

**FACILITY PROGRAM PLAN AMENDMENT\***  
**DEPARTMENT OF CORRECTIONS**  
**San Carlos Correctional Facility**

\*Updated information is in red.

A. PROJECT TITLE:

250-Bed Expansion, San Carlos Correctional Facility

B. SUMMARY INFORMATION

	Total Request	Prior Approp.	FY 2000-01 Request	FY 2001-02 Request
Total Project Cost	26,996,775	423,3600	2,158,888	2,088,700
			73,948	26,996,775

	Total Request	Prior Approp.	FY 2009-10 Request
Total Project Cost	76,107,000	2,158,889	73,948,111

Difference in Total Project Cost	49,110,225	158 percent increase
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Summary of Project			
TOTAL COST		\$76,107,000	\$29,508,835
NUMBER OF BEDS		250	
COST PER BED		\$304,428	\$118,035
BED CONFIGURATION	4 new clusters: 3 64-bed clusters and 1 58-bed cluster		
PROJECTED OCCUPANCY		Maintenance Building - January 2011	January-2002
		Food Service & Medical, Kitchen Expansion - July 2011	October-2002
		Housing Units - April 2012	April-2003
		Laundry - April 2012	April-2003
		Program Space - July 2012	July-2003
PROJECTED OPERATING		FY 2014-15 - \$13,304,329	FY 2003-04 - \$11,524,944
PROJECTED FTE NEED		188.6 FTE	189.1 FTE
OPERATING COST PER FTE		\$70,543	\$60,946
OPERATING COST PER INMATE		\$53,217	\$46,100

The facility program plan amendment amends the 2001 facility program plan to revise and update population projections, expand food service operations, and renovate the existing 250-bed facility in order to harden cells for use as administrative segregation units.

**Updated population projections.** Offender mental health needs are identified using the Psychiatric Needs Level system. All offenders that require attention are coded as P3 through P5, with higher numbers indicating increased symptoms and demands for services. Inmates are further categorized according to their type of mental disorder, including: (1) a major mental illness disorder such as schizophrenia or a depressive disorder; (2) an organic mental disorder that results from disease or a brain injury; and (3) other psychiatric diagnoses that require treatment such as adjustment disorders, obsessive compulsive disorder, anxiety disorders, personality disorders, and attention deficit disorders.

In the past, the department did not include offenders with other psychiatric diagnoses in its count of offenders with serious mental illness. However, these inmates also require mental health services and may present a significant risk of self injury and suicide. Some may only require mental health services temporarily, but others will require assistance to manage in the general population for the duration of their incarceration. The program plan amendment more accurately reflects the department's specialized bed needs.

**Expanded food service operations.** The La Vista Correctional Facility food service will be expanded by 13,000 square feet and the East Canon City Prison Complex (ECCPC) warehouse will be expanded by 20,000 square feet. This will allow the department to provide meals for all inmates located on the Colorado Mental Health Institute at Pueblo campus. Consequently, the Department of Human Services is withdrawing a request to expand its food service and warehouse operations on the campus. The DOC states the food service expansion will reduce the cost per meal and provide jobs for female inmates on the campus. The expansion cost is estimated at \$6.7 million. The estimated annual savings if DOC were to assume all aspects of food service operations in Pueblo is estimated to be \$318,596.

**Renovations to existing 250-bed facility.** The project will renovate the existing housing tower to harden cells for use by inmates with a higher security classification and with more intense treatment programs. Inmates with a lower security classification involved in centralized work and training programs will be housed in the new housing units. The department says it cannot accommodate the number of offenders with serious mental illness and administrative segregation needs in the existing 24-bed unit.

Level of Security/Housing Type					
Housing Unit (HU) - Treatment Type	Abr.	Beds - Current Facilities	Beds - Expanded Facilities	Difference After Expansion	Future Population
Admissions	ADM	25	27	2	29
High Security Special Needs Unit	SNU	24	134	110	250
Intensive Treatment	INT	24	50	26	103
Stabilization	STB	24	56	32	120
Developmentally Disabled	DD	25	58	33	64
Supportive Environment	SE	64	249	185	128
Therapeutic Community	TC	64	32	32 (3)	0
Women's Unit	WMN	24	0	24 N/A	N/A
High Needs Medical Unit	MD	0	24	24	24
Transitional Unit	TR	0	34	34	34
<b>Total</b>		<b>255</b>	<b>500</b>	<b>245</b>	<b>752</b>

Cluster Configuration					
	Current Facilities			Proposed Facilities	
Cluster 4	HU 1 - 24 beds INT	HU 2 - 25 beds ADM		HU 1 - 26 beds INT	HU 2 - 27 beds ADM
Cluster 3	HU 3 - 24 beds STB	HU 4 - 25 beds DD		HU 3 - 28 beds STB	HU 4 - 28 beds DD
Cluster 2	HU 5 - 24 beds WMN	HU 6 - 32 beds SE	HU 7 - 32 beds SE	HU 5 - 24 beds WMN	HU 6 - 29 beds SE
Cluster 1	HU 8 - 32 beds TC	HU 9 - 32 beds TC		HU 8 - 29 beds TC	HU 9 - 30 beds TC
Cluster 4	25 beds INT	HU 2 - 25 beds ADM		28 beds SNU	29 beds SNU
Cluster 3	25 beds STB	26 beds STB		26 beds SNU	27 beds SNU
Cluster 2	HU 5 - 24 beds ADSEG	29 beds DD	HU 7 - 32 beds SE	HU 5 - 24 beds SNU	28 beds INT
Cluster 1	35 beds TC	34 beds SE		HU 8 - 29 beds STB	HU 9 - 30 beds STB
Cluster 5				HU 10 - 32 beds TC	HU 11 - 32 beds SE
Cluster 6				HU 12 - 32 beds SE	HU 13 - 32 beds SE
Cluster 7				HU 14 - 32 beds DD SE	HU 15 - 32 beds DD SE
Cluster 8				HU 16 - 34 beds TR	HU 17 - 24 beds MD

## C. MISSION & PROGRAMMATIC INTENT

Pursuant to Section 17-1-104.8, C.R.S., the Capital Development Committee (CDC) reviews and makes a recommendation on facility program plans for each proposed new, expanded, renovated, or improved correctional facility.

This facility program plan addresses the proposed 250-bed expansion of the San Carlos Correctional Facility (SCCF), bringing the total capacity to 500 beds. SCCF treats and manages offenders with serious mental illness (OSMI). The Department of Corrections (DOC) reports that these kinds of inmates often exhibit erratic behavior and are often violent. Removal of these inmates from the DOC's general population allows the DOC to assist in the OSMI's special needs and assists the mainline facilities to utilize staff as designed. ~~DOC anticipates that the number of inmates targeted for admission to SCCF will exceed 500 early in the year 2000.~~ There are about 3,300 OSMI offenders, or 18 percent of the total population, in DOC facilities. The department projects that there will be about 3,200 offenders with serious mental illness in DOC facilities by 2012. Although not all OSMI require special housing assignments, the department calculates that 20 to 25 percent of OSMI would best be served by a special placement at SCCF during their incarceration. DOC projects the proposed 250-bed expansion will not meet all the future needs of the expanding population, and future special beds expansion will be required at a site to be determined.

