hawthorn Center admitted 465 patients and discharged 467 patients with an average census of 53.9. In FY2014 Hawthorn Center admitted 547 patients and discharged 581 patients with an average census of 49.99.

III: INDIVIDUAL FACILITY ASSESSMENT HAWTHORN CENTER

Hawthorn Center is comprised of Main (North Wing Portion with 2 closed living units), the South Wing (4 living units), and 5 condemned cottages located behind the Main Building/South Wing that need demolition.

The Main (North Wing portion) was built in 1956 and is a two-story structure constructed of masonry, brick, concrete, and steel. Other sections were added to this section in 1962, 1964, and 1967 that include a laboratory and research area, maintenance area, Administrative Offices, and the Library area. This building houses two closed patient living areas, clinical and business, administrative offices, Office of Recipient Right offices, support service areas such as the Main Kitchen and a Maintenance Shop, recreational facilities such as a gym, movie theater and swimming pool, classrooms for the Special Education services and storage space. All but the closed living areas are used.

The South Wing was built in 1975 and is a two-story structure constructed of masonry, brick, concrete and steel and is attached to the Main Building. The building houses four patient living areas, reception and visiting area, classrooms for Special Education services, clinical office space, kitchen, swimming pool and gym. It is in somewhat better condition than the Main portion. A project to install a new roof on South Wing was completed in 2009.

In FY2013/FY2014 funding was received for security cameras in public areas, renovation of patient bathrooms, walking/biking trail with fitness stations, soft-fall material for play structure, parking lot, outside basketball court, main kitchen walk-in freezers, flooring/carpeting in South Wing living areas, school, offices and small gym, replacement of two boilers in South Wing and South Wing pool filtration system.

The five cottages built in 1957 and 1958 were originally built as patient living units. Several years ago the State Fire Marshall condemned them.

a. Building utilization rates compared to industry standards - Hawthorn Center is the only state hospital that offers inpatient psychiatric care to children and adolescents (ages 5 through 17) who have a serious emotional disturbance or severe mental illness who are residents of the State of Michigan.

b. Mandated facility standards for program implementation - Hawthorn Center maintains its accreditation with Joint Commission for Accreditation of Healthcare Organizations as well as it is monitored by the state Medicaid Office for compliance with Medicare and Medicaid Services (CMMS) guidelines.

c. Functionality of existing structures and space allocation to program areas served -There are two gyms, two swimming pools, two occupational therapy rooms, a music therapy room, an art room and dance therapy. In FY 2013/2014 we were not able to accommodate 323 referrals due to lack of bed or appropriate bed

d. Replacement value of existing facilities - \$65 million

e. Utility system condition - Electrical service to the Main Building was designed and installed fifty six years ago. During FY2003, a 500 KVA transformer replaced an undersized 225 KVA transformer that had outlived its useful life and did not meet present day needs.

As a result of the Separation of Utility Services Project at Hawthorn Center in 2006, heat in the Main Building and South Wing is provided from gas fired boilers that produce hot water that is used for radiant heat and domestic use. The two older boilers are being replaced at this time. The HVAC system in the South Wing is 37 years old. While it is expected that it will not have to be replaced for 5 - 10 years, repair costs are starting to increase. In 2001, the canvas connectors for the system were determined to be in a state of deterioration and were replaced. Energy efficiency and pneumatic controls still need to be upgraded.

The Main Building had completed an overhaul of the HVAC system on the second floor in FY2002. The overhaul of the first floor HVAC started with the replacement of windows in FY2003. Funding is needed to complete the first floor HVAC project.

Sewage waste lines need to be investigated. At least one section of line needs repair and various areas are suspect due to continued plumbing repairs to those areas.

f. Facility infrastructure condition - Hawthorn Center has 5 condemned cottages. A concrete support beam supporting an entrance to the Main Building (North Wing) is deteriorating and will need repair to maintain building integrity.

g. Adequacy of existing utilities and infrastructure systems to current and five-year projected programmatic needs - The utilities and infrastructure systems are currently adequate, but in five-years it is projected there will be increased demands and needed repair/ replacements. Transformer(s) are aging, storm drain and sewer system is old and needs examination, space for storage of facilities large equipment and demolition of hazardous cottages.

h. Date of most recently completed energy audit - February, 2009

i. Land owned by the agency - Hawthorn Center is located on approximately 45 acres. If there were a need to expand, there is space to do so, particularly if the cottages were to be demolished. If cottages are torn down, it is hoped that the space will be used to build a Storage Pole Building/Green House. Space or open ground around the facility is needed to maintain the privacy and safety of the patients.

