

CC-C: CAPITAL CONSTRUCTION REQUEST FOR FY 2011-12

Project Title:		Suicide Risk at CMHIP and CMHIFL, Phase 3 of 6		State Controller Project No. P0835		Name and Email of Preparer: Don Lawhead don.lawhead@state.or.us		
Project Year(s):		FY 2008 to FY2015, Year 3		Signature of Department or Institution Approval: <i>[Signature]</i>		Date: 8-10-10		
Agency or Institution:		Department of Human Services		Signature CCHE Approval: NA		Date: NA		
Agency or Institution Priority Number:		1		Signature OSPB Approval: <i>[Signature]</i>		Date: 8-12-10		
Revision? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, last submission date:	Total Project Costs	Prior-Year Appropriation(s)	Current Request FY 2011-12	Year 2 Request	Year 3 Request	Year 4 Request	Year 5 Request
<b>A. Land Acquisition</b>								
(1)	Land/Building Acquisition	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>B. Professional Services</b>								
(1)	Master Plan/PP	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(2)	Site Surveys, Investigations, Reports	\$30,000	\$10,000	\$5,000	\$5,000	\$5,000	\$5,000	\$0
(3)	Architectural/Engineering/ Basic Services	\$2,019,174	\$538,803	\$494,924	\$415,746	\$280,530	\$289,171	\$0
(4)	Code Review/Inspection	\$35,000	\$8,000	\$12,000	\$5,000	\$5,000	\$5,000	\$0
(5)	Construction Management	\$174,000	\$49,000	\$35,000	\$30,000	\$30,000	\$30,000	\$0
(6)	Advertisements	\$12,500	\$9,000	\$3,500	\$0	\$0	\$0	\$0
(7a)	Inflation for Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(7b)	Inflation Percentage Applied		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
(8)	Other Asbestos abate. Design	\$20,000	\$10,000	\$10,000	\$0	\$0	\$0	\$0
(9)	Total Professional Services	\$2,290,674	\$624,803	\$560,424	\$455,746	\$320,530	\$329,171	\$0
<b>C. Construction or Improvement</b>								
(1)	Infrastructure	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	(a) Service/Utilities	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	(b) Site Improvements	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(2)	Structure/Systems/ Components	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	(a) New (GSF):	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	New \$ /GSF							
	(b) Renovate GSF: 41,781	\$14,172,103	\$3,598,026	\$3,535,171	\$2,969,613	\$2,003,788	\$2,085,505	\$0
	Renovate \$83.10/GSF							
(3)	Other (Asbestos)	\$80,000	\$50,000	\$10,000	\$10,000	\$10,000	\$0	\$0
(4)	High Performance Certification Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(5a)	Inflation for Construction	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(5b)	Inflation Percentage Applied		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
(6)	Total Construction Costs	\$14,252,103	\$3,648,026	\$3,545,171	\$2,979,613	\$2,013,788	\$2,085,505	\$0
<b>D. Equipment and Furnishings</b>								
(1)	Equipment	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(2)	Furnishings	\$272,830	\$68,830	\$60,000	\$60,000	\$60,000	\$24,000	\$0
(3)	Communications	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(4a)	Inflation on Equipment and Furnishings	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(4b)	Inflation Percentage Applied		0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
(5)	Total Equipment and Furnishings Cost	\$272,830	\$68,830	\$60,000	\$60,000	\$60,000	\$24,000	\$0
<b>E. Miscellaneous</b>								
(1)	Art in Public Places=1% of State Total Construction Costs (see SB 10-94)	\$0	\$36,380	\$36,462	\$29,798	\$20,138	\$20,655	\$0
(2)	Annual Payment for Certificates of Participation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(3)	Relocation Costs	\$70,500	\$0	\$48,000	\$7,500	\$7,500	\$7,500	\$0
(4)	Other Costs (specify)	\$6,000	\$6,000	\$0	\$0	\$0	\$0	\$0
(5)	Other Costs (specify)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(6)	Other Costs (specify)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(7)	Other Costs (specify)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(8)	Total Misc. Costs	\$218,921	\$42,380	\$83,462	\$37,298	\$27,638	\$28,155	\$0
F.	Total Project Costs	\$17,034,528	\$4,384,039	\$4,249,047	\$3,532,655	\$2,421,966	\$2,446,831	\$0
<b>G. Project Contingency</b>								
(1)	5% for New	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(2)	10% for Renovation	\$1,703,453	\$438,404	\$424,905	\$353,285	\$242,196	\$244,883	\$0
(3)	Total Contingency	\$1,703,453	\$438,404	\$424,905	\$353,285	\$242,196	\$244,883	\$0
H.	Total Budget Request	\$18,737,980	\$4,822,443	\$4,673,951	\$3,885,920	\$2,664,162	\$2,691,714	\$0
<b>I. Source of Funds</b>								
	CCF	\$15,257,790	\$1,342,253	\$4,673,951	\$3,685,920	\$2,664,162	\$2,691,714	\$0
	CF	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	RF	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	FF	\$3,480,190	\$3,480,190	\$0	\$0	\$0	\$0	\$0

