

STATE OF ARIZONA

Joint Committee on Capital Review

STATE
SENATE

RANDALL GNANT
CHAIRMAN 1999
GUS ARZBERGER
RUSSELL W. "RUSTY" BOWERS
JACK A. BROWN
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HOUSE OF
REPRESENTATIVES

BOB BURNS
CHAIRMAN 2000
DEAN COOLEY
LORI S. DANIELS
KAREN S. JOHNSON
BOB MCLENDON
ANDY NICHOLS
CHRISTINE WEASON

JOINT COMMITTEE ON CAPITAL REVIEW

Thursday, September 14, 2000

10:00 a.m.

House Hearing Room 4

AGENDA

- Call to Order
- [Approval of Minutes of August 10, 2000.](#)
- DIRECTOR'S REPORT (if necessary).

TENTATIVE AGENDA

- Call to Order
- Approval of Minutes of August 10, 2000.
- DIRECTOR'S REPORT (if necessary).
- 1. [DEPARTMENT OF HEALTH SERVICES/ADOA - Review of the Scope, Purpose and Estimated Cost of the Birch Hall Renovation and Request for Proposals for the New Civil and Adolescent Facilities at the Arizona State Hospital.](#)
- 2. [ARIZONA STATE LOTTERY COMMISSION - Review of FY 2000 and FY 2001 Building Renewal Allocation Plans.](#)
- 3. [ARIZONA DEPARTMENT OF TRANSPORTATION/ADOA - Report on 17th Avenue Pedestrian Safety Landscape Project on the Capitol Mall.](#)
- 4. [UNIVERSITY OF ARIZONA - Report on Lease-Purchase Projects.](#)

The Chairman reserves the right to set the order of the agenda.

9/7/00

People with disabilities may request accommodations such as interpreters, alternative formats, or assistance with physical accessibility. Requests for accommodations must be made with 72 hours prior notice. If you require accommodations, please contact the JLBC Office at (602) 542-5491.

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MINUTES OF THE MEETING JOINT COMMITTEE ON CAPITAL REVIEW

Thursday, August 10, 2000

The Chairman called the meeting to order at 10:05 a.m. Thursday, August 10, 2000, in House Hearing Room 4 and attendance was noted.

Members:	Representative Burns, Chairman Representative Johnson Representative McLendon Representative Nichols Representative Weason	Senator Gnant, Vice-Chairman Senator Arzberger Senator Bowers Senator Brown Senator Smith
Absent:	Representative Daniels (Excused) Representative Cooley (Excused)	Senator Wettaw Senator Solomon
Staff:	Richard Stavneak Lorenzo Martinez Bob Hull Tony Vidale Beth Kohler	Jan Belisle, Secretary Gina Guarascio Brad Regens Kim Hohman Jennifer Vermeer
Others:	Tim Brand, ADOA Greg Fahey, U of A Renee Bahl, Parks Jay Ream, Parks Jeff Young, OSPB	David Wright, ADOT Blake Anderson, ASU Miriam Seymore, Auditor General Charles Haverstick, ADOT Kristine Ward, OSPB

APPROVAL OF MINUTES

Representative Burns asked for corrections or additions to the minutes of June 22, 2000. Hearing none, the minutes were approved as submitted.

DIRECTOR'S REPORT — Richard Stavneak, Director, JLBC Staff stated the Department of Corrections and Arizona Department of Administration did not request that the new Tucson Prison Complex be on the agenda as they are further evaluating prison population growth. A chart with inmate population statistics was distributed. Inmate population growth continues to be significantly below forecast.

ARIZONA DEPARTMENT OF TRANSPORTATION — Review of FY 2001 Building Renewal Allocation Plan.

Bob Hull, JLBC Staff presented the Arizona Department of Transportation (ADOT) FY 2001 building renewal allocation plan of \$2,427,900. ADOT plans to allocate the Building Renewal monies appropriated from the State Highway Fund in nine categories for 174 projects. ADOT does not plan to expend an additional \$56,100 appropriated from the State Aviation Fund.

Chairman Burns asked for questions or comments. There were none.

Senator Gnant moved that the Committee give a favorable review to the ADOT FY 2001 building renewal allocation plan of \$2,427,000. The motion carried.

ARIZONA DEPARTMENT OF TRANSPORTATION/DEPARTMENT OF PUBLIC SAFETY (DPS) - Review of Scope, Purpose and Estimated Cost of Regional Transportation Center at Pioneer Park in Prescott.

Lorenzo Martinez, JLBC Staff presented the ADOT/DPS scope, purpose and estimated cost of the Regional Transportation Center at Pioneer Park in Prescott. The Committee gave a favorable review for the expenditure of design monies for the project at the June meeting. This project will relocate some ADOT and DPS facilities in Prescott. The bids for the project will not be received until August 15th; however, a favorable review is recommended so the project can be awarded and construction can begin before cold weather arrives in the area. It is recommended that a report be prepared with the bid costs after the award has been made on the project.

Senator Gnant mentioned that this Committee has on occasion said that if expenditure of contingency is in excess of a certain amount they report on the use of the contingencies.

Senator Gnant moved the Committee give a favorable review to the scope, purpose and estimated cost of the Regional Transportation Center at Pioneer Park in Prescott with the stipulation that both ADOT and the DPS report back to the Committee in writing on the project costs after the project contract has been awarded. The Committee also moved that any transfers exceeding \$50,000 from the reported contingency amounts be reported to the Joint Legislative Budget Committee Staff. The motion carried.

ARIZONA DEPARTMENT OF ADMINISTRATION — Report on Active Office Lease Costs

Lorenzo Martinez presented the FY 2000 report on the leases that have been approved by ADOA that exceeded the estimated costs for private space. The report states that 31 FY 2000 leases exceeded the \$16.50 square foot cost estimate for private space.

In answer to Senator Gnant, Mr. Martinez stated the temporary Clean Elections Commission lease for \$35.20 per square foot is no longer active. The Commission now has approximately 3,400 square feet at \$17.58 per square foot.

In reply to Representative Nichols, Mr. Martinez stated that the Lease Cost Review Board is to report an estimate for private lease space every two years. The Lease Cost Review Board has estimated the average per square foot cost for leasing privately owned space in FY 2002 and FY 2003 to be \$17.70 and \$18.25, respectively.

Senator Smith mentioned that with the increasing lease costs, the state should consider building some buildings and save money.

Representative Weason said that she has visited the Clean Elections Commission office on 3rd Street, which was very nice. She also visited the Clean Elections Institute offices on 32nd Street and mentioned that there was office space available at lower cost, and asked about the possibility of using this space. Mr. Martinez stated Staff would research the possibilities.

No Committee action required.

DEPARTMENT OF HEALTH SERVICES/ARIZONA DEPARTMENT OF ADMINISTRATION - Report on Arizona State Hospital Construction Project.

Gina Guarascio, JLBC Staff briefed the Committee on the quarterly report on the Arizona State Hospital Construction Project. The ASH project is currently on schedule with expected occupancy of the new civil hospital and adolescent facility in 2003.

Representative Johnson asked why the asbestos abatement is required. Ms. Guarascio stated that federal rules require abatement prior to demolition.

In answer to Representative Nichols, Ms. Guarascio replied that \$80,000,000 was appropriated for the entire project.

No Committee action required.

ARIZONA STATE PARKS — Report on Status of Development Projects at State Parks.

Lorenzo Martinez gave a brief report on the status of development projects at State Parks. Representative Cooley requested that Parks provide a report on development projects at all state parks. Parks is still in the process of developing a detailed master plan for each individual state park. They have submitted their capital improvement request plan as a preliminary report.

In answer to Representative Weason, Mr. Martinez stated that the State Lake Improvement Fund (SLIF) receives revenues from a share of gasoline taxes (boating purposes) and watercraft licensing fees. The annual revenue and expenditures for SLIF in FY 2001 are estimated at \$7.5 million.

In reply to Representative Weason, Mr. Martinez said the State Park Enhancement Fund receives monies from park entrance fees. The expenditures estimated for FY 2001 are \$2.7 million. A portion of the fund is also appropriated and the estimate for the appropriated amount is \$2.5 million.

In answer to Representative Nichols, Mr. Martinez mentioned the Heritage Fund received approximately \$8.8 million. Representative Nichols mentioned that normally the Heritage Fund gets \$20 million out of the Lottery. State Parks receives one-half and the other half goes to the Game and Fish Department. He stated for the record that the state is suffering because of inadequate allocations to the Heritage Fund.

Mr. Martinez replied to Representative Johnson that Parks has a competitive application and grant process for SLIF allocations. Grants from SLIF are subject to review by JCCR.

Renee Bahl, State Parks stated that a portion of the motor fuel sales tax estimated to go to boating purposes goes to SLIF. Generally SLIF is over subscribed and cannot fund all projects. There is a Law Enforcement Boating Safety Fund and those monies are given to counties for personnel on the waters to help with law enforcement.

Representative McLendon said there are always more requests for projects than they have monies for. The money is there for a specific reason and should be used for that purpose. He noted that fund balances have been transferred to the General Fund in the past in order to accommodate the state budget.

Representative Nichols asked about the Heritage Fund contribution and if it was \$10 million rather than \$8.8 million. Ms. Bahl stated that the Lottery had not generated sufficient sales to reach the \$10 million. This year the Parks received for their local/regional state parks 36 applications costing over \$12 million. Many projects are not funded due to shortage of funds.

No Committee action required.

ARIZONA STATE UNIVERSITY — Report on Revised Cost for Residence Hall Bond Project.

Lorenzo Martinez presented the cost revisions to the Arizona State University residence hall bond project.

In answer to Representative Johnson, Mr. Martinez mentioned that the Residential Life Plant Fund Reserves come from revenues generated from the dorm system. The residential life program is self supporting and generates revenues from the operation of the dorm system.

In reply to Senator Smith, Mr. Martinez said the cost per bed is approximately \$34,400 per bed. The report indicates the project bids came in above the original estimated cost because of the lack of subcontractors. The main contractor will be responsible for providing these components and that increases the cost of the project.

In reply to Representative Nichols, Mr. Martinez said prison beds costs depend on security level and range from \$37,000 to the mid \$40's.

No Committee action required.

The Chairman adjourned the meeting at 10:30 a.m.

Jan Belisle, Secretary

Lorenzo Martinez, Senior Fiscal Analyst

Representative Robert "Bob" Burns, Chairman

NOTE: A full tape recording of this meeting is on file in the JLBC Staff office at 1716 W. Adams.

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CHRISTINE WEASON

DATE: September 7, 2000

TO: Representative Bob Burns, Chairman
Members, Joint Committee on Capital Review

THRU: Richard Stavneak, Director

FROM: Gina Guarascio, Senior Fiscal Analyst

SUBJECT: DEPARTMENT OF HEALTH SERVICES/ADOA - REVIEW OF THE SCOPE,
PURPOSE AND ESTIMATED COST OF THE BIRCH HALL RENOVATION
AND REQUEST FOR PROPOSALS FOR THE NEW CIVIL AND
ADOLESCENT FACILITIES AT THE ARIZONA STATE HOSPITAL

Request

The Arizona Department of Administration (ADOA) and the Department of Health Services (DHS) request that the Committee review:

- 1) The scope, purpose and estimated cost of the renovation of Birch Hall to accommodate the less restrictive alternative (LRA) program for the Sexually Violent Persons (SVP) population, and
- 2) The Request for Proposals (RFP) for the civil hospital and the adolescent facility of the Arizona State Hospital (ASH).

Recommendation

The JLBC Staff recommends a favorable review of both: 1) the scope, purpose and estimated cost of the Birch Hall renovation and 2) the ASH RFP. The Arizona State Hospital Capital Construction Commission has reviewed these items and recommends the Committee give these requests a favorable review. The JLBC Staff further recommends that any transfers among the projects in excess of \$100,000 be reported to JLBC Staff prior to expenditure.

Laws 2000, Chapter 1 requires that JCCR review the entire plan for the ASH construction project before construction is started. Since planning is well underway, the JLBC Staff recommends this review take place at the October meeting of JCCR, tentatively scheduled for October 19.