IV. IMPLEMENTATION PLAN HAWTHORN CENTER

This facility is currently not requesting major capital projects.

I. MISSION STATEMENT AND PROGRAM DESCRIPTION KALAMAZOO PSYCHIATRIC HOSPITAL

Kalamazoo Psychiatric Hospital will provide trauma informed person-centered inpatient psychiatric service and support, respecting the needs, dignity, individuality and cultural diversity of its patients, employees, volunteers and the communities it serves.

II: PROGRAMMING CHANGES KALAMAZOO PSYCHIATRIC HOSPITAL

None – Continue to work with Nursing Department to provide necessary physical improvements to the environment.

III: INDIVIDUAL FACILITY ASSESSMENT KALAMAZOO PSYCHIATRIC HOSPITAL

The Kalamazoo Psychiatric Hospital provides inpatient adult psychiatric services through a lease agreement with Western Michigan University (WMU) for utilization of specific buildings. KPH operates its hospital service programs from a Quadrangle Complex of Buildings (6), with some of its support operations housed in the following separate buildings:

Building 7 - Maintenance Services Offices/Operations

Building 14 - Religious Programming Services (Chapel)

Building 42 - Citizens Association for KPH (Gate Cottage)

Building 99 - Grounds equipment storage

An assessment of the physical condition of the buildings, leased by KPH, is reflected below by specific hospital service system.

Quad Building Structure (Good Condition) The hospital structure is solid.

The minor concerns are:

1) Brickwork tuck pointing - Tuck-pointing of brickwork is necessary to maintain the structural integrity of the building brickwork fascia.

2) Window conditions - Some thermal-ply windows have lost their seal, which results in condensation between the panes. KPH maintenance staff has replaced some windows with more requested to be replaced, which will be reflected in the Special Maintenance Project Request.

3) Plaster conditions - A great deal of plaster repair is required due to the age of the facility.

Building Roof

KPH Maintenance staff performs roof inspections and makes minor membrane repairs when required.

Overall the buildings' roofing remains in fair condition. During the fall protection project which was completed in 2014, the Tower Theater roof was found to be in need of replacement. Extra funding was allotted for this replacement and completed in January 2014. An infrared scan was conducted over the remaining hospital roof and detected wet conditions on the garden roof area above the elevator 2 & 3 control room. Repairs will be reflected in the Special Maintenance Request.

a. Building utilization rates compared to industry standards – KPH is one of three public hospitals that provide adult inpatient psychiatric services to residents of the state. Hospital overall bed capacity is 205 beds. The current average census is 140.

b. Mandated facility standards for program implementation – KPH is in compliance with Joint Commission and Life Safety Code standards; however, our departments are continually looking at methods of further improving our compliance.

c. Functionality of existing structures and space allocation to program areas served. The programming areas within the Kalamazoo Psychiatric Hospital have been made as functional and aesthetically pleasing as possible, given the structural limitations of the buildings. The facility is adequate to meet the current and projected needs of the program.

Projects aimed at improving the programming areas available within the hospital include:

1. Installation or replacement of air conditioning in various areas

2. Addition of items to secondary emergency circuits

3. Renovation of kitchen areas in Building 4, 1^{st} and 2^{nd} floor

4. Renovation of two medication rooms in Building 4, 1st floor,

5. Installation of a hot water system which will allow the hospital to produce its own soft water

6. Installation of a high voltage feeder line to enable Elevator #5 to be put on emergency power

7. Upgrade of the hospital's air handling unit controllers to improve the air quality

8. Replacement of cross corridor doors – approximately 50. This is a new Fire Marshall regulation.

9. Installation of two card swipe entry doors for security and the remodeling of the front lobby reception area, to accommodate the use of a portable metal detector

d. Replacement value of existing facilities - not known at this time

e. Utility system condition

Electrical System (Good Condition)

Under the lease agreement with WMU, "primary" electrical service is the responsibility of the WMU Power Plant.