The project will increase the number of beds, as well as provide additional program and support facilities to manage the additional 250 offenders. The plan calls for the nine current housing units (24 to 32 beds each) to house the less stable inmate who requires more intensive treatment programs as well as higher security levels. Additional security provisions (renovations) will be made to the current units, including the conversion of the present capacity to single occupancy cells. Once inmates have been stabilized they will be housed in six new 32-bed units that will be constructed as medium security beds (192 beds).

The project also includes two additional units to house a special population. The first is a 24-bed unit serving OSMI who require a high degree of medical support. The second 34-bed unit will house completely stabilized inmates immediately prior to their return to the general population or their release from the DOC system. The total eight new housing units will be constructed horizontally around a secure yard so that inmates can be supervised during unescorted movement. The yard will also allow for standardized recreational activities.

Additionally, the following relocations and conversions are to occur under this program plan.

**Food Service** The existing food services facilities will be relocated to new, larger facilities close to the new housing units, and will also be expanded at the La Vista Correctional Facility and the Youth Offender System facility, in order to prepare meals for the entire inmate population at the Colorado Mental Health Institute at Pueblo campus. Additionally, the Department of Human Services is no longer considering plans to expand their food service and warehouse facilities since DOC will prepare meals for all the inmates on the Colorado Mental Health Institute at Pueblo.

**Medical Clinic** The medical clinic will be relocated adjacent to the high needs medical unit where the bulk of the population is located. Consequently, the space cleared will be converted to provide additional work and training program space in accordance with the inmates' treatment plan.

**Kitchen** The existing kitchen and adjacent areas will be converted to a laundry industry which will provide a real-work opportunity for the special needs of the inmates.

**Maintenance** The plan abandons the present maintenance area (made possible by the construction of a consolidated maintenance facility on the CMHIP campus) which will free up space for inmate work and training programs.

### C.1 Therapeutic Programs

The project includes the establishment of a three new programs: (1) dual diagnosis substance abuse program; (2) a high needs medical unit that will address both psychiatric and intensive medical service needs; and (3) an expansion for developmentally disabled offenders.

- ✓ **Dual Diagnosis Substance Abuse Program.** DOC reports that mentally ill offenders are as likely to experience substance abuse problems as the general population. Yet, due to the focus on their additional diagnosis, they have failed to benefit from standard chemical dependency treatment. This program would allow those individuals additional support, including slower paced programs, with an emphasis on substance abuse and self-management of mental illness and symptoms. This program will be moved to one of the Cluster 5 buildings and continue to house 32 inmates.

✓ **High Needs Medical Services Program.** According to DOC's facility program plan, inmates with major mental illnesses have disproportionately high medical needs. The mission of this program is to provide medical and psychiatric care for OSMI in conjunction with high medical needs. The high medical needs may include chronic or acute medical needs and may be related to chronic medical conditions such as heart disease, diabetes, cancer, multiple sclerosis or para/quadruplegia, or to neurological disorders.

✓ **Developmentally Disabled.** This project will expand the current program for developmentally disabled offenders. DOC reports that these inmates are as vulnerable in the general population as any seriously mentally ill offender. Currently, San Carlos operates a program for about 32 26 developmentally disabled inmates. This project would expand the population to 64 50. The department says that these inmates make up about 8 percent of the population and projects that there will be about 1,400 such inmates by 2011.

**D. THE PROGRAM PLAN**

The additional beds will utilize the same clinical team model as in the current facilities. The model will consist of the progressive or regressive movements within the facility and will be accomplished based on clinical treatment and response need. The following table again lists the treatment modalities that will be in operation in the expanded facility as well as its population.

Treatment Type	Bed Count of Current Facilities	Bed Count with Expanded Facilities	Future Population
<b>Admissions</b> - will provide initial intake and assessment for general population inmates. <del>This is a high security level because it handles inmates of all security levels.</del> One of the high security special needs units will serve as the admissions unit for high security placements.	25	27 29	29
<b>High Security SNUS</b> - will provide a range of psychiatric and mental health services for offenders who are classified as administrative segregation. Offenders will be placed in units based on common treatment needs.	24	134	250
<b>Intensive Treatment</b> - will provide ongoing treatment and management of <del>high security</del> general population inmates who require higher level restrictions due to mental illnesses. This includes inmates who are psychiatrically unstable and present a danger to themselves or others; inmates who are seriously mentally ill but resistant to treatment; severe character disorders who require a high level of structure and control; and inmates in administrative segregation and punitive confinement.	24 25	50 28	103
<b>Stabilization</b> - is to provide psychiatric stabilization for inmates not stabilized during their stay in the admissions unit. These are intermediate-security units.	24 51	56 59	120
<b>Developmentally Disabled</b> - will serve inmates identified as mentally retarded or who have deficits in intellectual functioning.	25 29	58 64	64
<b>Supportive Environment</b> - provides a dual function: (1) provide stabilization to inmates who are expected to return to the general population after brief services; and (2) long-term management and treatment for inmates who present symptoms of major mental illness indefinitely.	64 66	219 96	128
<b>Therapeutic Community</b> - provides services to dual diagnosed patients - mental illness and substance abuse. It is an intensive long-term program.	64 35	32	0
<b>Women's Unit</b> - the facility will no longer house female inmates.	24 0	0	0
<b>High Needs Medical Unit</b> - provides a unit for mentally ill inmates who require nursing services and frequent medical procedures.	0	24	24
<b>Transitional Unit</b> - prepares inmates for a return either to the community or to the general population. Inmates are expected to demonstrate a higher level of competence in social relations and self-management.	0	34	34
<b>Total</b>	<b>255</b>	<b>500</b>	<b>752</b>

Source: DOC San Carlos Correctional Facility 250-Bed Expansion Facility Program Plan and Legislative Council Staff.

San Carlos emphasizes productive work activities; including academic programs and vocational education programs. The program plan reflects that approximately 40.47 percent of the expanded inmate population will be involved in productive work areas, 40 percent will be administrative segregation inmates who are not allowed to leave their units, and the remaining 20.53-percent will be involved in standard academic or vocational education programs. The program includes the following work assignments and academic programs.

Work/Training Assignment				
Work/Training Assignment	Current	% of Total	Proposed	% of Total
<b>Institutional Assignment</b>				
Food Service	45	28.5%	60 64	20.3%
Custodial	23	14.6%	39 43	13.7%
Maintenance	10	6.3%	44 16	5.1%
Laundry	3	1.9%	13	4.1%
Clerical	5	3.2%	7	2.2%
Recreation	5	3.2%	9	2.9%
Barber	1	0.6%	4 2	0.6%
<b>Total Institutional Assignments</b>	<b>92</b>	<b>58.2%</b>	<b>443 154</b>	<b>48.9%</b>
<b>Programs</b>				
Academic Education	34	21.5%	404 90	28.6%
Vocational Education	9	5.7%	30	9.5%
Library	11	7.0%	11	3.5%
Law Library	5 0	0.0%	5 0	0.0%
Sheltered Workshop	12	7.6%	46 30	9.5%
<b>Total Program Assignments</b>	<b>74 66</b>	<b>41.8%</b>	<b>463 161</b>	<b>51.1%</b>
<b>Total - All Assignments</b>	<b>163 158</b>	<b>100.0%</b>	<b>306 315</b>	<b>100.0%</b>

**E. PROJECTED POPULATION AND FUTURE EXPANSION**

SCCF was originally intended to provide special mental health treatment services for 250 DOC inmates. According to DOC, this approach has been proven operationally successful and will continue under the new expansion. The project will also include administrative segregation beds. The department says there are about 400 administrative segregation inmates in DOC facilities identified as having serious mental illnesses. The project will harden 250 beds, including all cells in the existing housing tower and the current administrative segregation unit in Cluster 2 for management of high security inmates. DOC says that it is critical to create additional administrative segregation units to avoid the risk of litigation. However, additional administrative segregation units will reduce the number of beds originally planned for general population offenders with mental illness. When the project is complete, there will be a total of 250 beds available for general population offenders with mental illness, an increase of 19 beds.