(Continued)

Analysis

Laws 2000, Chapter 1 appropriated \$80 million over 4 years for the demolition, construction and renovation of ASH. The legislation also created the Arizona State Hospital Capital Construction Commission and charged them with reviewing capital construction and renovation plans at ASH for the purpose of making recommendations to ADOA and JCCR.

ADOA and DHS have budgeted the \$80 million appropriation as follows:

Table 1	Budgeted Amount	Current Request	Total Requested To Date
SVP Program	\$8,369,100	\$1,330,500	\$5,340,600
Civil Hospital	32,599,700	0	0
Sitework/Tunnels/Telephone/Data	12,414,900	0	9,435,000
Adolescent Facility	3,907,100	0	0
Forensic Hospital	11,803,700	0	0
Contingency	7,155,400	0	587,000
TOTAL	\$76,249,900	\$1,330,500	\$15,362,600

The current request before the Committee brings the total amount requested by ADOA and DHS to \$15,362,600.

Expenditure Plan for Birch Hall Renovation

A.R.S. § 36-3710 provides that an SVP may be released to a less restrictive environment if certain conditions are met. The Alamo facility at the north end of ASH currently houses the least restrictive program. The Alamo complex is within the proposed area of the new civil hospital and will be demolished. At its June meeting, JCCR favorably reviewed beginning design to move the program to Birch Hall, which is near the rest of the SVP program space at ASH. Design plans have now been completed. The design provides 27 resident rooms and also includes administrative offices. ADOA is proposing to complete the resident rooms at a minimum, and, if bids are within the \$1.3 million budgeted amount, they will complete the entire design, including administrative offices. ADOA believes it is likely that contractors will be able to complete the entire design within the expenditure plan. At its last meeting, the ASH Capital Construction Commission gave a favorable review to the allocation of \$1,330,500 for the renovation of Birch Hall for use by the LRA program.

The amount allocated represents a renovation cost of approximately \$76 per square foot. As this is part of the planned SVP project, and consistent with the original cost estimates, the JLBC staff recommends the Committee give a favorable review to the scope, purpose, and estimated cost of the project.

Request for Proposal (RFP) for the Civil Hospital and Adolescent Facility

In June, ADOA reported on the use of a design-bid procurement method for the civil hospital. ADOA issued its RFP in two parts. Phase 1 requested submissions for design-build teams detailing qualifications. From the 9 submissions received, an evaluation team developed a list of the 3 most qualified teams. These 3 teams have been invited to participate in Phase 2. A two

(Continued)

volume RFP was provided to these 3 teams. These volumes detail performance specifications, as well as administration and technical requirements. Each of the teams include a local architect, a construction firm, and an architecture firm with expertise in health care. The 3 teams are:

1) DPR, Kaplin McLaughlin Diaz, and Devenney Group, 2) Huber Hunt and Nichols, HKS, Stein Cox and Architecture, and 3) McCarthy, Cannon and Gould Evans Associates. A stipend of 0.2% of the estimated contract price of \$30,000,000 will be paid to each of the unsuccessful teams. This equates to \$60,000. If the teams accept the stipend, their proposal becomes property of the State of Arizona, and elements of the proposal may be used in the final design. Responses to the RFP are due to ADOA on November 6, 2000. ADOA anticipates awarding the contract by mid-December, with work beginning by early January 2001.

The RFP specifies that the civil hospital will be a 200-bed facility with the capability to expand to 300 patients. The adolescent facility will be designed for 20 beds, although only 16 patients will be placed at any one time. The RFP specifies that landscaping should provide for visual separation between the Community Protection Center (SVP facility), the civil hospital and the adolescent facility. Further, a secure perimeter for the civil hospital that is not institutional or prison-like is also required. Other requirements include patient rooms, treatment units, conference space, a specialty medical clinic to include dental and radiology, social rehabilitation mall, a swimming pool, and facilities for rehabilitation therapy.

The RFP specified a payment schedule of \$30,000,000 over 24 months for the civil hospital and \$3,060,000 over 12 months for the adolescent facility. The additional amounts for these projects shown in Table 1 will be held as additional contingencies for each project. First priority for the project is completion of the adolescent facility. This will allow adolescents to be housed separately from the adults for more therapeutic conditions. The new adolescent facility will free up beds at Juniper and Wick for the adult population until the civil hospital is complete.

The amounts allocated for the new facilities equate to per bed costs of \$150,000 for the civil hospital and \$153,000 for the adolescent facility.

As the cost and purpose of this RFP appears to be consistent with the plan on which the appropriation is based, the JLBC staff recommends the Committee give a favorable review to Phase 2 of the RFP. Pursuant to A.R.S. § 41-1252, JCCR is required to review the scope, purpose and estimated cost of any capital project over \$250,000. Therefore, a future JCCR review of the project will be required after a bid for the project has been selected.

In addition, Chapter 1 requires the construction plan for the campus as a whole to be reviewed by the Committee. JLBC Staff recommends this review take place at the October meeting of JCCR.

Excerpts from the RFP are attached. The entire RFP is available for review upon request.

RS/GG:jb

Jane Dee Hull
Governor

J. Elliott Hibbs
Director

ARIZONA DEPARTMENT OF ADMINISTRATION
GENERAL SERVICES DIVISION • 15 SOUTH 15TH AVENUE, SUITE 101
PHOENIX, ARIZONA 85007
(602) 542-1920



August 28, 2000

The Honorable Robert Burns, Chairman
Joint Committee on Capital Review
1700 West Washington
Phoenix, Arizona 85007

RE: Request for Placement on Joint Committee on Capital Review Agenda – September 2000

Dear Representative Burns:

The Department of Administration requests placement in the September 2000 agenda of the Joint Committee on Capital Review to review the following two items. Each item has received a favorable review from the Arizona State Hospital Capital Construction Commission.

1. Expenditure plan for allocation of funds from Laws 2000, Chapter 1, for the Birch Hall Renovation.
2. Phase 2 of the Request For Proposals for the Civil Facility and Adolescent Facility of the Arizona State Hospital.

The information for this project is attached.

Sincerely,

Robert C. Teei, Assistant Director, ADOA
ADOA General Services

Attachment

cc: Senator Randall Gnant, Arizona Senate
Tom Betlach, Director, OSPB
Richard Stavneak, Staff Director, JLBC
Lorenzo Martinez, JLBC
J. Elliott Hibbs, Director, ADOA
Bruce Ringwald, General Manager, Construction Services
Catherine R Eden, Director, ADHS
Leslie Schwalbe, Deputy Director, ADHS
Jack Silver, Superintendent, ASH
Walter Scott, Chief Operating Officer, ASH
Gene Messer, Director, Arizona Community Protection Treatment Center
Maria Black, Administrator, DHS

ARIZONA STATE HOSPITAL

BACKGROUND

Laws 2000, Chapter 1, signed by Governor Hull January 19, 2000, appropriated the following sums for the following fiscal years 2000-2003 from the monies in the Arizona state hospital capital construction fund to the Department of Administration for the demolition, renovation and construction of the Arizona state hospital. The Department of Administration is exempt from the provisions of title 41, chapter 23, Arizona Revised Statutes, relating to procurement procedures for the purposes of this project but shall report to the Joint Committee on Capital Review and the Arizona State Hospital Capital Construction Commission as to any procurement procedures that vary from those specified in title 41, chapter 23, Arizona Revised Statutes:

1. \$20,000,000 in fiscal year 1999-2000.
2. \$20,000,000 in fiscal year 2000-2001.
3. \$20,000,000 in fiscal year 2001-2002.
4. \$20,000,000 in fiscal year 2002-2003.

The newly created Arizona State Hospital Capital Construction Commission shall review capital construction and renovation plans at the Arizona State Hospital for Forensic, Civil, and Sexually Violent Persons facilities, the design of the facilities, and future use of the facilities and make recommendations to the Department of Administration and the Joint Committee on Capital Review.

STATUS

	Start	Finish
1. Civil Hospital Abatement	Complete	
2. Civil Hospital Demolition	9/15/00	12/15/00
3. Utility Tunnel Abandonment Design	5/15/00	10/15/00
4. Civil Hospital RFP Phase 2	7/27/00	11/6/00

Request

The Department of Administration, Construction Services requests that the Joint Committee on Capital review favorably releasing funds to accomplish the following tasks:

1. Beginning the renovation of Birch Hall for the relocation of the Less Restrictive Alternative **Program**. Birch Hall is adjacent to the existing SVP structures and is away from the proposed civil hospital campus. \$1,330,546.00
2. Phase 2 of the Request For Proposals for the Civil Facility and Adolescent Facility of the Arizona State Hospital. \$0.00

The Arizona State Hospital Capital Construction Commission has given a favorable review for the above items. JLBC staff has a copy of the RFP and it is available for review by JCCR staff.

Total Funds Requested for Release \$1,330,546.00

— Az. Department of Administration
Construction Services Section —

ARIZONA DEPARTMENT of ADMINISTRATION CONSTRUCTION SERVICES	
PROJECT:	Least Restrictive Alternative Birch Hall
PROJECT NUMBER:	8300.06
PROJECT MANAGER:	John Sempert
SENIOR PROJECT MANAGER:	Bruce Ringwald
DATE PREPARED:	April 15, 2000
REVISED:REVISED:	4/15/00

DESCRIPTION	AMOUNT
<u>FUND SOURCES:</u>	<u>INDEX NO:</u>
Laws 2000 ch 278	21811
	1,330,546
TOTAL FUNDING	\$1,330,546

PROJECT COST:	ESTIMATE Rev. 8/16/00
<u>Professional Services:</u>	
1 A/E Fees (DWL)	88,512
2 DWL Reimb.	2,660
Subtotal	\$91,172
<u>Construction Services (GC)</u>	
1 Base Contract	1,017,863
2 CO No. 1	0
Subtotal	\$1,017,863
<u>Separate Contracts</u>	
1. Fence	8,940
2. Rental Equipment	Included
4. FF&E	0
7. Abatement	70,000
10. Security Lights	
11. Flooring	35,000
12. Soils Testing	
13. Materials Testing	10,000
14. Abestos Survey	2,850
Subtotal	\$126,790
<u>Inmate Construction</u>	
1	
Subtotal	
<u>Project Support</u>	
1 ICP Supervision	
2 WIPP	
3 ADOA Expenses	
4 ADOA Salaries	
5 Risk MGT	
Subtotal	0
<u>Estimated Contingency</u>	
	94,721
Subtotal	94,721
TOTAL PROJECT COST	1,330,546
<u>Funds Remaining</u>	\$0

NOTES:

Office of the Director

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JANE DEE HULL, GOVERNOR
CATHERINE R. EDEN, DIRECTOR

August 30, 2000

The Honorable Robert Burns, Chairman
Members, Joint Committee on Capital Review
1700 West Washington, House Wing
Phoenix, Arizona 85007

Mr. J. Elliott Hibbs, Director
Arizona Department of Administration
1700 West Washington, Room 601
Phoenix, Arizona 85007

Dear Representative Burns and Mr. Hibbs:

At its meeting held August 24, 2000, the Arizona State Hospital Capital Construction Commission took the following action:

Item 1

The Commission gave a favorable review of the Expenditure plan for allocation of funds from Laws 2000, Chapter 1, for the Birch Hall Renovation.

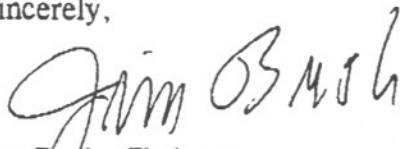
Item 2

The Commission gave a favorable review of the Phase 2 of the Request for Proposals for the Civil Facility and Adolescent Facility of the Arizona State Hospital.

Representative Burns
Mr. J. Elliott Hibbs
August 30, 2000
Page 2

If you have any questions relative to the Commission's action, please contact me at (602) 916-5329.

Sincerely,

A handwritten signature in black ink that reads "Jim Bush". The signature is written in a cursive, flowing style.