## CC-C: CAPITAL CONSTRUCTION REQUEST FY 2011-12

1. SUMMARY INFORMATION	Complete Every Row in this Column
a. Agency or Institution Name:	Department of Human Services
b. Project Name:	Suicide Risk Mitigation at the Colorado Mental Health Institutes at Fort Logan and Pueblo, Phase 3 of 6
c. State Controller Project Number:	P0835
d. Project's Year (1, 2, etc.):	3
e. Date Sent to DHE:	N/A
f. Date Sent to OSPB:	July 13, 2010, revised August 12, 2010
g. Date Sent to CDC with copy to JBC:	September 1, 2010
h. Date of Project's Most Recent Program Plan:	February 14, 2002
i. Date of Governing Board Approval (for institutions of higher education):	_____ or <input checked="" type="checkbox"/> Not an institution of higher education
j. Continuation Project (there is a corresponding project appropriated in prior year)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list project numbers here: _____ # _____ # _____
k. Request 6-month encumbrance waiver?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, justify below)
l. Anticipated Project Completion Date:	June 2016
m. Purpose Code	E(1)
n. New construction or modification?	<input type="checkbox"/> New <input checked="" type="checkbox"/> Modification
o. Total Square Footage	_____ ASF <u>41,781</u> GSF
p. Cost per Square Foot (using construction cost per section C of CC-C form and GSF)	\$83.10/SF - This is an average value is based on the total costs divided by the gross square footage of the building areas affected. The actual cost per SF will vary significantly from space to space.

2. TYPE OF REQUEST	"X" All that Apply	Instructions
a. State-funded Project – Higher Education		Requires CDHE then OSPB approval before submission to CDC and JBC. Use CC-C Excel Form and CC-C Word form.
b. State-funded Project – Non Higher Education	X	Requires OSPB approval only before submission to CDC and JBC. Use CC-C Excel Form and CC-C Word form.
c. 100% Cash Funded Project for higher education institution participating in the Intercept Program		Requires CDHE approval only before submission to CDC. Use CC-C Excel Form and CC-C Word form.
d. Under 100% Cash-Funded Project – Higher Education		Requires CDHE then OSPB approval before submission to CDC and JBC. Use CC-C Excel Form and CC-C Word form.
e. Cash-Funded Project – Non Higher Education		Requires OSPB approval only before submission to CDC and JBC. Use CC-C Excel Form and CC-C Word form.
f. Federally Funded Project		Requires CDHE (if Higher Ed) then OSPB approval before submission to CDC and JBC. Use CC-C Excel Form and Word form.
g. IT Project		Use CC-IT Excel form and CC-C Word form. Non Higher Ed agencies must approve with OIT before submission to OSPB.

<b>3. CRITERIA FOR FY 2011-12 PROJECT</b>	<b>“X” Applicable Item(s)</b>	<b>Describe How Criterion is Met for Marked Items</b>
a. 100% Cash or Federally Funded Project		
b. Priority #1 for department or #1-5 for DHS	X	This project is the #1 priority for the Department of Human Services and #1 priority for the Office of Behavioral Health & Housing.
c. Meets Priority Criteria for Higher Education		
d. Project Originally in HJR 08-1042		
e. Continuation Project from FY 2010-11 CCF Appropriation		
f. Statutorily required COP payment for capital construction		
g. Project requires CDHE approval for program review but does not meet FY 11-12 criteria for submission to OSPB. This request does not have OSPB review.		