DOC reports that current changes in Colorado's mental health system are responsible for the increased number of OSMI sentenced to the DOC. The changes include the downsizing of the state hospitals and enlarging the community mental health system services. According to the DOC's facility program plan, the number of patients in state mental health institutions dropped from a high of 599,000 in 1955 to 69,000 in 1995.

During FY 1990-91, when SCCF was initially planned, approximately 230 of the DOC's 7,697 inmates (3 percent) were diagnosed as OSMI. Since that time, DOC believes the department has improved the identification and tracking of these inmates. Currently, OSMI's comprise approximately 11 percent of the total DOC population (13,445). As of July 1999, the OSMI population was estimated to be 11 percent (1,461) of the DOC facility population of 13,445. In addition, the DOC identified 84 mentally ill offenders in community corrections and 250 mentally ill offenders on parole. The following table summarizes the projected OSMI population in DOC facilities, community corrections, and parole. The table indicates the OSMI population is projected to increase by 480 inmates from July 1999 to June 2005.

Date	Current and Projected DOC Population			Current and Projected Number of OSMI at Current Proportions		
	DOC Facility Population	Community Corrections	Parole	DOC Facilities (11%)	Community Corrections (6%)	Parole (6%)
July 1999	13,445	1,494	4,008	1,461	84	250
June 2000	13,847	1,539	4,650	1,523	92	279
June 2001	14,651	1,628	5,130	1,612	98	308
June 2002	15,524	1,725	6,007	1,708	104	360
June 2003	16,351	1,817	6,882	1,799	109	413
June 2004	17,086	1,899	7,303	1,879	114	438
June 2005	17,648	1,961	No data	1,941	118	No data
Inc. From 1999	4,203	467	3,295	480	34	188

Source: DOC San Carlos Correctional Facility 250-Bed Expansion Facility Program Plan

The department has determined about 24 percent of the total population has psychiatric needs that require at least periodic services. The identified OSMI population is about 18 percent of the total population. Finally, about 8 percent of the total population has a developmental disability. Some offenders may fit into all three categories. For instance, an offender with a serious mental illness will also be included in the offender with psychiatric needs category. An offender with a developmental disability may also be an offender with a serious mental illness. The table below shows the current and projected population totals for male offenders in DOC, including those with serious mental illness, psychiatric needs, and developmental disabilities (DD).

Current and Projected DOC Population (Male Offenders)				
Date	DOC Facility Population	Offenders with Serious Mental Illness (18 %)	Offenders with Psychiatric Needs (24 %)	Offenders with DD (8 %)
June 2007	20,178	3,632	4,843	1,614
June 2008	20,684	3,723	4,964	1,655
June 2009	21,203	3,817	5,089	1,696
June 2010	21,763	3,917	5,223	1,741
June 2011	22,348	4,023	5,364	1,788
June 2012	22,935	4,128	5,504	1,835
Increase From 2007	2,757	496	661	221

Source: Legislative Council Staff, December 2008 Forecast of Adult Prison Population

According to DOC, not all offenders with serious mental illnesses require special housing assignments. The department reports that 75 to 80 percent of OSMI function within the general population. The remaining 20 to 25 percent of the OSMI population constitute the service population of the special needs unit. The following table summarizes the projected OSMI population that should be served in a facility such as San Carlos.

	DOC Facility Population	OSMI in DOC Facilities	Special-Service Population (33%)
July 1999	13,445	1,461	487
June 2000	13,847	1,523	508
June 2001	14,651	1,612	537
June 2002	15,524	1,708	569
June 2003	16,351	1,799	600
June 2004	17,086	1,879	626
June 2005	17,648	1,941	647

Source: DOC San Carlos Correctional Facility 250-Bed Expansion Facility Program Plan, and Legislative Council Staff

	DOC Facility Population	OSMI in DOC Facilities	Special Service Population (25%)
June 2007	20,178	3,632	908
June 2008	20,684	3,723	931
June 2009	21,203	3,817	954
June 2010	21,763	3,917	979
June 2011	22,348	4,023	1,006
June 2012	22,935	4,128	1,032

Source: Legislative Council Staff, December 2008 Forecast of Adult Prison Population

#### F. EXISTING FACILITY LIMITATIONS

DOC's facility program plan states that the facility should be designed to allow for the greatest flexibility possible. Currently, DOC only removes the highest needs inmates from the general population and places them at San Carlos. DOC predicts that over time the level of need/severity of the SCCF population will increase.

Currently, DOC is moving inmates through the program at a faster rate than it would prefer. A high proportion of the initial inmate cohort assigned to San Carlos was able to stay for an extended period of time and take part in ongoing treatment. Due to the increased demand for beds at this facility, DOC has shifted its mission from longer-term treatment to include more rapid stabilization and turnover. DOC reports that this trend will continue in the expanded facility. However, the program plan indicates that DOC must plan for a gradually increasing demand for high security beds at San Carlos.

#### G. SCOPE OF WORK

As previously stated, the 250-bed expansion at SCCF will require the construction of new space for the following:

- ✓ housing/treatment units;
- ✓ food service;
- ✓ medical operations; and
- ✓ maintenance operations.

The facility program plan recommends a podular cellblock configuration for the proposed new units. A podular cellblock is one in which the cellfronts are arranged around the perimeter of a central day space. This arrangement permits an overview of day space activities for an officer and an approximate 90 degree view of the cellfronts (Attachment A).

The project also includes the renovations of existing buildings to provide space for increased program and support operations. The relocation removal of maintenance facilities to a central location will free up existing space for program use. If a new maintenance facility is constructed, it is planned for about 8,000 GSF and will be located south of the Youth Offender System facility. However, if Building 54 is available, it will be renovated to accommodate the central support services functions. Further, existing housing unit renovations will provide additional office space for the unit staff, 20 additional single-bunk cells, and additional outdoor exercise space.

DOC is dedicating 5 percent of the project's total cost to LEED certification for the design and construction of the new facility. The department notes that it will not pursue LEED certification for the renovation of the existing tower because the total costs of the renovation will be less than 25 percent of the building's total value, and therefore is not required to meet LEED standards. The following table provides a delineation of the spaces.