Jim Bush, Chairman
Arizona State Hospital Capital
Construction Commission

c: Catherine R. Eden, ADHS Director
Members of the ASH Capital Construction Commission

I. INTRODUCTION

The Arizona Department of Administration (ADOA), General Services Division (GSD), is considering the unique opportunity for a qualified private sector design-build team to design and construct both the Behavioral Health Facility (Civil Hospital) and an Adolescent Behavior Health Facility. This project will consist of the design and construction of two treatment facilities on the Arizona State Hospital grounds. One treatment facility will be approximately 200,000 square feet and have the Behavioral Health Facility (Civil Hospital) as its occupants. The second treatment facility will be approximately 30,000 square feet and have the Adolescent Program as its occupants. Both facilities will require appropriately sized and dedicated parking facilities; on or adjacent to the sites (must be on state property). Development of both buildings will require full site improvements that are compatible with the existing Arizona State Hospital.

The Goals of this RFP are as follows:

- **The design and construction of a Behavior Health Facility (Civil Hospital) and an Adolescent Facility.**
- **Plan the facilities for future expansion within the same general vicinity and yet keeping the two facilities separated by location and sight.**
- **Provide revitalization in the Arizona State Hospital.**

A. Background

On June 5, 2000, ADOA advertised a "Request for Proposals", Phase I, No. 01-0190, for design-build services. Proposals were received on July 5, 2000, and reviewed.

ADOA is now requesting specific documentation in three areas of the project development process:

- Project Design 50 points
- Project Approach 30 points
- Project Team 20 points

B. ADDITIONAL INFORMATION ABOUT THE PROJECT

The following project information represents an addition to, or a modification of, that previously provided in the Phase I RFP for this project.

1. "Partnering": The ADOA desires a cooperative process, with the selected Development Team, that will facilitate close coordination of work throughout all phases of the project. Details of the "partnering" process to be implemented will be cooperatively developed by the ADOA and the selected Design - Build Team.
2. Kick-off Meeting for Programming/Conceptual Design Process: ADOA requires the selected Design - Build Team organize and lead an intense one week partnering/programming/planning workshop to assist in defining roles and responsibilities, establishing lines of communication, confirming program requirements, verifying planning concepts and clarifying ADOA Design Guidelines and Performance Specifications. The Design - Build team will provide facilities for the workshop and arrange for participation of appropriate Owner/User representatives.
3. On Site Temporary Construction Facilities/Field Offices: ADOA requires the selected Design - Build team and 2 ADOA on site staff to be located within the same Field Office without segregation within the Field Office to facilitate and continue a cooperative process.
4. Agency/Code Review Process: The Design - Build Team is responsible for compliance with all applicable codes and agency requirements. The project is to conform to code requirements enforced by the City of Phoenix, and statutory design criteria and the Design - Build Team is to coordinate and cooperate with any courtesy City plan reviews required.
5. Utilities Accessibility/Coordination: The new facility shall connect to City of Phoenix water and sewage systems, ADOA telecommunications, Arizona Public Service electric power utilities, and Southwest Gas. The Design - Build Team shall coordinate connection and use of the utilities with a designated ADOA Project Manager, and will use energy conserving building systems to minimize utility usage. Life cycle costing evaluation will be reviewed with the ADOA Energy Engineer during building design and incorporated where a simple payback of 8 years or less is shown. The Design - Build Team will be responsible for all utility costs during its ownership of the building.
6. Tenant Provided Items: The facility occupants will provide their own furnishings, systems furniture, and specialty/lab equipment required for the tenant spaces. The Design - Build Team is to provide all else required for a complete facility appropriate for its intended use, including furnishings and equipment for common areas. To aid in this process ADOA has developed an equipment list and a dollar allowance for each item listed. It is the responsibility of the Design - Build Team to purchase and install this equipment. The Design - Build Team will submit invoices with no markup including taxes, and the amount will be deducted from the allowance. A final change order will be issued when purchasing is complete for equipment when the final dollar amount is known. This may be an additive or deductive change depending upon pricing.

7. Parking: Both buildings will have parking for exclusive use by occupants of the two facilities, at project completion. If proposed facilities will utilize existing parking areas, an equal number of space will be replaced as well as those parking spaces necessary for the new facilities.
8. The Design-Build Team is responsible for all off-site utility permits and fees.
9. A strong scheduling preference is to have the Adolescent Facility as first priority for occupancy. This improves two conditions. The first being to segregate the Adolescent population away from the adults for better therapy conditions. The second is this free more beds at the current Juniper and Wick buildings for the adult population until the Behavioral Health Facility (Civil Hospital) is complete.
10. Payments will be based on the payment schedule in Exhibit "B" of the Phase II RFP. Due to the funding mechanism of Laws 2000 Chapter 1, this payment schedule cannot be accelerated even if the work progresses faster and completion is obtained before the 24 month time frame allotted for the project.
11. **A Programming Narrative, Square footage minimums, and Performance Specifications** are provided in the Phase II RFP. Plan reviews and inspections by ADOA personnel throughout the project will be for the purpose of ensuring these minimum standards are met. ADOA plan reviews will be conducted in an expeditious manner so as not to delay the Design - Build Team in their project delivery.
12. At the North side of the site is the Alamo Complex and the Hawk Building. These buildings house the Less Restrictive Alternative Program. This program will be relocated in Birch Hall after it has been renovated. The renovation should be complete by April 2001. After the program is relocated the State will abate and demo these buildings.
13. At the perimeter of the site are three occupied buildings. The names and occupants of the buildings are as follows:

Eagle Building,	Social Workers & Support Staff
Family Services Building	Security
Ramada Hall	Business Finance, Patient Finance, and Psychiatric Security Review Board

These buildings will remain occupied and utilities functional until space is provided within the Behavioral Health Facility (Civil Hospital) for the Social Workers & Support Staff, Security, and Patient Finance. Programming requirements for the Behavioral Health Facility (Civil Hospital) includes space for the Chief Medical Officer, Nurse Executive Officer and Related Staff which are currently located in the Administration Building. When the space is available for occupancy for this group, they will relocate into the Behavioral Health Facility (Civil Hospital) and the Business Finance group will move from Ramada Hall and into the Administration Building. When the Business Finance group relocates, the Psychiatric Security Review Board will also be relocated on Arizona State Hospital grounds. When the three remaining buildings are vacated

the State will begin abatement and demolition of these buildings.

14. The Design - Build Team will assist the ADOA with the organization and management of community relations efforts related to the development of this project. The Design - Build Team will lead a Community Planning Advisory Committee (CPAC) that will be established with neighborhood associations and other interest parties impacted by the project, to obtain their input and inform them of project issues and schedules. In addition the Design - Build Team will make formal update presentations to the Arizona State Hospital Capital Construction Commission at each ASHCCC meeting.
15. Expedited Project Delivery: ADOA wishes to assure potential proposers that it intends to provide a high level of cooperation and assistance toward expediting project development and delivery. ADOA is sensitive to the time and financial constraints, of privately developed projects, and is confident these issues can be successfully addressed while ensuring a quality project that enhances the Arizona State Hospital environment. ADOA plan reviews are intended to ensure the Design and Construction Guidelines included in the RFP are met and will be performed expeditiously to avoid project delays. Where City of Phoenix plan checks are required, ADOA plan reviews will occur within the same time periods.
16. Exhibits "C" and "D" show an equipment list and dollar allowance for the Civil and Adolescent Facilities. The dollar allowance represents all cost and expenses associated with the purchase and installation for that equipment list item. All furnishings and equipment, supplied by the Design-Builder, shall be invoiced at cost. Allowance for mark-up is prohibited. The Design-Builder shall obtain written competitive pricing from a reasonable number of vendors. Prior to purchase commitment, by the Design-Builder, the ADOA, Project Manager shall review and approve the equipment manufacturer, specifications and competitive documentation.

C. DESIGN-BUILD TEAM QUALIFICATIONS

The Design - Build Team must be composed of experienced and highly-regarded professionals who have demonstrated their ability to produce superior facilities on a cost-effective basis.

The State seeks a Design - Build Team, under a single, responsible lead entity, which includes design, construction and finance skills.

The Design - Build Team as submitted must include, at minimum:

- Architect
- All Consultants and Sub-Consultants
- General Contractor

Other team members may be identified in the submittal or proposed for State approval at a later date. All team members shall be considered subcontractors to the Design - Build Team.

The responsibilities of the Architect will include:

- Program assimilation, review, validation, and workshops
- Schematic design (preliminary and final)

- Design development (preliminary and final)
- Preparation of cost estimates
- Construction drawings (pre-final and final)
- Review of shop drawings
- General Contractor invoice approval and construction supervision
- Quality Insurance and inspections
- UBC section 108, 1701, inspections
- Change order approval
- Issue Certificate of Occupancy

The responsibilities of the General Contractor will include:

- Preparation of cost estimates
- Value engineering and constructability reviews during the design phase
- Subcontractor pre-qualification, bidding and contract award
- Subcontractor coordination
- Guaranteed maximum pricing
- Provision of performance and payment bonds
- Obtaining permits and entitlements
- Schedule of values and prices
- Critical path scheduling (CPM or other network-type schedule)
- Shop drawing preparation and review
- Invoice approval
- Change order recommendations to the State
- Construction supervision and quality insurance inspection
- Overseeing job-site safety
- Construction quality control and assurance

II. SCOPE OF REQUEST

The purpose of this portion of Phase II RFP, is for respondents to clarify their qualifications, experience, financing and project approach.

Respondents will answer the following questions:

A. Project Design

1. Provide your proposed site plan, building floor plates with sample floor layout for modular work stations, furniture, conference rooms, walled offices, and patient rooms (for each building), special requirements, elevations and, or perspectives. These drawings must be representative of your proposal and take into account construction financing.
2. Special Requirements are listed within the program narrative and square footage minimums. All construction materials are to be noncombustible.
3. Provide a room-finish schedule.

4. Show within the site plan the future expansion of the Civil Hospital by 100 beds and the Adolescent Facility by 20 beds. And describe the requirements to integrate a future expansion into the structures the Design build team will produce.
5. Describe how your proposed buildings will be compatible with the existing surrounding land uses and buildings
6. Provide a conceptual Landscape plan.
7. Show relationships between the treatment programs within the buildings.
8. Describe your proposed buildings. Include construction method and materials to be employed. Include at a minimum the following:
 - Structural system
 - Exterior building system
 - Mechanical system
 - Electrical system
 - Interior finishes
 - Life cycle costing
9. List the gross square feet for each building that the respondent has utilized to determine cost.
10. Provide a project schedule detailing specific tasks, hard deadlines, and corresponding responsibilities/expectations. Assume a January 5, 2001, contract approval date and end with the final Warranty period.
11. Provide a detailed design submittal schedule from the requirements for design submission documents listed in the Administrative Requirements section and Exhibit of the Phase 2 RFP. This schedule will incorporate 3 weeks for review from State Agencies. These agencies include, but are not limited to, the Arizona Department of Administration Statutorial Review, Risk Management Review, and Department of Health Services Review.
12. Delineate any deviations from the specifications and program, where did you deviate and why?
13. Delineate your projected cost estimate for this project. Describe how you arrived at the project estimate. Total project cost should be presented in the following format: Complete Exhibit "A" and return with your proposal. The Development Team may attach narrative text to offer explanation on the cost items if necessary.

COST ITEMS	Civil	Adolescent
Architecture, engineering and professional services		
Offsite Permits and fees		
Site preparation		
Building shell		
Mechanical System		
Interior build-out		
Parking		
Site improvements		
Furniture, fixtures and equipment (common areas only)		
Contingency		
Financing costs		

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**ARIZONA STATE HOSPITAL
NEW CIVIL HOSPITAL**

PART 1 - DESIGN AND CONSTRUCTION NARRATIVE

1. INTRODUCTION

A. Arizona State Hospital Campus

Arizona State Hospital serves three primary populations: adolescents committed through civil or criminal processes; adults who are committed through a criminal process (i.e., "forensic patients") for either pre-trial evaluation and restoration to competence, or as a result of being adjudicated guilty except insane; and adults who have been civilly committed (i.e., "civil patients") for treatment and rehabilitation.

These three populations are housed separately in accordance with legal, treatment and security dictates. The new 200 bed facility is to be designed for civil patients with the capability to expand to 300 patients. The New Adolescent Facility will be designed for 20 beds (16 patients) expandable to 40 beds. The forensic patients will be addressed in a separate project.