<b>4. BRIEF SUMMARY OF FY 2010-11 CAPITAL PROJECT</b>	<b>Enter summary below, this column</b>
<p>State exactly what is requested, why, for how much, over what period of time.</p>	<p>This project will mitigate risks of patient suicide and/or self-harm by removing and replacing building components at the Colorado Mental Health Institutes at Fort Logan (CMHIFL) and Pueblo (CMHIP). \$4,673,951 CCF is requested to mitigate suicide risks in the admissions, clinic, and treatment spaces of Building 125, CMHIP, and continue to mitigate suicide risks in adult admissions units (Teams 1 and 3) Building E at CMHIFL.</p> <p>At CMHIP, the admissions/clinic/treatment area in Building 125, presents numerous suicide hazards to patients by potential access medical supplies, equipment, or tools. The highest risk areas are the treatment and toilet rooms where clients are entitled to a degree of privacy. The work in this phase includes extensive work in the patient rooms, hallways and day rooms including replacement of metal ceiling systems, installation of a fire sprinkler system and modifications to the HVAC system. This effort will also increase the life safety measures and code compliance of the building. The work includes 19 smaller restrooms and the majority of the common areas used/occupied by patients. Phase 2 (the prior phase) was limited primarily to the larger, gang restrooms. Work includes removal and replacement of plumbing fixtures, lights, sprinkler heads, mechanical and life safety equipment, ceiling systems, door hardware, etc.</p> <p>Because the proposed improvements are extensive, the patients will be relocated to interim space during construction located in vacant space in the F Cottage complex. Minimal improvements will prepare the interim space.</p> <p>Phase 3 would begin in July of 2011 and be completed by June of 2013. The entire project continues through Phase 6, which would be completed in June of 2016 if all phases are funded as requested.</p>

<b>5. CONTINUATION HISTORY</b>		<p>If this is a continuation project (a project with a former appropriation), complete the following table including all appropriations and expenditures. Include the bill numbers for each appropriation.          If not a continuation project, mark here: <input checked="" type="checkbox"/> N/A</p>			
	<b>FY 2007-08 Appropriated</b>	<b>FY 2008-09 Appropriated</b>	<b>FY 2009-10 Appropriated</b>	<b>Spent to Date (7-09-2010)</b>	<b>FY 2010-11 Appropriated</b>
Total Funds	\$0	\$3,284,215	\$4,822,443	\$408,586.34	\$0
General Fund	\$0	\$3,284,215	[\$1,941,962] = \$1,342,253	\$149,798.22	\$0
Cash Funds					\$0
Cash Funds Exempt / Re-appropriated Funds					\$0
Federal Funds			\$3,480,190	\$258,788.12	\$0
Bill Number(s)		HB 08-1375	SB 09-280 (Negative supplemental for General funds). ARRA Grant #S397A0900. (Federal funds from the Governor's Office from ARRA Government Services Funds)		

<b>6. OBJECTIVES</b>	<b>Enter summary below, this column</b>
a. List key objectives of the entire project – big picture This row not applicable as this is a single year project: <input type="checkbox"/> N/A	<ul style="list-style-type: none"> <li>• Improve patient safety by reducing suicide and self-harm opportunities associated the physical environment.</li> <li>• Reduce liability to the State of Colorado, Dept. of Human Services.</li> <li>• Reduce or remove patient suicide risks at both institutes by focusing on the highest risk areas within the highest risk units.</li> <li>• Correct building and life safety code deficiencies as required.</li> </ul>
b. List key objectives of this year's request - detailed	<ul style="list-style-type: none"> <li>• To continue to mitigate suicide risk at both CMHIP and CMHIFL.</li> <li>• To address the highest remaining risks not addressed in Phase 1 and 2 of the project.</li> <li>• To complete an analysis of all suicide risks in the Phase 3 areas and renovate the building spaces as required, improving patient safety.</li> </ul>

<b>7. ESTIMATED ENTIRE PROJECT TIMETABLE:</b>			
Delineate how many years this project crosses from start to finish, describing what portion of the project each year will accomplish.			
<b>Steps to be Completed</b>	<b>Start Date(s)</b>	<b>Completion Date(s)</b>	<b>Year</b>
Phase 1 (Funded in FY 2008-9.) (Reduced by supplement FY 2009-10.) <ul style="list-style-type: none"> <li>• Design and construction of extensive work for the Locked Adolescent Unit (LAU), CMHIP.</li> </ul>	July 2009	December 2010	1
Phase 2 (Funded FY 2010-11 – ARRA Funds) <ul style="list-style-type: none"> <li>• Design and construction of extensive work at CMHIFL for the adult unit, Team 2 at F-1 cottage</li> <li>• Design and construction of prioritized restrooms, seclusion rooms and sleeping rooms at CMHIFL and CMHIP including:             <ul style="list-style-type: none"> <li>○ Adult units, Teams 1, 3, and 5 in Bldg. E at CMHIFL;</li> </ul> </li> </ul>	Feb. 2010	September 2011	2