Space Usage					
Space Area	Existing	Continued in Use	Area Reassigned	New Construction	Total Proposed
<b>ADMINISTRATION</b>	8,138	8,138			8,138
<b>OPERATIONS</b>	6,100	5,694 6,100	2,340 1,934		8,034
Visiting	3,593	3,593			3,593
Medical Clinic	3,162			3,430	3,430
<b>PROGRAMS</b>					
Renovation	11,085	8,880 11,085	4,300 2,104	2,202	13,189 15,391
Interior Construction	2,202		2,202		2,202
<b>SUPPORT SERVICES</b>					
Dining	2,104			3,733	3,733
Kitchen & Food Stores	2,804			4,310	4,310
Laundry & Clothing Stores			4,305		4,305
Central Receiving & Storage	3,090	2,647 3,090	1,670 1,227		4,317
Building Maintenance	1,500			8,000 8,375	8,000 8,375
Central Mechanical Equipment	6,504	6,504		1,301	7,805
<b>SUBTOTAL - PROGRAM &amp; SUPPORT</b>	<b>50,282 48,080</b>	<b>35,465 38,510</b>	<b>14,817 9,570</b>	<b>20,774 23,351</b>	<b>71,056 71,431</b>
Space Area	Existing	Continued in Use	Area Reassigned	New Construction	Total Proposed
<b>HOUSING</b>					
Cluster 1	14,776	13,216 13,692	1,560 1,084		14,776
Cluster 2	22,219	20,659 21,255	1,560 964		22,219
Cluster 3	15,511	14,275 14,402	1,236 1,109		15,511
Cluster 4	15,511	14,275 14,397	1,236 1,114		15,511
Cluster 5				18,497	18,497
Inmate Yard (Cluster 5)				3,200	3,200
Cluster 6				18,110	18,110
Inmate Yard (Cluster 6)				3,200	3,200
Cluster 7				18,110	18,110
Inmate Yard (Cluster 7)				3,200	3,200
Cluster 8				16,650	16,650
Inmate Yard (Cluster 8)				3,200	3,200
<b>SUBTOTAL - HOUSING &amp; TREATMENT PROGRAMS</b>	<b>68,017</b>	<b>62,425 63,746</b>	<b>5,592 4,271</b>	<b>84,167 71,367</b>	<b>152,184 139,384</b>
<b>Total Department Gross Area (ASF)</b>	<b>448,299 116,097</b>				<b>223,240 210,815</b>
<b>Circulation &amp; Equipment Space</b>	<b>16,088</b>				<b>22,088 22,715</b>
<b>Total Building Gross Area (GSF)</b>	<b>434,387</b>				<b>245,328</b>
<b>Total Building Gross Area (GSF)*</b>	<b>132,185</b>				<b>233,530</b>
<b>Difference in Total Building GSF</b>	<b>-2,202</b>				<b>-11,798</b>
<b>Percent Change in GSF</b>	<b>-.02 percent</b>				<b>-.05 percent</b>

Source: DOC San Carlos Correctional Facility 250-Bed Expansion Facility Program Plan

\* The updated total GSF is 247,901. See CDC Staff Questions #14 for an explanation.



### G.1 Materials

The housing will be constructed of fire-resistant construction, and cell areas will be constructed of load-bearing concrete unit masonry with precast or poured-in-place concrete floor and roof slabs. The second-tier floor slabs will require a poured-in-place topping. (The facility program plan suggests evaluating the cost effectiveness of using precast manufactured cell units.) Dayroom, program, and treatment areas will have precast column and beam framing with concrete unit masonry exterior walls and partitions, and precast double-tee roof construction. **Roofing will be built-up bituminous roofing with a 10-year full value no-dollar-limit labor and material warranty.**

The window in each cell will have a minimum three-square-foot vertical slit window with fixed glass-clad polycarbonate glazing. Cell doors will consist of medium-security swing doors with jamb-mounted electro-mechanical locks. The doors will include optional remote and local control.

Interior finishes will be painted masonry with fluid-applied, seamless epoxy walls and floors. Cell floors will be exposed concrete that is steel troweled, sealed, and waxed. Dayspaces will have adhered carpet to assist with an acoustical environment for staff and inmates. The ceilings in cell areas will be painted concrete. Throughout the rest of the project, the ceilings will be covered with acoustic tile.

Exterior walls will be concrete unit masonry, insulated with expanded urethane board and veneered with concrete unit masonry facing.

### G.2 Security

The wall and roof areas constitute the secure perimeter of the institution. According to the program plan, the new buildings will not need heavy detention grade equipment used in the existing buildings. The wall between housing units will be detention type construction. Cell fronts/doors will also be detention grade as well.

The existing facilities use the exterior wall of the buildings as a secure perimeter. The exercise/open space is located within the middle of the facility. In addition, control fencing is provided outside the secure area. The perimeter security will be extended to encompass new facilities. The program plan notes that control fencing outside will be required in order to deter approaching the cell windows. The project also replaces the existing SCCF perimeter fence with a double fence with detection and security lighting.

### G.3 Structural Considerations

The facility program plan suggests the following structural considerations.

- ✓ *Foundation system.* The foundations would consist of straight shaft piers drilled into bedrock.
- ✓ *Slabs on grade.* The first level consists of a slab-on-grade supported on several feet of select nonexpansive structural fill or a structured floor slab over a void system or crawl space.

#### G.4 Building Mechanical/Electrical Systems

The facility program plan recommends the following mechanical/electrical systems.

- |                               |                                |
|-------------------------------|--------------------------------|
| ✓ Chilled Water               | ✓ Condenser Water              |
| ✓ Heating Hot Water           | ✓ Steam                        |
| ✓ Air Distribution            | ✓ Controls                     |
| ✓ Raw Domestic Cold Water     | ✓ Softened Domestic Cold Water |
| ✓ Softened Domestic Hot Water | ✓ Sanitary Sewer               |
| ✓ Plumbing Fixtures *         | ✓ Fire Protection              |
| ✓ Electrical Power            | ✓ Emergency Standby Power      |
| ✓ Wiring Methods              | ✓ Interior Lighting            |
| ✓ Communications              | ✓ Electronic Systems **        |
| ✓ Door Control                | ✓ Fire Alarm System ***        |
| ✓ Paging and Intercom         | ✓ CATV                         |
| ✓ Video Surveillance System   | ✓ Personal Alarm System        |

\* The project replaces the existing porcelain china plumbing fixtures with stainless steel, security-type combination toilet/sink fixtures. The project will also replace all existing metered sink valves because they are out of compliance with Colorado Department of Public Health and Environment water run-time rules.

\*\* The project replaces the existing Security Control System Panel Interfaces to address compatibility concerns with other security systems.

\*\*\* The project replaces the fire alarm and control system. DOC says replacement parts are difficult to locate for the existing system.

#### Site Development

The project includes development of an additional site area to provide for the preferred horizontal deployment of the new housing pods, as well as for additional parking and storm water retention (Attachment B). The primary utilities will be expanded to support the new facilities. According to the program plan, some of the expansions will require improvement of CMHIP facilities. The following site developments will occur.