The primary goal of the new civil hospital is to provide a safe, therapeutic environment that will enhance patient recovery and assist them to return to a community based level of care. This will result in an ultimate savings to the State of Arizona while providing quality care to the mentally ill of the citizens of Arizona. Additionally, it is anticipated that the new facility will provide efficient land use and reduce the current building volume. It has been determined that this can be done most economically by a combination of new buildings and the reuse of those buildings on the campus which can most efficiently and economically be repaired and/or renovated. Therefore, some of the central facilities on the Hospital campus (e.g., power plant) will continue to be utilized and, therefore, will not require new construction under this Contract.

It is intended that the new facility promote a safe and therapeutic environment and be constructed of non-combustible durable materials with efficient low maintenance building systems, and with an eye to future renovation.

B. Treatment for Behavioral Health at Arizona State Hospital

The evolution of newer and more effective psycho tropic medications has permitted changes in the treatment of mental illness by expanding the range of patients who can be treated in the outpatient setting and has reduced the time required to transition hospitalized patients to non-hospital settings.

The treatment process from mental illness has also changed. The emphasis is now on rehabilitation and recovery. Patients are educated about their mental illness, and assisted to identify and deal with the signs and symptoms of their illness. The emphasis is on increased capacity for self management, early identification of the "triggers" that may be indicative of relapse, and maximum focus on outpatient care. A small portion of individuals who suffer from serious mental illnesses do not stabilize rapidly and require the tertiary level of care provided by Arizona State Hospital. When this occurs there must be ongoing coordination between inpatient and outpatient practitioners.

Currently, Arizona State Hospital provides a range of treatment, rehabilitative educational, and supportive services. However, the current facilities, while renovated over the years, still reflect the custodial care era in which they were constructed. Overall, the physical conditions are considered to be an impediment to effective treatment. For example, there is a significant lack of privacy, nor is there adequate spaces for residents to benefit from personal quiet time, or to be enjoy discussions in small groups, or visit with family and friends. This is a serious limitation of the current facilities. Correspondingly, the facility lacks adequate treatment and staff space and amenities.

C. Design as a Means Towards a Therapeutic Environment

Care of the mentally ill consists of three inter-dependent elements: People, programs, and places. People are the unit staff, and various clinicians who provide treatment and care. The programs are the clinical and rehabilitative services employed by the staff to assist the patient to recover. The places are the facilities, the buildings, and grounds in which the patient lives, learns, works, socializes and sleeps.

With regards to place, the environment and the architecture have an important effect on the recovery of a mentally ill person. It has been demonstrated that people who suffer from serious mental illnesses often exhibit problems with perception and cognition which are effected by sights, sounds, smells, temperatures and other stimuli. It is for this reason and others, that the federal government, the State of Arizona, and other regulatory bodies have adopted regulations regarding the design of buildings used to house, teach, and treat seriously mentally ill people. These various standards require that the buildings be comforting, safe, and provide the patient with a privacy and preserve and enhance their dignity. Additionally, facility design must address security and safety requirements without appearing "hardened" or custodial.

The facility should have a residential or "home-like" feeling. It should be visually open with an emphasis on natural light and exterior view. Exterior areas and activities have an equal importance with those of the interior. Interior finishes, lighting and acoustics should avoid the suggestion of an institutional environment. However, provisions for fire safety normally required by a building with a large population and floor area must be maintained. Electronic devices for security and safety should not be presented in a manner to attract tampering by clients. Special emphasis on design to prevent injury to self and others shall be incorporation into the design.

The focus of the design shall be to improve the patients preparation for maximum independent living. Designers shall take the opportunity to simulate community environment within the new Hospital to facilitate treatment and transition to the community.

Some specific program elements that are for the new facility that are intended to accommodate this requirement:

1. Treatment team staff shall be located on the residential unit.
2. Quiet activity spaces shall be provided on each unit.
3. Homelike environment shall be simulated.
4. Auditory and visual privacy shall be promoted.
5. Observation of patients shall be promoted.
6. Patient freedom of choice will be promoted.
7. Staff work spaces shall ensure interdisciplinary team work and a maximum of client-staff interaction.

These program requirements were used to develop the Square Foot Area Program and shall be used for the detailed design of the residential units for acute adult psychiatric patients.

D. Assumptions for the Civil Hospital Design

As a result of master planning work, budget constraints, strategic planning, and previously recognized community concerns; the following assumptions were incorporated into the programming for the new Hospital:

1. The site for the new Hospital shall be approximately the northwest quadrant of the existing Arizona State Hospital campus (refer to the attached Campus Plan).
2. The new Hospital grounds and parking shall be entered from 24th Street. Both visitors and employees

shall enter from 24th Street.

3. The new Hospital shall receive heating and cooling from the existing Central Plant. However, the existing utility tunnels shall be replaced with new piping which shall be direct bury (without use of the tunnels). A project separate from the new Hospital project will ensure sufficient capacity in the Central Plant to supply the new Hospital.
4. The Dietary building (with Kitchen) shall continue to prepare and provide food service to the forensic, adolescent, and civil facilities. The new Hospital will contain dining and food serving facilities only.
5. Administration shall remain in the present location in the existing building with the exception of the Clinical Leadership which shall be located in the new Facility.
6. The maintenance and engineering services shall remain in the existing Maintenance building.
7. The new Hospital shall contain 200 beds and shall be expandable to 300 beds. The design shall include and indicate how the facility may be expanded to 300 beds without additional demolition or elimination of required exterior spaces. Expansion shall include proportionate expansion of support areas in addition to new residential/therapy units.
8. The design shall incorporate such staff amenities as male and female shower and locker accommodations adjacent to the gymnasium, and space for a childcare program (i.e., to be sublet to an external provider who will provide childcare services for state employees).
9. The facility must meet applicable standards of the Arizona Department of Health Services, the federal Health Care Financing Administration, the Joint Commission on the Accreditation of Healthcare Organizations, and local health and fire agency requirements.

These assumptions are mandatory and shall be incorporated into the design of the new Arizona State Civil Behavioral Hospital.

2. THE GROUNDS AND EXTERIOR SPACES

A. Civil Hospital Site

The site for the new Civil Hospital is in the northwest quadrant of the Arizona State Hospital campus. The site will consist of approximately 20 acres (see Plan Fig. 1) presently there are many existing buildings that occupy this area. However, the structures contain asbestos and hazardous materials and will be abated and demolished prior to the start of this project. The exception to this will be Ramada Hall, which contains the ASH Business office and Psychiatric Security Review Board plus Eagle Building, and Family Services Building which contain security. These functions cannot be relocated until after completion of the new Hospital. Therefore, the design of the new Hospital shall accommodate the continued operation of this building. Once the new building is occupied, this facility will be demolished (under a separate Contract) and remaining construction and landscaping can be then completed.

There are also underground mechanical tunnels in the site area which contain asbestos. These underground mechanical tunnels will be abandoned and removed from the project area. Existing roadways, curbs, and the existing swimming pool will also be demolished. This demolition will also include the relocation of one of the major electrical service sections on campus.

This location provides for a 24th Street vehicular access (with security gate and booth) and entrance to permit the development of a new identity for this facility separate from the Department of Corrections, the Arizona Community Protection and Treatment Center, and the Forensic facility. This entrance will also be designed to prevent cross circulation with the other existing facilities on the Arizona State Hospital campus and to minimize conflicts between the correctional traffic and the Hospital circulation. (Refer to Master plan.)

Parking shall be provided for visitors and staff (300 staff and 50 visitor spaces). Paving design for parking and driveways shall be in accordance with the Soils Report. The parking shall be striped and shall contain sufficient number of parking spaces for the handicapped. Consideration should be given to either shaded or covered parking areas. Parking shall be landscaped with at least one tree per 10 cars and an 8 foot wide landscaped island per 10 cars.

Landscaping shall be designed to be attractive ("park-like") and functional. Mature existing trees shall be preserved where possible but can be removed for the building footprint and exterior activity areas. Landscaping shall be used to separate areas visually, to conceal security devices, to provide shade at exterior activity areas, to provide for privacy from the external neighborhood, to reduce on and off campus noise, and to reduce solar heat gain on the facility. It is important that the civil Hospital be separated visually from the Community Protection Center which is south and adjacent to the site, and from the Adolescent facility. Large grass areas with picnic tables and shade trees and manmade shade structures are required for each treatment unit access (minimum of 15 s.f. of exterior shade area per patient). Additionally, the treatment units shall have well landscaped areas visually accessible by the patients, but not necessarily physically accessible. One large activity area containing a combination softball diamond/soccer area shall be provided. A barbeque area with associated picnic tables shall be located near the softball diamond. (Refer to Exterior Area Requirements.)

Although an interior swimming pool is preferred and remains an option, it is not believed to be feasible. An outdoor swimming pool for both recreational and therapeutic activities shall be provided (refer to physical therapy). The pool will be used by Adolescent, Civil and Forensic patients and shall be located to be accessible by Adolescent and Forensic patients without entering the civil hospital building. Exterior areas shall include both hard and soft surfaces accessible and dedicated to each treatment unit with areas for smoking (in the shade) and basketball courts (or half courts). The pool, as with the entire building, shall be handicapped accessible. The outdoor activity areas shall be visible from the Nurses station of the treatment units.

The Hospital grounds shall be enclosed by a perimeter security barrier. Designers are encouraged to provide a perimeter security design that does not look institutional or prison-like. However, a secure perimeter security is required. Additionally, visual perimeter security shall be required. The perimeter security shall consist of closed circuit television cameras monitored at the security control area. Cameras shall provide monitoring of the entire perimeter enclosure with no "blind spots."

Provide a perimeter security loop drive around the perimeter of the site. Deliveries to the food service area will be made through a gated or locked entrance from the Dietary building at the east of the site. There will be no other vehicular traffic within the patient area of the site. Provide accessible auto routes between Civil, Adolescent and Forensic Hospitals for emergency staff response.

3. INTERIOR AREAS

A. Residential/Treatment Unit: Number and Size

For the Civil Hospital Adult Program, 3 categories of acuity will be incorporated in the 200 bed facility: low, medium, and high acuity clients who are medically unstable and may require transfer to a community facility for treatment and care. Since these populations may vary in demand for beds and other patient groups may be added or substituted as the laws and in community treatment facilities change, the residential rooms and units shall be similar to provide maximum flexibility. Ability to overflow into adjacent units will be essential, especially for the high acuity patient population with its greater requirements for direct observation, unobstructive interaction, and quiet spaces.

Acute general adult psychiatric patient units will be designed with maximum emphasis on privacy and "alone space" in the residential environment. Individual and shared patient rooms shall be clustered in groups that center around (minimum) night time staffing requirements of 2:16 (staff to patient) and around the decentralization of the treatment staff to the individual units of 1 psychologist, 1 psychiatrist, 1 social worker, and 1 recreational therapist to 24 patients maximum.

There shall be 3 medium to high acuity treatment units consisting of two 20 bed treatment units each. These units shall have resilient flooring throughout except in the offices, the group rooms, and the consultation rooms which shall be carpeted.

There shall be 1 low to medium acuity treatment unit consisting of 2 residential units of 22 beds each. These units shall be more residential in character and shall have carpeting in the patient social spaces, the classroom, assessment testing room, small group room, large group room, consultation room, throughout the corridor, and in the patient room.

There will be 1 medical treatment unit consisting of a 16 bed medical unit and a 20 bed neurological unit. This unit shall be equipped with resilient flooring throughout. All of the medical units beds shall have hospital/medical gases (oxygen, vacuum, and medical air).

It is the intent to have a variety of environments for the patients which proceed from a more institutional treatment unit to a very homelike treatment unit. As the patient recovers, the degree of observation, "hard surfaces", and security can be reduced.

B. Residential/Treatment Units: Spaces and Organizational Concepts

50% of the patient rooms shall be single bed (private rooms). This will result in 1/3 of the beds (66 beds) shall be in private rooms. Two seclusion rooms per high acuity unit, and one for each of the other units will be required. Seclusion rooms shall be placed so that they are accessible and visible from the Nurse's Station. Medically ill and geriatric psychiatric patients will be placed in the medical unit where beds shall have medical gases and electrical outlets to support medical care.