○ Locked civil units, General Adult and Adolescent Psychiatric Services (GAAPS), Units 67 and 69, in Building 116 at CMHIP			
Phase 3 (FY 2011-12 Current Request Year) <ul style="list-style-type: none"> <li>Design and construction of work, including restroom modifications, removal of hanging hazards, securing of potentially hazardous medical, tools, equipment and supplies in the treatment/admissions/clinic in Bldg. 125, CMHIP.</li> <li>Design and construction of remaining restroom, sleeping room and seclusion room work; and correction of code related deficiencies at adult Teams 1 and 3, Bldg. E, CMHIFL</li> <li>Minor modifications to F-2 for swing space.</li> </ul>	July 2011	June 2013	3
Phase 4 (FY 2012-13) <ul style="list-style-type: none"> <li>Design and construction of suicide risk mitigation improvements in Transitional Forensic Security Unit, F-5 and Forensic Social Learning Programs (SLP), Building 106 CMHIP</li> <li>Design and const. of remaining restroom, sleeping room and seclusion room work; and correction of code related deficiencies in adult Teams 5, Bldg. E CMHIFL</li> </ul>	July 2012	June 2014	4
Phase 5 (FY 2012-2013) <ul style="list-style-type: none"> <li>Design and construction of extensive work at Community Reintegration Units (CRU), 79N and the 79S, Bldg. 106, CMHIP</li> <li>Design and construction of extensive work in the Mountain Star school/residential unit in G-1 wing in Building H at CMHIFL</li> </ul>	July 2013	June 2015	5
Phase 6 (FY 2013-14) <ul style="list-style-type: none"> <li>Design and construction of treatment areas in Building 132, CMHIP</li> <li>Design and construction of clinical and treatment areas of Hospital Building H, CMHIFL</li> </ul>	July 2014	June 2016	6

**8. FY 2010-11 SPECIFIC TIMETABLE:**

*Delineate the steps that will be taken in FY 2011/12 to complete this project or this phase of the project.*

Steps to be Completed	Start Date(s)	Completion Date(s)
Negotiate, prepare and process architect/engineer agreement	July 2011	September 2011
Design and code approval	September 2011	March 2012
Advertise, bid and award construction contract	March 2012	May 2012
Construction and closeout	May 2012	June 2013

**9. IMPACT**

*Enter summary below, this column*

Describe actual impact to program if this year's project is not funded	As long as this project is not executed, the likelihood of successful suicides poses a significant concern.
Describe how this project will affect State operating expenditures, including dollars and FTE for each project component.	This project does not affect operating expenditures.
Describe consistency with Agency or Institutional Master Plan and 5-Year Capital Improvement Plan Schedule, explain variances	This project is consistent with the Colorado Department of Human Services, OBHH Agency Master plan and 5 Year Capital Improvement Plan Schedule.

<b>10. JUSTIFICATION</b>	<b>Enter summary below, this column</b>
<p>Fully justify and defend this request. This will be the most lengthy section of the request. Include all necessary detail and specific scope of work. Describe how much space is needed, what types of rooms or equipment are included in the request and why, and illustrate where on campus the project will be executed. Explain what is wrong with the current situation and why a new or different building or capital expenditure is needed. Focus more on why the current facilities are insufficient, less on why the current programs are driving change.</p>	<p>This request serves to improve the physical environment of the inpatient units at CMHIFL and patient treatment spaces at CMHIP to reduce the risk of patient suicide and/or self-harm. The institutes provide inpatient services to individuals of all ages with complex, serious and persistent mental illness. At the time of construction, the buildings were not intended for use as locked inpatient psychiatric units. Patient needs have changed, with the numbers of seriously suicidal and self-harming individuals steadily increasing. In lieu of replacing major facilities, the patient care units require systematic modifications to safely meet patient population needs. The patient units at CMHIFL were originally constructed in the early 1960's and except for the High Security Forensics Institute (HSFI) which was recently completed, the patient/residential units at CMHIP vary in age, being built between 1939 and 1982. The average age of the buildings included in this project is about 46 years.</p> <p>The need for systematic, suicide risk mitigation effort has been well known and documented as far back as 1995. In addition to the physical plant, other factors such as supervision, assessment, surveillance, and treatment, are involved in successfully preventing clients from inflicting self-harm. As a result, the Department and CMHIP have taken several actions over the last several years to reduce suicide risk. These actions include risk assessment as part of the pre-referral assessment and intake process; ongoing patient assessment to identify and evaluate risk; suicide risk training for clinical and direct care staff on an annual basis and more frequently on higher risk units; and, increased physical observation of patients.</p> <p>Colorado law provides that a person who “appears to be an imminent danger to himself or herself may be ordered into custody to a designated facility for their safety.” It is the State’s obligation to ensure a physical environment of patient care that is reasonably free of objects, structure or design, which would enable the relatively easy completion of a suicidal act. Physical suicide risks are always a great concern and hazard in facilities housing and treating acutely mentally ill clients, incarcerated persons, and other individuals committed to a State institution. The institutes have increasingly become the provider of last resort, often treating individuals who have very few options and present a significant safety and/or suicide risk.</p> <p>The Colorado Department of Human Services (CDHS) has previously implemented changes in hospital operations, including staff training that contributed to creating a safer environment for patients. The number of suicide attempts at the institutes has remained relatively constant since FY 2001-02, averaging about 32 attempts per year, with two completed suicides within the past three years; one at CMHIFL and one at CMHIP. While suicides and suicide attempts occur less frequently than in the late 1990's, the data below show that suicide attempts are a continuing concern, requiring the elimination of identified factors that may contribute to a completed act.</p>