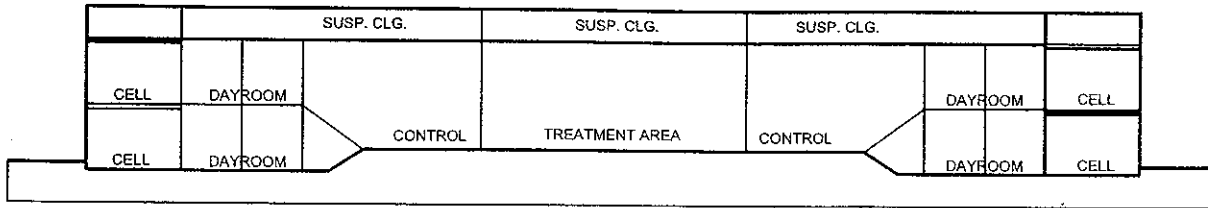
- ✓ **Roadways and paving.** Hood Avenue and the utilities lying in its right of way will be relocated. A new parking apron, constructed off the existing service road, will accommodate emergency vehicles and institutional and vendor vehicles supporting the kitchen.
- ✓ **Parking.** The existing parking area will be expanded by the addition of three more bays (120 spaces total), extending into the additional site area created by the relocation of Hood Avenue.
- ✓ **Storm water retention.** In order to accommodate the additional runoff from the new housing, the basin lying along the south side of the parking area will be extended to the east.
- ✓ **Electrical utilities.** Either the existing emergency generator, the existing pad-mounted utility transformer, or both, will have to be relocated. The existing electric utility high-voltage underground feeder to the pad-mounted transformer will have to be relocated.

H. **COST ESTIMATE**

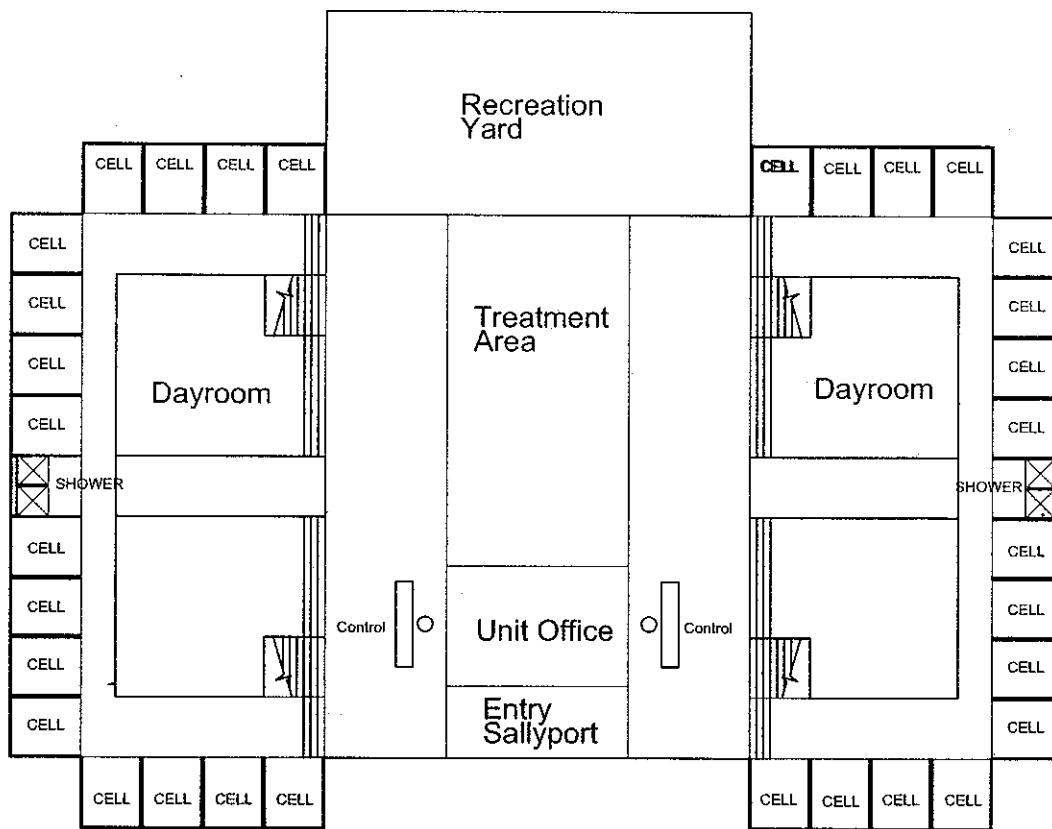
The department notes that the increased project costs are due, in part, to a significant escalation in construction costs since the project was first requested in FY 2001-02. DOC says in order to calculate the FY 2009-10 request it used an OSPB-approved inflation factor of 4.1 percent and a material cost index factor of 5.5 percent. Additional costs not due to inflation include design modifications to address recently adopted codes and standards, additional consultant services, the La Vista Correctional Facility kitchen renovation/expansion, the Eastern Canon City Prison Complex Warehouse expansion, video visitation equipment, and costs associated with LEED certification.

			FY 2000-01 FY 2009-10 Request	FY 2001-02 Request
	Total Request	Prior Approp.		
<b>Land Acquisition</b>	0	0	0	0
<b>Professional Services</b>				
Facilities Program Planning & Site Study	382,640	382,640	0	0
	761,236	430,738	330,498	0
	1,763,500	0	4,404,700	
Arch/Engrs (Bldg)	2,345,984	1,549,215	796,769	358,800
	492,234	35,874	133,233	
Arch/Engrs (Other)	2,465,463	4,134	2,461,339	323,430
	650,000	0	60,000	
Construction Management	6,712,045	13,419	6,698,626	590,000
	44,305	0	44,305	
Code Review	298,096	27,880	270,216	0
	493,195	0	250,000	
Site Information and Tests	376,801	113,931	262,870	243,195
	350,000	0	400,000	
Other	1,322,594	4,499	1,318,085	250,000
<b>Professional Services Total</b>	<b>4,472,874</b>	<b>448,514</b>	<b>4,989,238</b>	<b>4,765,125</b>
<b>Construction</b>				
Building - New	(104,940 GSF)	17,436,650	0	0
	(139,590 GSF)	35,735,081	0	35,735,081
	<b>\$166.16</b>			
	<b>Cost Per GSF</b>	<b>\$256.00</b>		
Building - Renovation	(20,410 GSF)	1,824,800	0	0
	(28,410 GSF)	9,667,343	0	9,667,343
	<b>\$89.41</b>			
	<b>Cost Per GSF</b>	<b>\$340.28</b>		
	2,263,740		0	
Sitework	4,119,563	0	4,119,563	2,263,740
	77,050		0	
Landscaping	103,604	0	103,604	77,050
	284,370		0	
Utilities	410,829	0	410,829	284,370
High Performance Certification	2,501,821	0	2,501,821	N/A
<b>Construction Cost Total</b>	<b>21,866,640</b>	<b>0</b>	<b>52,538,241</b>	<b>21,866,640</b>
<b>Equipment &amp; Furnishings</b>				
Equipment	752,470	0	0	0
	2,248,140	15,073	2,233,067	752,470
	520,930		0	
Furnishings	634,482	0	634,482	520,930
	557,000		0	
Communications/IS/Radio	1,260,023	0	1,260,023	557,000
Non-Contact Video Visiting	865,202	0	865,202	N/A
<b>Equipment &amp; Furnishings Total</b>	<b>4,830,400</b>	<b>0</b>	<b>4,992,774</b>	<b>4,830,400</b>

	Total Request	Prior Approp.	FY 2000-04 FY 2009-10 Request	FY 2001-02 Request
<b>Miscellaneous</b>				
Art in Public Places – 0.1% of Construction	21,887		0	
	52,538	0	52,538	21,887
Relocation Costs	0		0	
	65,000	0	65,000	0
Project Contingency –				
5.7%	1,597,064	4,849	99,462	1,492,753
5.5 %	4,161,155	0	4,161,155	
<b>Miscellaneous Costs Total</b>	<b>1,618,954</b>	<b>4,849</b>	<b>99,462</b>	
	<b>4,278,693</b>	<b>0</b>	<b>4,278,693</b>	<b>1,514,640</b>
<b>TOTAL PROJECT COST</b>	<b>29,508,835</b>	<b>423,360</b>	<b>2,088,700</b>	
	<b>76,107,000</b>	<b>2,158,889</b>	<b>73,948,111</b>	<b>26,996,775</b>



Building Section



Plan

Figure 2.3: PODULAR CELLBLOCK PLAN AND SECTION

Capital Development Committee Staff Questions

MISSION AND PROGRAMMATIC INTENT

**Background**

1. Page VII of the program plan refers to the DCJ fall 2006 population projections. Why was fall 2006 used, and not fall 2008?