Specific spaces to be included on the treatment units shall include:

1. Office or work stations for treatment team members. This includes psychiatrist, medical physician, psychologist, social worker, rehabilitation, and Nursing personnel.
2. Shared conference space for the treatment team, medical exam room, medication room, nourishment room for the patients with patient cooking facilities consisting of a stove top range, a microwave oven, residential refrigerator (13 cubic feet), at least 8' of counter with 8 linear feet of overhead cabinets, one compartment kitchen sink, and below counter cupboards. Unit Manager office.
3. Conference/Classroom.
4. Multipurpose consultation rooms, that will be acoustically designed to prevent sound and conversation transfer to adjacent rooms.
5. A Staff Lounge will be provided for the unit staff including a refrigerator for lunch holding, a microwave oven for heating and a small cleanup sink.
6. Visiting room shall be a private space adjacent to the entrance to the Treatment unit to permit use by visitors without requiring entry into the main Treatment or Residential unit. Patient social spaces shall consist of at least 2 spaces per residential unit for a total of 4 spaces per treatment unit. These spaces shall be a combination of quiet and more noisy activity areas. 2 of these areas will contain T.V. sets, 1 of the T.V. sets will be capable of VCR use, the other shall be for cable television. The other 2 rooms shall be for more quiet activities such as reading. All 4 rooms shall be visible from the Nurses Station.

7. The Nurses' Station will provide work stations for at least 4 staff at one time.
8. All work areas shall be designed to be ergonomic and accommodate computer work stations..
9. Each unit will be wired for computers, cable t.v, and video-conferencing.
10. Patient Laundry room with residential type washers and dryers for patient use.
11. Provide clean and soiled utility rooms in accordance with requirements.

A treatment unit shall consist of a Nurses Station with (2) 20 bed residential units which shall be arranged so that the residential units are fully visible from a single point in the Nurses Station. This means that each patient room door shall be visible from a single location in the Nurses Station without the use of electronic monitoring. The treatment unit shall include exterior activity areas also observable from the Nurses Station.

Each treatment unit shall contain a mixture of private and semi-private (2 bed) patient rooms. Approximately half of the patient beds will be private and the other half semi-private. The patient rooms shall meet the following requirements:

1. Patient room areas shall be exclusive of toilet rooms, closets, lockers, alcoves, or vestibules.
2. Seclusion rooms shall be single bed rooms of larger area designed to minimize potential escape, hiding, injury to self or others, or suicide and should be fully visible from the Nurses Station. Access to toilets, showers, and wardrobes from these rooms will be restricted. Seclusion rooms shall be centralized near the Nurses Station and shall not be disbursed among the residential units.
3. Each patient room shall have a window of at least 1/6 the size of the square foot area of the room. The window shall be operable from the inside to permit ventilation. The opening width shall be restricted to prevent escape and they shall be operable by the use of the tool which will be located in a prominent location accessible to the staff. Fixed windows are preferred, if permitted by regulation. Security glazing shall be clear, non-yellowing, non-breakable, and scratch resistant to prevent the possibility of patient injury or escape.
4. Provide wall lights above each patient bed and sufficient illumination for reading.
5. Each patient shall have access to a toilet room without having to enter the general corridor area. The toilet room shall contain a water closet and hand washing lavatory or sink and counter. There shall be at least 1 toilet room for each 2 private patient rooms and 1 toilet room per 2 semi-private patient rooms. The toilet room door shall swing outward or be double-acting.
6. Each patient room shall have a wardrobe closet for each patient that can be locked and keyed for each patient to store hanging full length garments and folded personal affects. The intent is to provide adequate storage for clothing and personal affects for a minimum 7 day period. Clothes hangers shall be of the security type to prevent use by patients as weapons. Include shelves for folded garments.
7. There shall be a built in desk/ writing surface for each patient (minimum 3' x 2').
8. The Administrative Center or "Nurse Station" shall consist of the following. A unit secretary area consisting of 2 counter type seating positions. A charting area with seating positions, separately enclosed with desk height counters and 1 drawer and 1 file drawer below at each seating position.
9. Provide a supplies storage area for administrative supplies.
10. Provide a hand washing fixture in the Nurse Station area.

11. Provide 2 toilet rooms for the staff. Each toilet shall contain a water closet and a hand washing facility (lavatory or sink with counter).
12. Staff Lounge consisting of a area for a table and chairs for approximately 6 people. 10' of counter with base cabinets, 10' of overhead cabinets, and a small cleanup sink.
13. Patient Storage: Provide securable storage area for patient belongings.
14. A Med room (drug distribution station). This will consist of a medical preparation room with a self contained medicine dispensing machine.

C. Public Areas (Required by Regulation)

The public areas shall be located near the main building entrance. The entrance shall be a grade level entrance, protected from the sun and weather and able to accommodate wheelchairs. The consultation room shall be adjacent to the waiting area and shall be a private space for interviews related to social service, credit, and admission. The waiting area shall be quiet, comfortable, carpeted, with lounge seating. It shall have natural daylight either by windows or skylights of at least 1/8 of the floor area in size.

1. Public Toilet Rooms: Provide public toilet rooms for the visitors. They shall be wheelchair accessible.
2. Visitation Area: Provide an area for small group visitation (Family) meeting with patients. The area shall consist of alcoves or cubicles for groups of 4 to 6 people. Visitation areas shall also be part of the Treatment units.
3. Checkpoint: The entrance shall contain a security checkpoint with a metal detector at the entrance and an airport type bag x-ray conveyor/machine.
4. Family Overnight Rooms: Near the entrance or near the Medical Treatment unit, but in a quiet low traffic area, locate rooms for family overnight stay. These rooms shall resemble hotel rooms with toilet and shower area, a seating area, and a bedroom sleeping area. The toilet room shall contain a counter and sink, a water closet, and a tub/shower. The sink shall have a large wall to wall counter top ceiling glass mirror and dressing room type lighting. The sleeping rooms shall be large enough for 2 double beds and the sitting area shall be designed for lounge type furniture and a small table. At least one window shall be provided for the overnight room area. The window shall be in either the sitting room or the sleeping room or both and shall be 1/10 of the combined area for the overnight room.
5. Patient Admissions/Intake/Discharge Area: A work area consisting of a desk and file storage with a counter area for patients and families to complete paper work will be provided near the entrance or adjacent to the waiting area.
6. Reception: At the entrance area, a small reception area consisting of a receptionist seating area and counter with a standup writing surface on the greeter side and a sit down counter service on the receptionist side of approximately 10' minimum length shall be located facing the main entrance and in observation of the patient waiting area.
7. Mail room: The main hospital mail room shall be located near the main entrance for mail delivery, sorting, and storage. The room shall consist of 400 purse type lockers for the receipt and filing of packages and mail. The center of the room shall contain tables for sorting. The tables are not in this Contract.

D. Specialty Medical Clinic with Radiology (Not Required by Regulation)

The Special Medical Clinic shall be designed for use by all 3 Arizona State Hospital Facilities (Forensic,

for a teller's computer, and drawer storage below with a lockable money drawer. Provide a standup work table for customers to complete paperwork, provide a vault room constructed of masonry with a full door with a keyed deadbolt lock. Provide a safety deposit box area. Provide actual safety deposit box construction for 200 boxes of minimum 4" x 6" x 18" dimension "nominal." Provide for the installation of an ATM machine.

4. Barber Shop: Provide a barbers chair (included in the Equipment Allowance) with a hair washing sink with hair interrupter. The waiting area shall have row seating for waiting. There shall be a register on a small stand-up counter approximately 3' x 2'.
5. Beauty Salon: Shall have a barber chair with a hair washing sink with hair interrupted. A customer hair drying seat and hair drying machine will be included in the Equipment Allowance. Provide a cash register on a freestanding counter with base cabinet minimum of 3 x 2.
6. Coffee Shop/Restaurant: Provide a small kitchen with stove (4 burner), convection oven, microwave over, salad grill area, wet and dry storage for the storage of dry and wet foods . Provide 2 large refrigerator freezers.
 - a. Serving Area: Serving area consists of an area behind a display case to serve sandwiches, cold cuts. There will be a dishwashing room with a commercial type dishwasher. A register with counter approximately 10', a male and female toilet accessible to the public.
 - b. A housekeeping area and garbage holding. The garbage holding area shall have a drain and shall be able to be rinsed with a hose connected to a hose bibb located in the room near the door. Water rinsing includes walls, ceiling, and floor. Therefore, this room shall be water resistant surfaces with a floor drain. Provide grease trap/interrupted.
 - c. Dining area shall provide seating for 40 people at tables.
7. Employment and Benefits Office: The employment and benefits office shall consist of a desk with a computer terminal, printer, copier, fax, and a small waiting area.
8. Newspaper Stand: A newspaper stand shall consist of newspaper and magazine racks an a register area.
9. Clothing Boutique: The clothing boutique shall contain approximately 70 linear feet of clothes racks for display and dressing booths containing seating, a secured place for personal belongings and a cloths hook with a glass mirror. The register area shall consist of a minimum of 10 linear feet of counter space with base cabinets and a cash register.

F. Rehabilitation Therapy

Rehabilitation therapy is for the diagnosis and treatment of mental functions but may also address physical functions. A rehabilitative therapy service is included in the project. The facility and equipment are in addition to the social rehabilitation Mall which is also under the supervision of the rehabilitation therapy department.

1. Office/File Room: Provide office and clerical space with provisions for filing and retrieving of patient records.
2. Housekeeping: Provide a conveniently accessible housekeeping room and service sink for housekeeping needs.
3. Fitness Center: The physical health of a person can have a direct effect on his or her mental health. Therefore, a Fitness Center similar to a commercial fitness center shall be provided. Provide ample space for the machines listed. The exercise machines will be provided by the Arizona State Hospital. The flooring surface shall be a cushion athletic flooring. The Fitness Center may be located to be accessible from the Social Rehabilitation mall.

4. **Group Therapy Room:** In the therapy area, there will be individual treatment areas with privacy screens or curtains. Each space will have not less than 60 square feet of clear floor area. There will be exercise tables included in these areas (tables shall be provided by the State). There shall be at least one hand washing facility within this area. The area will contain a minimum of 4 curtained individual treatment cubicles which can be opened into the entire room area.
5. **Clean Linen and Towel Storage:** Provide a room for clean linen and towel storage. The rooms shall contain perimeter shelving minimum of 18" deep, floor to ceiling shelving adjustable for at least 6 shelves high.
6. **Equipment Storage:** Provide a room storage of equipment and supplies. Provide shelving on 1 wall 18" deep, adjustable shelving, 6 shelves high, floor to ceiling.
7. **Recreation/Therapy Pool:** The rehabilitation therapy area shall be located with easy access to the swimming pool. The main function of the swimming pool will be recreation. However, therapy access shall be provided. The swimming pool shall have wheelchair access.
8. **Occupational Therapy:** Occupational therapy will include such activities as leather tooling, art, needle work, painting, sewing, ceramics, gardening, cooking and shall include work areas and 40 linear feet of counters suitable for wheelchair access and, hand washing facilities in the green house, ceramics, and crafts areas. Provide storage for supplies and equipment and a secure storage room for potentially harmful supplies and equipment. Provide the large electric kiln (15 cu. ft.) for ceramics shall meet all the fire code requirements and can be located outside and separate from the building. Include in the design a display area for the display of arts, crafts, and products crafted by the patients.
9. **Vocational Therapy:** Vocational therapy assists patients in the development and maintenance of productive work and interaction skills for the use of work tasks. These activities occur throughout the Arizona State Hospital Campus and are preformed in conjunction with the maintenance and engineering staff. For this reason, the construction Contract shall provide for tasks to be completed by vocational therapy patients during the construction of the new Hospital. Coordinate with Hospital tasks for the capabilities and scheduling tasks to be completed by patients. Patients presently complete a variety tasks including: landscaping, painting, furniture repair, equipment repair, and maintenance.
10. **Music Therapy:** Music therapy consists of both the listening and appreciation of music and the playing of musical instruments and singing. The musical therapy room area shall consist of listening stations or carols that will be equipped with earphones and electronic playing equipment. Electrical equipment will be furnished by the State. The office of the Musical Therapist, a group music room large enough for 30 people seated, and in instrument storage room including of adjustable shelving 18" wide at least 5 shelves high to within 18" of the ceiling, shelving units may be metal fabricated units for the storage of musical instruments.
11. **Gymnasium:** Provide a full basketball court gymnasium with a minimum of 10' perimeter beyond the out-of-bounds lines of the basketball court. 2 basketball backboards supported from the wall or ceiling without a floor support device. The gymnasium floor shall be an athletic flooring material suitable for a variety of activities including; dances, and the placement of furniture (without harm to the flooring). The flooring shall be striped for a full court basketball court. The gymnasium area shall be used for assembly and for audience seating (on portable chairs) for an adjacent stage area. The stage shall be raised approximately 4' higher than the floor of the gymnasium and shall contain adjacent storage rooms. The gymnasium will be equipped with general lighting for an even lighting level with a minimum of 50 foot candles at any location. There shall be special stage lighting adjustable at the stage area. Professional staged spotlights and colored lenses will not be required.
12. **Showers and toilets** shall be accessible from the pool, the Gymnasium and the Fitness area.