Suicides and Attempted Suicides at the Mental Health Institutes								
Fiscal Year	CMHIP Forensic		CMHIP Civil		CMHIFL		Totals	
	Attempts	Suicides	Attempts	Suicides	Attempts	Suicides	Attempts	Suicides
1997-98	13	3	28	0	2	0	43	3
1998-99	4	0	15	0	11	0	30	0
1999-00	13	1	31	0	14	1	58	2
2000-01	14	0	39	0	21	0	74	0
2001-02	11	0	17	0	6	0	34	0
2002-03	7	0	24	0	1	0	32	0
2003-04	11	0	17	0	4	0	32	0
2004-05	10	0	14	0	7	0	31	0
2005-06	7	0	18	0	11	0	36	0
2006-07	6	0	18	0	11	1	35	1
2007-08	4	0	14	0	9	0	27	0
2008-09	4	0	8	0	17	0	29	0
Total	104	4	243	0	114	2	461	6

Numerous task forces have been convened, accomplished work, and contributed to the Suicide Risk assessment and prevention effort since 1994. In July 1998, CDHS hired Criminal and Juvenile Justice International to conduct a detailed observation of physical factors that could impact suicide attempts and to provide recommendations regarding architectural and programmatic safety and security for the Maximum Security Forensic Unit (IFP) at CMHIP. DHS also hired Superior Consultant Company (SCC) to conduct observations and a suicide risk assessment of its inpatient and residential team unit facilities. SCC's observations and findings provided the clinical/architectural expertise for the Fort Logan Suicide Risk Assessment Program (SRAP). The assessment report included, among other very valuable information and recommendations, a listing of the "top ten" physical suicide risks occurring on the CMHIFL campus. Integrated Construction Technologies (ICT) was also hired to provide support services for the SRAP. ICT worked with state personnel and direct care staff to create a database documenting the suicide risks identified in the Superior Consultant Company report. The database, completed in 1999, details an item-by-item, room-by-room, listing of physical suicide risks.

CDHS began implementing recommendations from the Superior Consultant Company for the CMHIFL in 2000 and completed several suicide risk mitigation projects including: replacing shower curtain rods with break-away hooks; changing the type of shower curtain material; replacing shower heads in common areas with security push button controls; replacing/modifying some toilet partitions in common bathrooms; removing scissor door closures; replacing towel hooks with breakaway hooks; and replacing closets on the locked adolescent unit with modular fixtures. However, a number of the identified risks were not addressed in 2000 due to budgetary constraints. Many of these risks will be addressed in phase three of this project.

The work at CMHIFL will include two adult, inpatient admissions units. These two units typically admit individuals that have not been stabilized and are experiencing a psychiatric emergency. These two units are located on the first floor of Building E. The work on these two units will continue the suicide mitigation efforts of Phase 2 (the ARRA funded component of the project). The focus will be on completing the mitigation of the highest risk areas plus extensive work in the sleeping rooms. The highest risk areas are bathing and toilet rooms where clients are entitled to a degree of privacy. Work will include removal and replacement of all the metal ceiling system, plumbing fixtures, lights, sprinkler heads, mechanical and life safety equipment, grid suspended ceilings, doorknobs, hinges, closers, etc. In addition to the component replacements, some areas require renovation to improve staff visibility and supervision. Also, mechanical systems will be modified to minimize the suicide risk, staff assault and eliminating areas used to hide contraband. The project will also correct life safety and construction code deficiencies. Building E is 46 years old.

Because the proposed improvements are extensive, the patients will be relocated to interim space during construction. The interim space will be located in vacant space in the F cottage complex and will require a minimal amount of work to prepare the space for patient occupancy.

The work at CMHIP is located in the admissions, clinic and treatment areas on the first floor of Building 125. The nature of the services provided in these areas and given patient privacy requirements, patients will be in close proximity to medical supplies and equipment that could be used to inflict self harm or to assault staff and/or other patients. In addition to the usual hazards in the restrooms, there are numerous areas which lack proper control and adequate visual surveillance. Building 125 is 47 years old.

Identification, testing, abatement planning, abatement, and retesting after abatement is required to ensure safe removal of any asbestos prior to commencement of construction. The renovations will remove asbestos containing material that creates a hazard for construction workers. The building modifications require partial or total abatement of asbestos in ceilings, around piping, in floors, in floor base, in crawl spaces, and other locations.