*Response: The table "CDC Adult Male Offenders with Mental Illnesses" is based on the summer 2008 DCJ population projections. The footnote at the bottom of the table should have referenced the summer 2008 DCJ Population Projections rather than Fall 2006.*

2. Page VII of the program plan says construction will commence in July 2010.

a. Does this mean actual construction, or the project itself?

*Response: Actual construction for the Phase II SCCF Expansion is anticipated to commence in July 2010 upon funds being made available. The Phase II planning by the Architect/Engineers is anticipated to commence July 2009 upon funds being made available.*

b. If the latter, why the delay?

*Response: As stated above, the Architect/Engineer design would commence July 2009 and would incorporate the required design modifications into the construction documents prior to issuing for construction. Construction would commence approximately July 2010.*

**Mission**

3. Page 1.1 of the program plan indicates that the new housing units will be designed to medium security criteria.

a. How will the department accommodate future high security special needs if there are not enough cells available in the renovated housing tower?

*Response: The Department will continue its current practices of regulating placement of offenders by mental health needs and custody level through multi-disciplinary staffing.*

b. What unintended consequences might result from designing the new housing units to a medium security criteria within a level V facility?

*Response: At some point in the future, the Department could expect a shortage in high security mental health need beds that would require the hardening of additional cells to accommodate. This is not anticipated with current special mental health need projections.*

*Though stated in the FPP that the new housing units could be designed to "less restrictive standards (i.e., medium security criteria)", the current design will allow for high-security placement. One of the only items that would need upgrading to a higher design standard would be the proposed swinging cell doors with high-security sliding doors.*

<b>Capital Development Committee Staff Questions</b>
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4. Please provide further clarification about the OSPB Bed Impact Scenario #2 referenced in the offender population table on page 1.4 of the program plan.

a. What is the OSPB Bed Impact Scenario #2 and how will it reduce recidivism?

*Response: OSPB Bed Impact Scenario #3 is referenced in Table on page 1.4. The following is from the September 2008, Legislative Briefing, Colorado Governor's Office of State Planning and Budgeting, concerning Certificates of Participation (COPs) to construct 2,311 new beds via expansion projects at San Carlos and Trinidad Correctional Facilities:*

**Scenario #3: Diversion Savings Plus Full DOC TC [Therapeutic Community] and Education Savings:**

- This scenario includes the diversion savings plus all of the gross savings from DOC's TC and education initiatives. The following chart shows the bed savings that are anticipated from these three initiatives, combined.

	FY 2009-10	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	Total
Gross Savings to DOC (Diversion, ED, and TC)	(\$5,722,654)	(\$16,235,465)	(\$23,866,305)	(\$25,874,828)	(\$26,421,005)	(\$98,120,257)
Bed Impact to DOC	(274)	(777)	(1,142)	(1,238)	(1,264)	(4,695)

- With this scenario and no new beds, DOC will have a bed surplus of 3,589 by FY 2014-15, and will have fewer than 15.0 percent of its inmates in private prisons starting in FY 2013-14.
- Additional, COC will have a surplus of 168 female beds by FY 2014-15 using this estimate of savings.
- Together, the proposed new beds and the savings from the FY 2009-10 Recidivism Reduction Package shown above would result in a surplus of 8,441 male beds by FY 2014-15.

*The reductions in recidivism are based on the Governor's Office FY 2008-09 Crime Prevention and Recidivism Reduction Package and contains projected cost savings over five fiscal years based on the expansion of diversion capacity, and enhanced education and therapeutic community programs in DOC facilities. These cost savings correspond to a bed-need reduction.*

*These cost savings and bed reductions will not be known for a number of years as recidivism is tracked over a three year period. However, the increase in beds that the Department is in need of is for the High-Custody and "Special Needs" offender (SCCF Phase II Expansion project). Due to the number of offenders in need of these "special beds", it appears the Recidivism Reduction Package will have little impact on this growing population.*

b. Does this plan require additional funding?

*Response: Per the scenarios provided by the OSPB, there will be no need for bed expansion due to reduced recidivism thus creating a bed savings.*

**Capital Development Committee Staff Questions**

- c. Is funding still available after cutbacks in the FY 2008-09 and FY 2009-10 budget?

*Response: Answer: Yes, funding for the Governor's Crime Prevention and Recidivism Reduction Package is still available after cutbacks in the FY 2008-09 budget and requested FY 2009-10 budget, although the DOC has reduced its request from the original figures submitted in November 2008.*

*FY 2009-10 Crime Prevention and Recidivism Reduction Package Funding Requests*

- *DOC requested funding Parole Wrap Around Services Program in the amount of \$2,133,000. Parole Wrap Around Services Program will provide parolees such services as mental health services, substance abuse treatment, and housing and vocational assistance.*
- *DOC requested 1.0 FTE to be specifically focused on gathering data and outcome information on the Pre-Release Planning and Curriculum Program. This FTE is being fully offset with a reduction in the Department's External Capacity budget subprogram, with \$0 GF impact.*
- *Department requested \$2,090,308 and 33.9 FTE for Therapeutic Communities (TC's). The budget request is for 5 TC's which will serve 418 offenders and provide after care treatment services for 36 offenders.*
- *The Division of Criminal Justice (DCJ) estimates a savings of (\$3,057,917) by reducing the need for DOC prison beds and maximizing Community Correction Diversion beds.*

5. Why isn't the relocation and expansion of the existing food service facilities a stand-alone project?

*Response: The expansion of the food service facilities could be a stand-alone project. However, the relocation and expansion of the existing DOC food service facilities will only need to occur to support the increase in the DOC population at the Colorado Mental Health Institute – Pueblo, brought on by this SCCF Expansion project. Therefore, planning and expansion would naturally occur under this expansion project.*

6. Please provide the number of DOC inmates, by site, that will be served by the expanded kitchen facilities

*Response: The following populations would be served by an expansion in DOC kitchen facilities located at the Colorado Mental Health Institute – Pueblo campus:*

<i>SCCF (including this proposed expansion)</i>	<i>500 offenders</i>
<i>La Vista Correctional Facility (LVCF)</i>	<i>519 offenders</i>
<i>Youthful Offender System (YOS)</i>	<i>256 offenders</i>
<i>TOTAL</i>	<i>1,275 offenders</i>

- a. Will any of the DHS population be served by the expanded kitchen facilities?