13. Support Areas: The rehabilitation area shall have support areas adjacent for housekeeping, patient toilets, and equipment holding.

G. Pharmacy (Satellite Pharmacy)

The main pharmacy shall remain at the present location and distribute pharmaceutical items to all 3 hospitals (Civil, Forensic, and Adolescent) at Arizona State Hospital. The new Civil hospital shall contain drug distribution machines in each of the treatment units and a central distribution room or suite. This room shall be located for convenient access, staff control, and security. The area shall include a pick-up and receiving area, an area for reviewing and recording, and work counters and space for computer inventory and dispensing activities. Pharmacies shall be equipped with a manufactured shelving systems specifically designed for pharmacy and shall include of pharmaceutical storage, floor to near ceiling for at least 40 linear feet. Also, provide a sink for the Pharmacy.

H. Patient/Staff Library

The patient and staff library is for the cataloging and storage and distribution of book reading materials for the patients and staff of the civil hospital. The library contains typical public library functions. There shall be separate patient and staff reading areas. The library shall be carpeted and shall contain a stacks area with full height adjustable book shelving of approximately 140 linear feet. There shall be a reference book area which will contain stacks for reference books of approximately 12 linear feet of full height book shelving. There shall be a reading table with seating for a minimum of 10 patients and a lounge area with lounge furniture of sufficient size for 10 patients. There will be 8 study carrels (minimum of 3' wide and 2' deep), with 8 computer carrels equipped for audio/visual playing with at least 15 linear feet of counter. Behind the circulation desk shall be a work room containing a copier, files, printer, and fax machine. This will be on at least 10' of counter space with base cabinets. Audio/visual storage shall be an open room with shelving on 2 walls of 18" deep full height shelving, floor to near ceiling. There shall be a staff lounge and staff toilet adjacent to the patient staff library. Staff Lounge shall have a sink, counter, overhead cabinets, below counter cabinets, microwave oven, and refrigerator. However, this will be shared or may be shared with that of an adjacent area.

I. Health Records

Locate Health Records near the Clinical Administration area. Medical records shall have a controlled entry reception area with an Anti room. A physician or person seeking medical record shall enter the Anti room/waiting room and inquire at a control desk or counter for the specific required medical record or shall request access in to the medical records areas. The access shall be permitted through an electronically controlled door. The door shall be operated from the control area. There shall be 6 dictation cubicles in the Anti room. Each dictation cubicle shall have a counter with sound absorbent side panels. The counter shall be 30" deep and 4' wide and shall be equipped for future data/computer installation. Within the secure medical records area shall be the dictation reading room, a 6 computer cubicle (separated by 5' or higher partitions on 3 sides). A large work area with a microfilm machine (furnished by the State), a mail station for delivery, sorting and outgoing mail, a pending rack containing medical pending charts of at least 12' linear feet of chart space (counter), sufficient to contain 200 charts, address-o-graph machine (furnished by the State), copy machine (furnished by the State), fax machine (furnished by the State). There shall be offices for the department head and a smaller office. There shall be an area of 12 transcription cubicles, each cubicle shall be a minimum of 16 square feet with a 4 x 30" deep counter for a computer with a side writing counter at least 3' long. There shall be a vault constructed of CMU or other secure material with a steel door with a key deadbolt lock.

1. Form Storage: The room for form storage shall contain 12" deep shelving of floor to ceiling (within 18" of the ceiling) on all perimeter walls except that of the entrance door. There will be a staff lounge and staff toilets. There will be public restrooms off of the main Anti room/waiting room. The lounge and Anti room and the entire medical records department will be carpeted with the exception of the toilet rooms.
2. Closed Chart Area: Large area for the storage of closed charts shall be provided. This area shall have chart storage filing furnished by the State.

J. Serving and Dining Areas

Food cooking and preparation will continue in the present dietary building located in the center area of the Arizona State Hospital campus. The food will be delivered by truck to the new Civil Hospital. Therefore, a loading dock for the unloading of the prepared food is required. Pedestal mounted tables and chairs with backs similar to those used by McDonalds and other fast food restaurant shall be provided in the dining area. Because dining is a social activity, a mixture of groups with seating for as many as 10 and as small as 2 shall be provided. The design of the seating shall be sturdy and easily maintained such as solid plastic, but a residential or non-institutional appearance is encouraged. The flooring in the dining area shall be resilient type. Lighting in the dining room area shall be dimmable so that a variety of dining atmosphere can be promoted. The serving shall consist of a single window. Trays are served from the window and the patients will be served a specific custom diet for each patient. It is preferred that the patients not be able to see the food preparation because they may desire food which is not permitted for their specific diet. The trays of food will be presented to patients one by one.

1. Refrigerated Storage: There shall be a walk-in type refrigerator adjacent or included in the preparation area.
2. Private Meeting Room: There shall be a private meeting room adjacent to the general dining room. This can be used for staff dining or for special meetings which include catering.
3. Vending Machine Area: There will be a vending machine area off of the main dining room for rows of vending machines. Provide water and drain rough-in for (1) vending machine.
4. Toilet Rooms: Provide ADA compliant toilet rooms (2) located adjacent to the dining area.
5. Housekeeping: Provide housekeeping room off of the dining room.
6. Receiving Area: Receiving area shall include a loading dock with adjacent dry storage and refrigerated storage.
7. Preparation Area: The preparation area shall be behind the serving window and consists of tempering cabinets with steam tubs for prepared food. A salad and vegetable preparation area with a cutting counter and vegetable storage. There will be a dessert preparation and a tray preparation area. The tray preparation area shall be immediately adjacent to the serving window. Provide work sink in each area. Provide (1) hand sink.
8. Washing Areas: When a patient finished with his meal, he shall return to dirty dishes and silverware (which shall be counted) to the dishwashing window. The dishwashing area shall consist of a commercial dishwasher and a commercial pot washing sink. Garbage will be disposed of down a commercial garbage disposal. Paper goods and other non-food products that cannot be disposed in the garbage disposal will be held in the garbage holding room which shall be a wash down area with a floor sink. This room shall be water resistant. A separate toilet room will be provided for dietary staff shall be accessible from the tray preparation area. Provide grease interrupted/trap.

K. Educational Area

The educational area is for the education and training of both staff and patients. It consists of a variety of classrooms and conference rooms and includes the desks and work areas for staff educators and related support personnel.

Classrooms and conference rooms shall contain a marker board, a minimum of 4' wide and 12' long. The design of the classrooms shall optimize the viewing of instructional materials such as marker boards, audio/visual presentation, and special presentation meetings. In order for the most distant viewer to read projected characters

and symbols, the viewer should not be more than 8 times the image height from this screen. The minimum distance to the first row of seats should be 2-1/2 times the image height from the screen. The minimum screen height shall be 1/2 of the room height. The distance from the video monitor screens should be restricted to 10 to 12 screened diameters for general viewing. The minimum screen provided by the State shall be a 27" diagonal screen.

All classrooms and portions of the classrooms, if they are divisible, should be equipped with a video display device capable of handling signals from regular television and CCTV. All classrooms shall be outfitted with shades that completely block out sunlight. The overhead lights in these rooms shall be both dimmable and directional. The instructor should be able to adjust the lights from full brightness to dim. The remaining lights should focus on student work area and not spill onto the screen. Controls shall be installed in the front of the classroom near the instructor's area for lights, shades, and audio/visual equipment.

L. Security Areas

For their own safety and for the safety of others, the activities of some of the patients in the Civil Hospital will have their freedom restricted from a greater to a lesser degree. Depending upon a patients acuity, access outside of the treatment unit, outside of the Hospital, and access to other parts of the Arizona State Hospital grounds will be restricted. The perimeter of the Civil Hospital grounds, the entrances, and selected areas will be monitored by closed circuit television. There will be a security staff and a central control area to observe the monitors and to come to the assistance of clients or staff in crisis.

1. Visitor's Center (Security Booth): At the vehicular entrance to the Civil Hospital, there will be a visitors center which will consist of a 300 square foot security office with a private toilet. The visitors center shall be between the entrance and exit lanes to the Hospital. Visitors will be greeted by security officers through a drive-up window. This window shall be of sufficient size to enable the officer to view the entire automobile and the occupants of the automobile from the officer's standing or sitting position. The window shall be operable to allow the transfer of sign-in materials and visitors badges. There will be a similar window on the exit lane side to enable the officer to retrieve visitors badges and observe the car interior upon exit. There will be adjacent parking for up to 6 vehicles so as to permit for the smooth flow of traffic while visitors complete the requisite registration material.

The visitors center will be equipped with a private toilet to enable the officers access without leaving the visitors center.

2. Security Control Area: Within the Hospital preferably near the main entrance, locate the security control area. This area shall consist of private offices for the chief of security and his Sargent, a clerical area with a file and work room, a briefing/report/training room large enough for 20 people seated. This room shall be equipped as a classroom with marker board and audio/visual equipment. The monitoring control area shall consist of 2 seated positions at counters approximately 30" deep with cabinets of drawers, 1 file drawer and 2 smaller drawers adjacent to each seating position. This area shall be equipped with the security monitors, the base radio for communication to all officers, and four 4 drawer filing cabinets (either lateral files or perpendicular files). The security area shall have a lost and found room for lost articles. This room shall contain full height shelving around the perimeter walls.

This shall be a room for equipment storage and a staff locker room equipped with 30 full height lockers in each locker room. There shall be a staff toilet room adjacent to each locker room.

A function of security is transport of clients both on and off campus. Security has 7 passenger vans and 1 wheelchair van for the transport of patients which shall be parked near the security area to facilitate the patient transportation. It is appropriate to provide an exit from the Hospital to the vans for the transfer of patients. However, this access should not be through the security area.

The closed circuit television cameras should be capable of observing the entire perimeter of the Civil Hospital campus, all of the common use areas (social areas), group rooms, and seclusion rooms.

Additionally, all pedestrian circulation spaces such as corridors that are accessible by the patients should be monitored by closed circuit television. Cameras should be concealed from view wherever possible.

M. Support Services (Engineering and Housekeeping)

In addition to the areas on the units and throughout the Hospital for housekeeping, there shall be a centrally located area for offices and break room for engineering and housekeeping. Housekeeping will not use the staff lounge within the treatment units. There shall also be a small fitness area for cardiovascular exercise machines such as treadmills, bicycles, cross training, and other cardiovascular machines.

The maintenance offices and shop areas shall remain in the existing maintenance building. However, there shall be facilities, offices, and staff lockers located within the Civil Hospital adjacent to the housekeeping area for use by the maintenance office.

N. Central Storage

Guidelines for Design and Construction of Hospital and Care Facilities requires 4 square feet per patient for central storage. This can be a warehouse area located within the hospital near the dietary loading dock for truck deliveries. It should be possible to use this dock for both general storage delivery and dietary delivery of meals from the dietary building.