All building components that are renovated or modified during construction will be made compliant to current building and life safety codes per of State Buildings Programs requirements.

The proposed project phasing completes building modifications on units with patients at the highest acuity levels and with consideration for resolving the most significant risk factors first as determined by the mental health institutes. The priorities are set based upon a facilities risk assessment, including factors such as the type of client, current building conditions, and existing facility health and life safety defects.



<b>11. CALCULATIONS</b>	<b>Describe how the numbers on the CC-C Excel form were calculated; describe in this column, FY 2010-11 only. Out years will be requested separately</b>
Assumptions and calculations for land purchase	N/A
Assumptions and calculations for professional services	<p>The standard architectural/engineering (A/E) fees for this category of renovation/addition projects are 10-16% of the cost of construction per industry standards.</p> <p>The FY 2011-12 A/E fee is approximately 14% with consideration that the A/E team will do their work at a reduced rate because of the current business environment.</p> <p>Renovation work requires more experienced professionals due to the complexity of dealing with existing conditions. This is especially true since suicide risk mitigation is a specialized area of work.</p> <p>This project involves work at various locations at CMHIFL and CMHIP, which requires additional time and effort for travel and investigation of varying conditions.</p> <p>The units are mostly locked units that have specific security requirements, which also require additional time and effort.</p> <p>The additional A/E work required in renovation projects includes: as-built architectural drawings; investigation, engineering, and analysis of existing conditions and existing equipment; investigations; investigation and development of solutions for unanticipated situations; development of plans for relocation of existing occupants during construction; research of decisions made and codes analysis when project was constructed; delays to the project due to unknown conditions; etc.</p>
Assumptions and calculations for construction	<p>Construction of extensive work for the adult Team 1 and 3 at CMHIFL is as follows: demolition of ceilings, walls, floors, lighting &amp; sprinkler heads, baseboard, doors; asbestos abatement; construction of walls, doors, windows, hardware; electrical modifications; heating, ventilation and air conditioning system; HVAC controls; fire sprinkler and fire alarm system retrofits; plumbing; lighting and electrical retrofits/replacements; finishes; security and monitor systems; miscellaneous construction; general conditions; contractors overhead and profit.</p> <p>A summary of the construction included is: modifications to Building 125; F-2 cottage preparation for occupancy; construction at Team 1 and Team 3.</p> <p>The construction budgets are based on earlier consultant-prepared assumptions; a combination of costs per square foot (SF) and unit prices; and comparisons with cost per square foot for remodel work. The total costs per SF contained in Summary Information are calculated on gross SF of the patient units. Because the actual space and the effort or work per SF varies considerably, the actual costs of areas to be remodeled are difficult to estimate and can be misleading. The detailed estimate being developed involves a more detailed investigation and analysis by the team of trained architects, engineers, and consultants who are current executing the project.</p> <p>Relocation costs are provided to provide moving services and security while patients are relocated. The patient files, personal effects and other items such as furnishings must be moved to prepare the unit for mitigation construction and renovation.</p>

Provide list of equipment and furnishings to total on CC-C Excel form	<p>An allowance is allocated for furniture and equipment.</p> <p>The equipment and furnishings allowance is based upon providing new patient and seclusion room beds, wardrobe units, and other furniture as required. A complete list of furnishing will be prepared in conjunction with an audit, inventory, and final design of each space after the design team is in-place.</p> <p>Existing closets will be removed and replaced with wardrobe units specially designed to reduce suicide risks by Correctional Industries. The closets and furnishings currently pose various suicide risks and present a potential hazard to the occupants. The closets and furnishings are an integral part of the mitigation and should be replaced with units that reduce the potential for suicide where possible.</p>
Art in public places: describe what portions of project apply and calculation used. The calculation should apply only to appropriated State funds (typically CCF)	<p>Art in public places in based on 1% of the construction costs.</p> <p>\$3,545,171 construction costs x 1% = \$35,452 for Art in Public Places.</p>
Discuss all inflation assumptions, as delineated on the CC-C form, by year and by component (professional services, construction or improvement, and equipment and furnishings)	0% Inflation is calculated for the FY-2011-12 request.
Discuss HPCP cost assumptions	The project does not lend itself to a LEED™ certification since it is minor construction. However, energy efficient plumbing, lighting, and fixtures will be used, as well as green building products and practices as much as possible to support energy efficiency and green building initiatives.
Describe the assumptions for the Building Maintenance Fund	The project will essentially remodel certain components and areas of each unit. The project will not increase maintenance requirements and represents only a portion of the building system(s). Therefore, no funds are being requested for the Building Maintenance Fund.
Other General	The costs associated with suicide risk mitigation are difficult to estimate due to the unique nature of each treatment unit and the lack of historical data. The current request (\$4,673,951) is slightly (1.6%) lower than last years' estimate (\$4,749,006). This reduction reflects some estimating refinements and ongoing input from the design consultants. Larger differences in year-to-year cost estimates may occur in future requests.