*Response: No, the DHS population would continue to be served by their Central Kitchen facilities.*



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- b. What impact will the kitchen expansion have on the DHS kitchen operations on the Colorado Mental Health Institute at Pueblo campus?

*Response: After the expansion of the DOC kitchen facilities, DHS will be responsible for preparing meals to their current and future population located at the CMHIP campus. This will result in the elimination or delay in expansion of the DHS kitchen facilities to serve their own populations. This will also result in the elimination of special menus or diets that were needed for the DOC population.*

**Program Plan**

7. Page 1.9 of the program plan indicates that there are 255 beds in the existing facility and that an additional 250 beds will be built as part of the proposed expansion. How many total beds will there be in the expanded facility – 500 or 505?

*Response: The expansion will provide for an additional 250 beds. Renovations to existing cells in the existing housing Tower will result in 250 cells. This will result in 500 beds at project completion.*

8. The department indicates that the 250-bed expansion will not accommodate the growing need for specialized beds for offenders with mental illness. (Page 1.9 of the program plan indicates that the future population total is 752.) Please explain why the department did not to revise this program plan to a 500-bed expansion in order to accommodate the projected future population.

*Response: The need for these additional 250 specialized expansion beds is critical to the mission of the DOC. These beds were originally to have come on line in April – July 2002, at which time the need for these beds was not as urgent. The construction documents for the 250-bed expansion have been ready since 2000, excluding required modifications identified since the originally FPP. The SCCF Phase II Expansion is intended to expand the SCCF to its build-out capacity of 500 beds as anticipated from the inception of the multi-phased project. Proceeding with this project appears to be the most expedient means of achieving these specialized beds. It is not certain that the current SCCF site will support an additional 250 inmates above the 250 proposed by this project. In that light, the Department has determined that future increases in specialized beds will occur at a site and date to be determined.*

9. What fixtures, other than the existing swing doors, can be reused in the proposed facility after they are replaced in the course of hardening cells in the existing tower?

*Response: The Architect and CM/GC will evaluate the existing swing cell doors being replaced in the existing housing Tower for possible re-use in the new housing clusters. At this time, the existing swing cell doors are the only items being considered for re-use. The Architect and CM/GC will make recommendations as to any other systems or components that might be suitable for re-use with final approval by the DOC.*

10. What is the anticipated cost savings of reusing fixtures?

*Response: If the evaluation of the existing 231 swing cell doors indicate that they are all suitable for re-use, savings in the range of \$650,000 to \$1,085,700 could be realized.*

**Capital Development Committee Staff Questions**

11. What, if any, controlled maintenance has been addressed through appropriations bills between 2001 and 2008 in the existing facility that was included in the original program plan?

*Response: There has been no controlled maintenance that has been addressed through appropriations bills between 2001 and 2008 that were included in the original program plan.*

12. Where are female offenders with serious mental illness housed?

*Response: Female offenders with serious mental illness are currently housed in the Denver Women's Correctional Facility.*

13. According to pages 1.9 and 1.10 of the program plan, both the high security special needs units and the intensive treatment units will house the administrative segregation population. Please clarify.

*Response: Both the High Security Special Needs Unit (SNU) and the Intensive Treatment Unit (INT) will be housed in the existing housing Tower. As mentioned in the FPP, the existing cells within the existing housing Tower, will be allocated to inmates with a higher security classification and with more intense treatment programs. This approach to the housing of higher security inmates in the existing housing Tower will result in minimizing the level of inmate movement in the existing housing units where it is difficult to monitor and control movement.*

*SNU offenders will be placed in five units located in the existing housing Tower. INT offenders will be located in a single unit within the existing housing Tower. The SNU population consists of offenders who are classified as administrative segregation and require a range of psychiatric and mental health services. The INT population consists of general population offenders who require a higher level of restrictions due to their mental illnesses. This population includes inmates who are psychiatrically unstable and present a danger to themselves or others, inmates who are seriously mentally ill but resistant to treatment, severe character disorders who require a high level of structure and control, and inmates in administrative segregation*

<b>Capital Development Committee Staff Questions</b>
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**SCOPE OF WORK**

14. Why has the project's total GSF decreased from 245,328 to 233,520?  
*Response: The FY 2009-10 DoRM report for the SCCF list the following existing gross square footages (gsf):*

<i>Administration Building</i>	<i>27,310 gsf</i>
<i>Housing/Food Service/Gym/Programs</i>	<i>34,396 gsf</i>
<i>Housing</i>	<i><u>81,255 gsf</u></i>
<b>TOTAL</b>	<b><i>142,961 GSF</i></b>

*The SCCF Phase II Expansion project looks to increase these totals by the following:  
 New construction – including original scope and additional scope modifications*

<i>at SCCF</i>	<i><u>104,940 gsf</u></i>
<b>Total existing gsf and new construction gsf at SCCF</b>	<b><i>247,901 GSF</i></b>

*Additional Scope Modifications not at SCCF:*

<i>La Vista Kitchen Expansion</i>	<i>11,700 gsf</i>
<i>East Canon City Warehouse Expansion</i>	<i>18,000 gsf</i>
<i>YOS Kitchen Improvements</i>	<i>1,800 gsf</i>
<i>Ancillary space to the above</i>	<i><u>3,150 gsf</u></i>

<b>Total additional scope modifications not at SCCF</b>	<b><i>34,650 gsf</i></b>
<b>TOTAL NEW CONSTRUCTION FOR PROJECT</b>	<b><i>139,590 GSF</i></b>

*Table 2.1, "Summary of Areas Required" in the Facility Program Plan will be updated to reflect current and proposed square footages prior to project funding.*

15. Please explain why inmate yards are no longer included in Table 2.1, Summary of Areas Required.

*Response: Per question 14 above, the current and proposed square footages for the project will be checked and Table 2.1 updated prior to project funding. Inmate yards will be included in the revised totals.*

- a. How will inmate yard needs be accommodated by the project?

*Response: The new housing units will consist of four new clusters of paired housing/treatment units to accommodate the expansion population of 250 beds. Each cluster will consist of two 32-bed cellblocks with common office and function space supporting both units. A common yard, directly accessible to either unit is provided for inmate yard needs.*

*Within the existing housing Tower, expansion of the recreation areas is required. One option is the description stated in the FPP with the ground floor yard in the center of the housing Tower being continued in use, serving units on the first and second floors via the first floor lobby. The existing yards on the upper levels, however, do not meet ACA standards, either minimum size or area per user. To meet recreational requirements for inmates on these upper two floors, a new platform will be constructed at an intermediate level between the 3<sup>rd</sup> and 4<sup>th</sup> floors. Access will be obtained via half level stairs from the so-called "rec yards" in each of the four units. Thus, the platform*

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*will be accessible directly from the unit and can be operated under the supervision of the unit staff. This solution for the upper floors is problematic in construction and the Architect/Engineer for the project will explore other options to meet the inmate yard needs at this location.*

**Inmate Housing**

16. Page 2.22 of the program plan notes that the cell metered sink valves are not in compliance with the Colorado Department of Public Health and Environment water run-time rules.

a. How long has the department been out of compliance?

*Response: The Department has been out of compliance since the construction of the facility in 1995.*

b. What will be the consequences if this project is not funded?