O. Financial Services

Financial services shall consist of patient financial services and Hospital business and finance office. These 2 functions are related and can best be served adjacent to each other. Patient financial services shall be open to the public and shall be near the entrance and can be part of the admissions process. There should be an interview room for private consultation and interview with sufficient area for table and chairs. There shall be a Manager's office plus 2 smaller offices and an insurance work area consisting of a large work counter, overhead cabinets for storage and at least 10 linear feet of base cabinets.

Financial services shall have an open office area consisting of 6 cubicles. Cubicles will be furnished by the State. There shall be a vault consisting of masonry construction with a steel door with a keyed deadbolt lock.

The copy/work room shall be a large open area for a copy machine, fax, printer, 4 vertical files (lateral or perpendicular), a collating work counter consisting of approximately 12 linear feet of 2' deep counter surface with base cabinets and overhead cabinets. A supply storage consisting of a closet with 18" deep shelving full height (minimum of 6 shelves).

Staff lounge does not need to be located near the public area and shall have lounge seating with a kitchenette with an adjacent staff toilet and locker room with approximately 10 full height lockers. There shall be a waiting area separate but adjacent to the main waiting area for the public near the entrance.

P. Clinical Administration

Although the greater part of Administration will remain in the existing Administration building south of the new Civil Hospital site, Clinical administration is best located within the new Hospital. This area shall consist of offices for the Chief Medical Officer and the Nurse Executive Officers and their staff. This consists of a private office for the Chief Medical Officer and for the Nurse Executive Officer. Additional private offices for the staff, receptions area, and file/work areas for printer, copier, fax, and files of at least 6 lateral or perpendicular file cabinets. These areas shall not be shared, however, a staff lounge and toilet can be shared between these 2 administrative areas.

PART 2 - DESIGN AND CONSTRUCTION NARRATIVE FOR ADOLESCENT HOSPITAL

1. INTRODUCTION

A. General

The Adolescent Behavioral Health Hospital is for teenagers from 13 to 17 years old who have been committed through the Civil Law or Criminal Law process. The Adolescent patients require separation, physically, visually, and audibly from adult patients. It is, therefore, a likely conclusion that they should be in a separate building. However, a separate building is not required if the separation can be achieved.

Like the new Civil Behavioral Health Hospital, the primary goal is to provide a safe, therapeutic environment that will enhance patient recovery and assist in returning patients to a community based level of care. However, because the adolescent population is small (16 patients) and because the adolescent facility contains both civil and forensic adolescent patients, the division and mix of the patients is important. Civil patients must be separated from the forensic patients and the males should be separated from the females (in the sleeping areas). Therefore, the design of the residential unit shall contain facilities for 20 beds even though the expected population is a maximum of 16.

Although the treatment of adolescents is similar to adults, an emphasis must also be placed on education. As young people, the continuation of their education is important to their rehabilitation and their re-entrance into society.

B. Assumptions for the Adolescent Hospital Design

As a result of the master planning work, budget constraints, strategic planning, and previously recognized community concerns, the following assumptions were incorporated into the programming for the new Adolescent Hospital:

1. The site for the new Adolescent Hospital shall be within the northwest quadrant indicated for the new Civil Hospital. Although not a requirement, a location near the northeast corner of that quadrant will promote the desired isolation and separation needed for the adolescent patients.
2. Separate parking for adolescent visitors near the adolescent residential unit is required. This is parking for visitors. Staff parking does not require adjacency. The Adolescent facility does not require a separate entrance. The entrance to the Civil Hospital off of 24th Street can also be the Adolescent entrance.
3. The new Adolescent Hospital shall receive cooling from the existing Central Plant.
4. The Dietary building shall continue to prepare and provide food service to the Adolescent facility. The new Adolescent facility will contain dining and serving facilities only.
5. The new Adolescent Hospital shall contain 20 beds for 16 patients and shall be expandable to 40 beds. The design shall include and indicate how the facility may be expanded without additional demolition or elimination of the required exterior spaces. Expansion shall not require proportionate expansion of support areas but only the residential units.
6. The facility shall meet applicable standards of the Arizona Department of Health Services, the Federal Health Care Financing Administration, the Joint Commission on Accreditation of Health Care Organizations, and local Health and Fire Agency requirements.

These assumptions are mandatory and shall be incorporated into the design of the new Arizona State Adolescent Behavioral Health Hospital.

2. THE GROUNDS AND EXTERIOR SPACES FOR THE ADOLESCENT HOSPITAL

A. The Adolescent Hospital Site

The Adolescent Hospital site shall be remote from the Arizona Community Protection Treatment Center and the patients shall be separated from the Civil and Forensic Hospital patients. It is also felt that separation or screening from the 24th Street activity is desirable. The Adolescent facility may share some of the large activity areas such as the baseball diamond or soccer field with the Civil Hospital. However, an exterior activity area shall be dedicated solely to the Adolescent population. Like the Civil Hospital, this activity area shall contain space for both active and passive activities with both hard surfaces (concrete slab, pavers, etc.) and landscaped "soft surfaces." An area of picnic tables shaded from the sun, a concrete basketball half court, and a recreational swimming pool for the Adolescents (separate from the swimming pool of the Civil facility) is required. The exterior activity areas shall be visible from the Nurses Station of the residential units. The Adolescent Hospital grounds shall be enclosed by a perimeter security barrier. Designers are encouraged to provide a perimeter security design that does not look institutional or prison-like. However, Level 2 perimeter security is required. There shall also be electronic perimeter security consisting of closed circuit television cameras mounted at the perimeter security control areas. The cameras shall provide monitoring of the entire perimeter enclosure with no blind spots. These security cameras shall be monitored and connected to the main security control area located in the new Civil Hospital.

Deliveries to the food service area will be made through a gated entrance from the Dietary building. There will be no vehicular traffic within the secured area of the site. Visitor parking shall be outside of that area.

3. INTERIOR AREAS

A. General

The Adolescent facility is divided into two main areas, the residential treatment area and the school area. It is possible that these areas could be housed in separate buildings. However, a single structure may be more efficient. The construction shall conform to the Uniform Building Code non-combustible one-hour construction (minimum). Although a one-story solution may not require noncombustible construction by code, it is a requirement of this program that all construction be non-combustible (fire-retardant wood or heavy timber is not acceptable). Although the master planning has assumed a one-story building, there is no restriction on the number of stories for this facility. Although, taller structures will require more fire-resistive construction in accordance with the Uniform Building Code.

The exterior appearance should compliment the new Civil Behavioral Health Hospital. It is possible the adolescent facility could be located within the new Civil Behavioral Health Hospital; however, separation of sight and sound from the civil patients must be maintained and, if combined with the Civil Hospital, an admissions area separate from the adult admissions will be mandatory.

The facility should have a residential or "homelike" feeling. It should be visually open with emphasis on natural light and exterior views. The architecture can assist the therapeutic environment by emulating real life situations and routine when ever possible.

B. Residential / Treatment Unit

For the Adolescent Hospital program, the residential unit must separate the forensic and the civil patients. Therefore, the residential facility shall contain 12 private rooms and 4 semi-private (2 bed) rooms. It will also be necessary to separate male and female. This, of course, is not an issue with private rooms but will be an issue with the semi-private rooms and with the bathroom and shower facilities.

The unit shall contain restrooms, 2 for female and 2 for male (1 each for forensic and 1 each for civil). The restrooms shall consist of 4 water closets in the female restrooms with 6 sinks and a continuous counter. The male restroom shall contain 2 urinals and 2 water closets with 6 sinks and a continuous counter. There will be storage

units (lockable) for personal hygiene items. These storage containers shall be large enough to contain hair dryers, make-up kits, toothpaste, electric razors, etc. The showers shall contain 4 units in each Shower room. The unit shall consist of a small dressing area outside of a private shower unit. They shall be arranged similar to toilet stalls with a bench in the dressing area and a curtain or door to the shower. The partitions shall not extend completely to the floor so that a staff attendant can observe the occupancy of a shower area or dressing area without invading a patient's privacy.

There shall be offices, one each, for a medical physician, psychiatrist, psychologist, social worker, case manager, unit manager, clinical nurse specialist, and nurse supervisor. There shall also be a non-private office for the rehabilitation staff. The offices should be centrally located and available to the patients from the residential area. The main interior social area (Day room) shall be divided into a quiet area for reading and studying and a noisy area for activities such as television viewing and interactive games. Both of these social areas shall be fully observable from the Nurses Station.

Storage for patient belongings is important. Each patient brings clothing and other articles with them. Theft is a problem and a controlled storage area for patient belongings is important. There should also be a separate storage room for contraband. A patient may bring items with them that they are not permitted to have access to during their stay at the facility. A room for these items is required. There shall be locked access to this room.

Patient laundry facilities shall contain 2 residential type clothes washer and dryers. There will also be additional support rooms such as a Testing and Consultation room, a Group room for 8 to 10 people.

There shall be 2 separate Tub rooms, each containing a bathtub and dressing area.

There shall be 3 Seclusion rooms, 2 of the Seclusion rooms are intended for short-term occupancy by violent or suicidal patients. These rooms shall be located near the Nurses Station so that they can be observable and provide security and protection. Likewise, there shall be an additional seclusion room that will be a voluntary Quiet room for a patient's self protection. This room will not require direct observation from the Nurses Station.

The Residential Treatment unit shall contain a Nurse Station which shall be arranged so that the residential units are fully visible from a single point in the Nurses Station. It will provide the observation of each patient door and all activity outside of the patient room in the patient corridor without the use of electronic monitoring. The exterior activity areas associated with the Treatment unit shall also be observable from the Nurses Station.

This area shall have counters and storage. It shall include 2 seating positions for the unit secretary, 6 seating positions at a writing surface for charting, a secured patient storage area, convenient staff toilet, and a staff break room with kitchenette, microwave oven, refrigerator, and staff toilets near or adjacent to the break room.

The Nurses Station shall contain 8 seating positions (4 for charting and 4 for nurses), a crash cart alcove, a small blood draw alcove with counter plus small sink, and an office supply storage closet. Located near the Nurse room shall be a patient mail room for the sorting and storage of patient mail. Located adjacent to the Nurses Station shall be a Medical Isolation room. These rooms shall be designed to prevent airborne infection and shall contain an Ante room as described for the Isolation room by the U.S. Department of Health, Education and Welfare (Isolation Techniques for Use in Hospitals). The perimeter walls, ceiling, and floors, including penetration shall be sealed tightly so that air does not infiltrate to environment from the outside or to the outside. A separate toilet, bathtub with shower, and hand washing facilities are required adjacent to the Isolation room.

There will be a Teaching Kitchenette designed for patient use with staff control of the heating and cooking devices. Included will be a sink equipped for hand washing, cabinet storage space, a refrigerator, a microwave oven, and a range top for the teaching of meal preparation.

There will be telephone alcoves that will provide seated telephone conversations with acoustical dampening on the alcove walls for the telephone conversation. These telephone alcoves will be observable from the Nurses Station.

Patient computer stations in cubicles of 52" high partitions shall be adjacent to the Activity room area and shall be a lockable area.

An Examination and Treatment room shall be conveniently located for routine use. The room shall contain a lavatory or sink equipped for hand washing; storage cabinets; a writing surface; and an exam table.

There shall be a Medicine room with a dispensing window. The window shall have a roll down shutter to close off the dispensing room, the shutter will be fire rated if necessary.

Visitor rooms shall be located near the entrance to the unit for visitation of family and relatives. The rooms shall be located in such a way that the family members do not have to walk through the unit to get to the Visitor's rooms.

The unit shall also contain the Soiled Linen and Clean Linen rooms. This may be a separate closet or an approved Storage room for linen carts for the distribution system for the Hospital. The location may be out of the path of normal traffic and shall be under staff control. The Soiled Holding room shall be separate from the Clean Linen room and shall contain a clinical sink or equivalent. The room shall contain a lavatory or hand washing fixture. It is the intent of this room to be used only for holding of soiled material and there is no cleaning of bed pans. However, the work area is necessary for the clean-up of spills and body fluids.