<b>12. CASH FUND PROJECTION</b>					
Does request include cash funds?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      (If no, proceed to question #13)				
If the project is being financed, describe the terms of the bond, including the length of the bond, the expected interest rate, when the agency plans to go to market, and the expected average annual payment.	<input checked="" type="checkbox"/> N/A				
<b>Cash Fund Sources Lists</b> (list all separately; projected balances must account for other obligations)	<b>Actual FY 2008-09 Cash Fund Balance</b>	<b>Current Fund Balance FY 2009-10</b>	<b>Projected FY 2009-10 Cash Fund Balance</b>	<b>Projected FY 2010-11 Cash Fund Balance</b>	<b>Projected FY 2011-12 Cash Fund Balance</b>
a. Fund Number: _____					
<b>Cash Funds</b>	\$	\$	\$	\$	\$
Described how revenue accrues to the fund					

Describe other obligations and encumbrances to the fund					
b. Fund Number: _____					
<b>Cash Funds</b>	\$	\$	\$	\$	\$
Describe how revenue accrues to the fund					
Describe other obligations and encumbrances to the fund					

<b>13. RELATED PROJECTS</b>	Delineate capital construction and controlled maintenance projects for this campus in the past five years. If building is a stand alone property include prior projects for this building only.			
Year	Project #	Item	CCF Cost	Pending Underway, or Requested
FY 05-06	M05028	Replace Panic/Duress & Fire Alarm CMHIFL	\$3,102,643	Complete
FY 06-07	M05029	Critical Heat Plant Repairs	\$483,290	Complete
FY 06-07	M06075	R/R Emerg. Gen. & Auto Tran. Switch CMHIFL	\$421,538	Complete
Fy 07-08	M06077	R/R Campus Tunnel & Utility CMHIP Ph 1 & 2	\$3,521,756	Complete
FY 07-08	P0810	Suicide Risk Assessment/Prevention @CMHIFL	\$160,000	Funding terminated
FY 08-09	M08033	Replace Emerg. Generator CMHIFL Ph 1 & 2	\$1,140,080	Underway
FY 09-10	P0834	F Cottage Air Conditioning	\$1,806,035	Funding terminated
FY 09-10	M06077	R/R Campus Tunnel & Utility CMHIP Ph 3	\$758,167	Underway
FY 09-10	M08033	Replace Emerg. Generator CMHIFL Ph 3	\$1,432,241	Underway
FY 09-10	P1001	F Cottage Life Safety Improvements	\$1,995,290	Underway

<b>14. PROGRAM PLAN</b>	
Describe any changes to this project on the Program Plan, Master Plan, or Five Year Plan since its submission to the Capital Development Committee	<input checked="" type="checkbox"/> No changes <input type="checkbox"/> Changes are described below

<b>15. ADDITIONAL INFORMATION</b>	
Provide any additional information to best justify the request.	<p>The timeline for executing the project involves numerous steps including: contracting for A/E services; detailed assessment of the existing building conditions; design services including conceptual design, design development and budgeting, and final design including owner/peer review periods; development of detailed contract documents including engineering, drawings, and specifications; advertisement and bidding of project to prospective contractors; bid review and contractor selection; execution of contractor contract; relocation of patients and staff to temporary space during construction; mobilization and construction including asbestos abatement, demolition, construction, and commissioning, punch lists, and closeout; purchase and installation of furniture and equipment; final relocation of the patients staff and all files, belongings, medications, etc. after construction to the remodeled building; proper execution and reporting as required by the Office of the State Architect guidelines.</p>

Phase 1  
No work at CMHIFL

Phase 5  
Mtn. Star Residential  
in G-1 Wing in  
Bldg H

Phase 6  
Treatment in G-4  
Wing in Bldg H

Phase 3  
Teams 1 & 3 remaining work in Bldg E  
Phase 4  
Team 5 remaining work in Bldg E

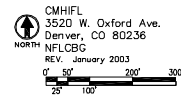
Phase 2 (ARRA)  
Team 2 in Bldg F1  
Teams 1, 3, & 5 selected  
work in Bldg E

**Colorado Mental Health Institute at Fort Logan**



NORTH NOT TO SCALE

**SITE PLAN**



**Project Title:** *Suicide Risk Mitigation Project - Phase 3 of 6*  
**DHS Agency:** *Office of Behavioral Health & Housing*  
**Location:** *Colorado Mental Health Institute at Fort Logan*