The majority of our Quadrangle Complex buildings were recently upgraded to support the growing demand for electrical equipment. Installations in some upgraded areas have outdistanced available panel boards and secondary electrical rewiring is needed in some areas. KPH Maintenance staff has undertaken the installation of additional panel boards and the upgrading of electrical wiring when possible. As needed, old incandescent lighting has been replaced with compact fluorescent lamps. In addition, old fluorescent fixtures have been upgraded to electronic ballast energy efficient fixtures as needed. This is approximately 99% complete. The installation of two 200 kW generators and improvements made to the emergency distribution panel have improved the emergency power capability.

An outside contractor has installed fiber optic data lines to increase the band width capacity of the hospital to accommodate the transition to an electronic medical and business record system in April 2014.

Water System (Good Condition)

Cold water lines are operationally solid but they are very old. The main water supply for domestic cold water and the fire suppression system has been upgraded in recent years and is in good working condition. Secondary lines are old and in need of occasional repair.

The hot water lines are in fair condition. In recent years repairs have been made to the main line from the WMU Power Plant. The installed hot water recirculating system continues to supply hot water on demand to our patient areas. The soft hot water project is currently in the design stage. This project will allow KPH to produce its own soft hot water as a back up to WMU's provision.

Drain System (Fair Condition)

The drainage/sewer lines are very old and have been subjected to years of chemical clean-out use that has weakened them. While drainage/sewer piping is replaced as necessary, great lengths of it are buried within the facility floors/walls.

Steam System (Fair to Good Condition)

The steam lines are in fair to good condition. The insulation of the steam piping is problematic from an economic and safety perspective. Because of the insulation's poor condition, large amounts of heat are lost to the atmosphere, increasing utility costs. Also, the pipe insulation is an "asbestos containing material". Encapsulation and/or removal is performed by an independent contractor when necessary. Under the lease agreement with WMU, primary steam service is the responsibility of the WMU Power Plant. Due to age, there is concern with the condition of the 5# steam line needing repairs to the expansion joint located in the sub tunnel leading to the WMU Power Plant. This project is in the process of being completed under the "Special Maintenance Request". It is scheduled to be completed in spring 2015.

The utility tunnel that carries the steam and condensate piping leading from KPH Bldg. 4 to WMU power plant should be considered for replacement pending verification of condition once individual surfaces can be isolated to accomplish infrastructure repairs. This tunnel also carries two high voltage feeder lines and softened hot water.

Ventilation System (Good Condition)

The ventilation system is operationally sound and an upgrade to the air handling units has been requested and approved. This upgrade will replace the existing old air handler controllers to the makeup air handler units. This will help us control the fresh air exchange and also control the heat more efficiently.

Compressed Air System (Excellent Condition)

The WMU Power Plant reliably supplies quality compressed air (dried) for use with the hospital's refrigeration and ventilation equipment. KPH has an air compressor with an air dryer that is capable of supplying quality compressed air to equipment in the case of a WMU Power Plant failure.

f. Facility infrastructure condition

Roadway Systems/Parking (Fair to Good Condition)

The roadway system which services our hospital is in good condition. Maintenance has been done on vital areas in recent years.

A special maintenance project has been submitted for repaying of Kent Circle roadway and Kent Street from the main parking lot south to Calhoun Street, and is planned during the 2017 fiscal year.

g. Adequacy of existing utilities and infrastructure systems to current and five-year projected programmatic needs. The utilities and infrastructure systems are adequate for current and five-year projected programmatic needs.

h. Date of most recently completed energy audit - 2006

i. Land owned by the agency – The Kalamazoo Psychiatric Hospital leases buildings and surrounding areas from Western Michigan University. The hospital buildings and grounds occupy approximately 35 acres, which is maintained by the hospital maintenance staff.

IV. IMPLEMENTATION PLAN HAWTHORN CENTER

This facility has one project that meets the capital outlay criteria. The project involves the utility tunnel from WMU Power Plant to KPH Building 4 that supplies steam, electric and soft water to the hospital. The tunnel has major structural deficiencies; putting all the utilities at risk should it collapse. Some minor work is being undertaken at present to replace pipe hangers and install new hangers to the high voltage feeder lines. Byce Engineering prepared a cost estimate of \$3,000,000 for structural repairs.