*Response: The Health Department could find us in violation of coding requirements and impose anything from fines up to closure until the valves are replaced.*

*This has not been done in the past years due to the cost of the project being approximately \$175,000. Re-building kits are not available and this cost includes the supplies plus the re-metering costs.*

**Program and Support Facilities**

17. How and when will DOC determine whether Building 54 can be renovated for inmate labor operations?

*Response: Currently Building 54 is operated by the Department of Human Services. Any additional use of Building 54 by the DOC will require agreement with the DHS. The DHS was to request funding for a Master Plan of the Colorado Mental Health Institute at Pueblo in which use of Building 54 would be determined. With funding for the Master Plan in question for this Fiscal Year, the DOC will initiate talks with DHS within the coming months with the goal of determining the DOC use of this building.*

18. What does Building 54 house now?

*Response: Most of Building 54 is occupied with the DHS Department of Facilities Management Maintenance Warehouse. A portion of the second floor houses the DOC Parole Board, Pueblo area Inspector General, medical records and scheduling offices. DHS also has a few offices for DHS Personnel.*

19. Are there any advantages to renovating Building 54 rather than building a new facility?

*Response: Advantages to a new facility would include: a) earlier use for DOC functions, b) possible reduction in renovation cost compared to new construction, c) expanded use of a currently under used facility, and d) the sustainability of existing structures vs. the construction of new.*

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**Materials and Systems**

20. Please describe any cost savings that may be realized through a life cycle cost analysis.  
*Response: Services for life cycle cost analysis (LCCA) are performed by the Architect/Engineer firms, in conjunction with the CM/GC, to assess alternative building systems based on the cumulative costs (first-cost design/construction, energy, maintenance, and capital replacement) over a "useful lifespan of capital assets" of 50 years for buildings and building systems. First-cost design/construction includes initial design, contract documents, construction cost, commissioning, and warranty services. LCCA are performed based on a recognized national standard utilizing software analysis (such as Building Life Cycle Cost analysis per DOE Energy Efficiency and Renewable Energy), acceptable to the DOC.*

*An example could include options for the initial Heating/Ventilation/Air-Conditioning (HVAC) system to be used in a building. Various options will result in different performance and cost over the life of the system. These performance and cost factors are evaluated to determine the "best" value for the project.*

21. Why is a new perimeter fence included in the project?  
*Response: The current perimeter fence at SCCF consists of one six foot chainlink (11 gauge) with an inadequately installed single, clipped, row of razor ribbon wire. This project will look to upgrade the fencing to a double fence with detection, rat barrier, and security lighting per DOC fencing standards for a Security Level V facility.*

**COST AND BUDGET ANALYSIS**

22. How did the department arrive at a cumulative inflation factor of 29.7 percent? Page 3.2 of the program plan lists the inflation rates for each year since the project was originally requested, but the list does not sum to 29.7 percent.

*Response: The formula used to calculate the cumulative percentage is as follows:  $(1+2.8\%)*(1+3.3\%)*(1+3.4\%)*(1+5.9\%)*(1+8.1\%)*(1+1.3\%)*(1+1.8\%)-1 = 29.7\%$  (cumulative percentage to estimate year of FY 2002-03). The following annual percentage change is used in the formula: FY09-10, 2.8%; FY08-09, 3.3%; FY07-08, 3.4%; FY06-07, 5.9%; FY05-06, 8.1%; FY04-05, 1.3%; and FY03-04, 1.8%.*

23. Did the department use both the 29.7 cumulative inflation factor and the OSPB-approved inflation factor of 4.1 percent to calculate the new total project costs?

*Response: The 29.7% cumulative inflation factor was used to bring the original 2001 (FY 2002-03) project estimate to date to FY 2008-09. For FY 2009-10 the DOC Facilities Management Services Department requested an exception from the OSPB inflation factor for the CC-C Project Request, San Carlos Correctional Facility Expansion Phase II project. The exception looked to use the OSPB inflation factor of 4.1% in combination with a Material Cost Index factor of 5.5%. The Material Cost Index, taken from the May 2008 Producer Price Indexes (PPI) for Materials for Construction, as developed by the Bureau of Labor Statistics, is an indicator of overall price movement at the producer level. The PPIs capture price movement prior to the retail level. Therefore, they may foreshadow subsequent price changes for business*

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and consumers.

*The DOC uses the Material Cost Index to forecast the future cost escalation in materials for construction in their project cost estimates. The Material Cost Index factor, with the OSPB approved inflation factor, is used with the estimated mid-point of construction, for a given project, to determine the overall factor to be used in project cost estimates. For the San Carlos Expansion Phase II project, based on a mid-point of construction of April 2011, the OSPB inflation factor of 4.1% is used with the 5.5% PPI Material Cost Index to arrive at the 11.89% factor used in the project cost estimate.*

*At the time of the Project Request, with the escalation of prices in the construction industry and future cost increases based on the data given above, the DOC felt it was prudent to take into account the Material Cost Index when calculating estimates that were not resulting in construction for at least two years in the future.*

24. Please provide examples of recently adopted codes and standards that are driving additional project construction costs.

*Response: The latest adopted "standard" that is driving additional project construction costs are the requirements under the "High Performance Building Program" (SB 07-051) as implemented in OSA policy OSA-HPCP dated 9/1/2007. This includes additional cost to receive certification through the US Green Building Counsel's Leadership in Energy and Environmental Design (LEED™) program. In addition to the 5% (of total construction cost) High Performance Certification Program premium there are also fees for LEED™ registration and review. These amounts are included on the CC-C Project Costs and Approval Cover Sheet.*

*All applicable building codes and standards as required through the State Buildings Programs and the Standards for Adult Correctional Institutions prepared by the American Correctional Association will be observed. Cost for meeting these code and standard requirements are included in the project cost estimate.*

25. Why does the decision to use a construction manager/general contractor method of construction delivery drive additional costs?

*Response: The CM/GC construction delivery method will result in additional cost due to their earlier involvement and increased role in the project. The CM/GC project delivery approach involves sequenced project phases similar to Design-Bid-Build, with two particular differences: a) the CM/GC is hired early in the design phase to assist with project management and pre-construction services, and b) a construction contract is executed prior to completion of construction documents to allow an earlier construction start and phased construction/occupancy.*

*Pre-construction services can include cost-estimating, scheduling, and project phasing including beneficial occupancy. Pre-construction services may also include selected subcontractors or material suppliers for negotiation of specially construction and long*

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*lead material purchases. The CM/GC will also submit prior to the end of the Design Phase, the Guaranteed Maximum Price proposal that becomes the basis for a cost plus fee contract.*

*The DOC Facilities Management Services Department estimates the CM/GC fee to be between 2% to 3% of the total cost of construction based on past project cost estimates.*

26. According to our records, the total prior appropriation for the project is \$2,234,741. The CC-C form included with the program plan lists a total prior appropriation of \$2,158,889. Please explain the difference of \$75,852.

*Response: The DOC's current and most accurate data shows an amount of \$2,158,889 which reflects a reconciliation of all expenditures of the project including a reversion of \$92,467.*

*It appears that the \$2,234,741 does not account for the total reverted amount. Total amount reverted was \$92,467 less \$16,615 Art in Public Places reversion = \$75,852.*