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Phase 1  
LAU in Bldg 137  
(Funded in FY 08/09)

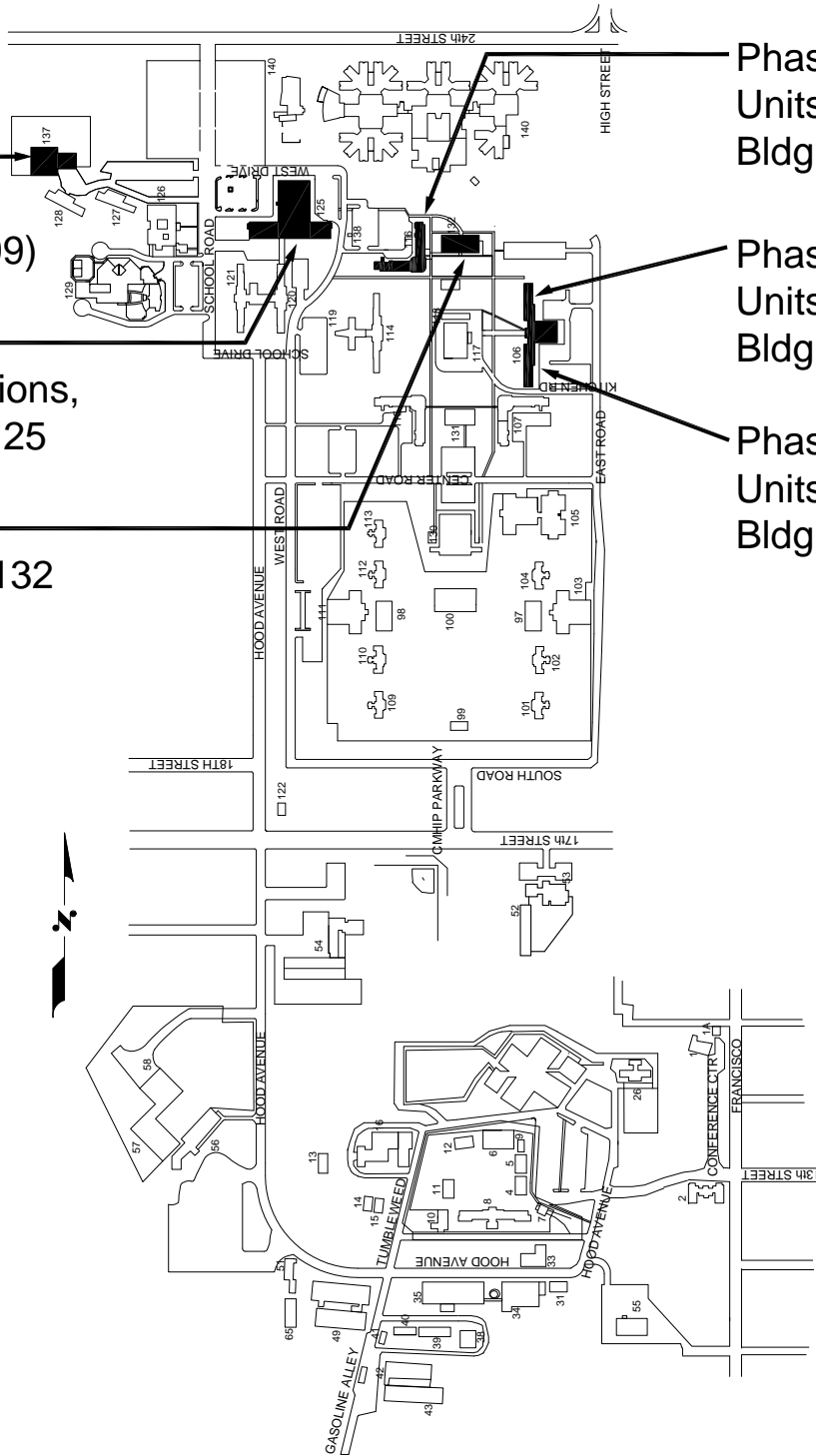
Phase 3  
Treatment, Admissions,  
and Clinic in Bldg 125

Phase 6  
Treatment in Bldg 132

Phase 2  
Units 67 & 69 in  
Bldg 116

Phase 4  
Units SLP & F-5 in  
Bldg 106, 2nd Floor

Phase 5  
Units 79N & 79S in  
Bldg 106, 1st Floor



# Colorado Mental Health Institute at Pueblo



## SITE PLAN

NORTH NOT TO SCALE



**Project Title:** *Suicide Risk Mitigation Project - Phase 3 of 6*  
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