I. MISSION STATEMENT AND PROGRAM DESCRIPTION WALTER P. REUTHER PSYCHIATRIC HOSPITAL

The mission of Walter P. Reuther Psychiatric Hospital is to provide an appropriate range of active inpatient psychiatric treatment services to best meet the needs of adults with severe mental illness in collaboration with community mental health agencies and authorities.

II: PROGRAMMING CHANGES WALTER P. REUTHER PSYCHIATRIC HOSPITAL

Walter P. Reuther Psychiatric Hospital's (WRPH) programming accepts adult patients from 18 years of age and up. The top Capital Outlay priority has been to construct a new Activity Therapy (A.T.) Building on the campus; construction in process. WRPH has no planned program eliminations or facility closures.

III: INDIVIDUAL FACILITY ASSESSMENT WALTER P. REUTHER PSYCHIATRIC HOSPITAL

a. Building utilization rates compared to industry standards.

WRPH is one of five public hospitals that provide inpatient psychiatric services to residents of the state. For fiscal year 2015, the daily census averaged 158 patients.

b. Mandated facility standards for program implementation, where applicable (i.e. federal/industry standards for laboratory facilities, hospitals, compliance with consent decrees, etc.).

As a result of the Joint Commission visit minor deficiencies were cited and the repairs completed. These items included: Annex egress sidewalk development, mechanical shaft steel platforms, emergency egress lighting/wiring, and duct cleaning.

c. Functionality of existing structures and space allocation to program areas served.

In 2015 WRPH increased its census to approximately 180 patients.

WRPH is currently in the construction phase to build an 18,000 square foot A.T. Building which will connect on the eastside of the hospital. The A.T. Building is designed to provide the purpose of addressing the space needs for physical activities required for our younger patients.

With both the main hospital building and the A.T. Building, patients will have easy access to full-spectrum of mental health services. This project is scheduled for completion in November 2015.

Six patient units (R1 to R6) have completed slight renovation. The upgrades included the following: demolition of existing shower rooms; installations of new shower rooms, toilets and new fixtures; and installation of mechanical shaft grating.

Other projects included: Annex egress sidewalk development, mechanical shaft steel platforms, emergency egress lighting/wiring, and duct cleaning completed in 2015.

d. Replacement value of existing facilities (insured value of structure to the extent available).

Facility Condition Assessment by FTC&H Architects and Engineering completed January 2015; assessment provided a comprehensive facility review of the infrastructure of WRPH. A Capital Cost Model was prepared for Walter P. Reuther Psychiatric Hospital Facility Condition Assessment to generate cost estimates to summarize and compare potential investments over the planning horizon.

e. Utility system condition (i.e. heating, ventilation, and air conditioning (HVAC), water and sewage, electrical, etc.).

All utility systems at WRPH are beyond their useful life. WRPH does have an emergency power generator that provides limited emergency power. As part of the A.T. Building project – the capability for full emergency power has been installed. The HVAC chillers and cooling tower are also beyond their life expectancy. Upgrading these systems will increase hospital's cooling capacity and greatly reduce energy consumption. Currently during the warmest summer days, fans are needed on the units to keep temperatures tolerable. The boiler systems are scheduled for upgrades in 2015. High voltage electrical panels and electrical switchgears are also of original construction. Plumbing systems are of original construction and develop frequent leaks causing disruption to patient care.

f. Facility infrastructure condition (i.e. roads, bridges, parking structures, lots, etc.).

As mentioned above WRPH completed a Facility Condition Assessment. All four of the hospital's original elevators were replaced in December 2013, which has greatly enhanced movement. During the summer of 2014, as part of the A.T. building construction, the north parking lot was repaved increasing the total parking spaces to 162 spaces. In 2015, the east parking lot was repaired. The main hospital's roof will also be a focus of the facility condition assessment.

g. Adequacy of existing utilities and infrastructure systems to current and five-year projected programmatic needs.

Aside from conditions mentioned above, infrastructure systems are adequate for current and five-year projected programmatic needs.

IV. IMPLEMENTATION PLAN WALTER P. REUTHER PSYCHIATRIC HOSPITAL

This facility is not currently requesting major capital projects.