C. Rehabilitation Area

The Adolescent Rehabilitation Center offers individual and social interaction activities such as board games, arts and crafts, instructional areas, and training. It shall consist of 2 large areas an occupational therapy area of 800 sq. ft. This shall contain a sink with a plaster trap and perimeter casework for storage of occupational therapy devices. There shall be access to a pottery kiln. It is recommended that the kiln be located outside for safety. There will be an exterior patio for the location of the kiln. Power shall be provided for the kiln (220 volt). Kiln shall be provided by the ADOA.

Male and Female Weight Training and Fitness areas shall be equipped with recessed floor electrical outlets spaced approximately 6' on center throughout for the location of fitness equipment such as stair treads, cross trainers, bicycles, etc., fitness equipment and weight training equipment shall be furnished by ADOA.

There shall also be a lockable storage room for athletic equipment storage with metal shelving for the athletic equipment storage.

Provide a small gymnasium consisting of half court basketball. A ceiling high enough to permit basketball play will be optional. Athletic flooring will also be required for the Gym. Provide a 10 ft. perimeter around the court with the same flooring material.

D. Dining

Food preparation shall be accomplished in the Dietary building and transported, by carts in trays, to the residential unit. There shall be a Serving and Dining area provided in the Residential unit. Dishwashing and clean up will be conducted in the Dietary building. Trays will be transported back to the Dietary unit.

E. Education Area

The Adolescent Education area shall consist of 2 Classrooms. Both classrooms shall be computerized with 8 computer stations in computer carrels. There will be 1 additional Instructor's computer station in addition to the student stations. The Adolescent Education Center shall contain a Multipurpose room that will be fully equipped for audio/visual projection and display. It shall contain a projection screen, projector, VCR, slide projector. The Multipurpose room provides interior area for indoor activities; media presentations; arts and crafts, etc.

The Multipurpose room shall have direct access to the exterior.

Arizona State Hospital
Civil Hospital and Adolescent Facility Payment Schedule
Exhibit B

Month	Payment Civil Facility		Payment Adolescent Facility		Total Payment
1	\$	350,085	\$	74,323	\$ 424,408
2	\$	551,596	\$	170,571	\$ 722,167
3	\$	781,538	\$	280,873	\$ 1,062,411
4	\$	1,027,983	\$	380,578	\$ 1,408,561
5	\$	1,278,145	\$	447,400	\$ 1,725,545
6	\$	1,519,048	\$	466,406	\$ 1,985,454
7	\$	1,738,193	\$	433,348	\$ 2,171,541
8	\$	1,924,213	\$	355,613	\$ 2,279,826
9	\$	2,067,456	\$	250,576	\$ 2,318,032
10	\$	2,160,492	\$	141,713	\$ 2,302,205
11	\$	2,198,495	\$	53,353	\$ 2,251,848
12	\$	2,179,492	\$	5,246	\$ 2,184,738
13	\$	2,104,470			\$ 2,104,470
14	\$	1,977,321			\$ 1,977,321
15	\$	1,804,641			\$ 1,804,641
16	\$	1,595,387			\$ 1,595,387
17	\$	1,360,417			\$ 1,360,417
18	\$	1,111,918			\$ 1,111,918
19	\$	862,782			\$ 862,782
20	\$	625,935			\$ 625,935
21	\$	413,662			\$ 413,662
22	\$	236,977			\$ 236,977
23	\$	105,044			\$ 105,044
24	\$	24,710			\$ 24,710
TOTAL	\$	30,000,000	\$	3,060,000	\$ 33,060,000

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BOB MCLENDON
ANDY NICHOLS
CHRISTINE WEASON

DATE: September 6, 2000

TO: Representative Bob Burns, Chairman
Members, Joint Committee on Capital Review

THRU: Richard Stavneak, Director

FROM: Tom Mikesell, Fiscal Analyst

SUBJECT: ARIZONA STATE LOTTERY COMMISSION - REVIEW OF FY 2000 AND
FY 2001 BUILDING RENEWAL ALLOCATION PLANS

Request

The Arizona Lottery Commission requests Committee review of its FY 2000 and FY 2001 Building Renewal allocation plans.

Recommendation

The JLBC Staff recommends a favorable review of the FY 2001 Building Renewal allocation plan. The FY 2000 report is for information only and no Committee action is required.

Analysis

Laws 1986, Chapter 85 established the Joint Committee on Capital Review (JCCR) and charged it with developing a Building Renewal formula to guide the Legislature in appropriating monies for maintenance and repair of state buildings. A.R.S § 41-1252 requires JCCR review of the expenditure plan for Building Renewal monies. JCCR has not consistently reviewed these plans in the past. Given that the Arizona Lottery Commission's FY 2000 plan has already been implemented, it is submitted for information purposes only. The FY 2001 plan is submitted for formal review.

The Lottery operates out of two facilities, a state-owned building located in Phoenix and a leased building in Tucson. The report provides information on capital expenditures for the Phoenix facility, which houses the Lottery's administrative offices as well as a ticket sales and redemption site.

(Continued)

FY 2000 Building Renewal Allocation

Laws 1999 Chapter 2, 1st Special Session appropriated \$27,600 in FY 2000 from the State Lottery Fund. The appropriated amount reflects 100% funding of the building renewal formula.

The Lottery expended \$13,100 for the construction of a security wall and security access within its information technology department. The remaining \$14,500 is available for future building renewal needs.

FY 2001 Building Renewal Allocation

Laws 1999 Chapter 2, 1st Special Session appropriated \$30,800 in FY 2001 from the State Lottery Fund. The appropriated amount represents 100% funding of the building renewal formula.

The Commission plans to use its FY 2001 allocation on the following projects:

Repair building roofing	\$12,000
Build concrete deterrent security barriers	\$ 2,200
Replace black and white security cameras	<u>\$15,000</u>
	\$29,200

The remaining \$1,600 is available for future building renewal needs.

Both the FY 2000 and FY 2001 plans appear reasonable and are consistent with legislative intent. The JLBC Staff recommends a favorable review of the FY 2001 Building Renewal allocation plan.

RS/TM:jb

Jane Dee Hull
Governor



Geoffrey E. Gonsher
Executive Director



Award Winner

August 3, 2000



Senator Randall Gnant, Chairman
Joint Committee on Capital Review
Arizona State Senate
1700 West Washington
Phoenix, Arizona 85007

RE: Request for Placement on Joint Committee on Capital Review
Agenda - September 2000

Dear Senator Gnant:

The Arizona Lottery requests placement on the September 2000 agenda of the Joint Committee on Capital Review to review the following items:

- FY2000 Capital Expenditures
- FY2001 Capital Expenditure Plan

The information for these items is attached.

Sincerely,

Geoffrey E. Gonsher, Executive Director

Attachment

cc: Representative Robert Burns
J. Elliott Hibbs, Director ADOA
Tom Betlach, Director, OSPB
Richard Stavneak, Staff Director, JLBC
Tracie Andreasson, OSPB
Tom Mikesell, JLBC ✓

**THE ARIZONA LOTTERY
BUILDING RENEWAL FUNDS
FISCAL YEAR 2000 USE OF FUNDS
FISCAL YEAR 2001 ALLOCATION PLAN**

Background

The Arizona Lottery operates out of two facilities - a 37,000 sq. ft. building, owned by the State of Arizona in Phoenix, and a 3080 sq. ft. leased building in Tucson. The Phoenix facility includes the administrative offices, as well as a ticket sale and redemption section. The Tucson office provides space for the district sales manager and for ticket sales and redemption. Maintenance of the Tucson facility is included as part of that lease agreement. This report provides information on the Phoenix facility which has a replacement cost of approximately \$2,700,000.

In January 1999, the Lottery received an Annual Building Inspection report from the Arizona Department of Administration. We addressed most of the items identified in that report in FY1999. Some of the ADOA recommendations were instituted by the Lottery at no cost; others, including the replacement of our cracked patio tiles (\$6,527), the replacement of roofing materials and roof re-coating over our warehouse (\$8,793.00), and new coolers for our warehouse (\$21,568), were paid from FY1999 capital expenditure funds. One remaining recommendation, regarding additional work on our main building and warehouse roofing, is one of the proposed uses of funds described in our FY2001 Allocation Plan.

As part of the FY2000-2001 Approved Budget, the Arizona Lottery received a Capital Outlay Appropriation of \$27,600 in FY2000 and \$30,800 in FY2001 from the State Lottery Fund to the Arizona State Lottery Commission for building renewal.

FY2000 Use of Funds

The following recommendation was instituted in FY2000.

• Construction of security wall and security access in Information Technology Department.	\$13,068.00
Total FY2000 Capital Expenditure Budget Allocation:	\$27,600.00
Total FY2000 Capital Expenditure:	<u>\$13,068.00</u>
Remainder:	\$14,532.00

**THE ARIZONA LOTTERY
BUILDING RENEWAL FUNDS**
Page two

FY2001 Allocation Plan

The Lottery proposes the following capital expenditures in FY2001:

<u>Description</u>	<u>Estimated Cost</u>
<ul style="list-style-type: none">• Repair building roofing using latex rubber material to help prolong the life of the roof. This was the final DOA recommendation to be implemented.	\$12,000.00
<ul style="list-style-type: none">• Concrete deterrent security barriers located outside the main entrance to the Phoenix Lottery building. These types of concrete barriers are placed outside buildings to avoid the possibility of an individual driving a vehicle into the lobby and jeopardizing the safety of customers and employees.	\$ 2,200.00
<ul style="list-style-type: none">• As a further safety measure, we propose to replace existing security surveillance cameras both inside and outside the Lottery building. Cameras currently in use are black and white and do not provide the detail possible with the newest technology. Cameras currently in use were installed in 1986, the time the Lottery moved into this building.	\$15,000.00
Total FY2001 Capital Expenditure Budget Allocation:	\$30,800.00
Total FY2001 Capital Allocation Plan:	<u>\$29,200.00</u>
Remainder:	\$ 1,600.00

Request

The Arizona Lottery requests favorable Committee review of the proposed FY2001 Capital Allocation Plan.

STATE OF ARIZONA

Joint Committee on Capital Review

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CHRISTINE WEASON

DATE: September 7, 2000

TO: Representative Bob Burns, Chairman
Members, Joint Committee on Capital Review

THRU: Richard Stavneak, Director

FROM: Lorenzo Martinez, Senior Fiscal Analyst

SUBJECT: ARIZONA DEPARTMENT OF TRANSPORTATION/ADOA - REPORT ON
17TH AVENUE PEDESTRIAN SAFETY LANDSCAPE PROJECT ON THE
CAPITOL MALL

This item is for information only and no Committee action is required. The attached fact sheet describes the Capitol Mall 17th Avenue Pedestrian Safety Landscape Project.

The Arizona Department of Transportation has partnered with the Arizona Department of Administration, City of Phoenix, Capitol Museum, and Governor's Specialist for the Americans with Disabilities Act on a \$1.8 million grant from Federal Transportation Enhancement Funds. These funds are intended for non-roadway, community transportation improvements such as landscaping and pedestrian walkways.

The project will narrow 17th Avenue from four lanes to two lanes, improve and add landscaping, provide access for loading and unloading areas, and raise a crosswalk to create a pedestrian table in front of the State Capitol.

The project is estimated to be a four-month project.

RS/LM:jb
Attachment

CAPITAL MALL – 17TH AVENUE
PEDESTRIAN SAFETY LANDSCAPE PROJECT April 3, 2000

Federal Transportation Enhancement Funds will be used in the construction of a (\$1.8 million) "Traffic Calming Pedestrian Safety" project on 17th Avenue, located between Van Buren and Buchanan Streets, in the Capitol Mall area. The Transportation Enhancement Funds, which are administered by the Arizona Department of Transportation (ADOT), are earmarked for non-roadway, community transportation related improvements such as landscaping, and pedestrian walkways.

A key part of the "Traffic Calming Pedestrian Safety" project will be the addition of improved pedestrian and street lighting with new trees and landscaping, along 17th Avenue to establish uniformity and continuity through the North-South Capitol Mall corridor. The City of Phoenix and Maricopa County have made some major improvements in the East-West corridors. The project will improve the safety and appearance in front of the Capitol, in conformance to the Capitol Mall Pedestrian Plan.

The project will include narrowing 17th Avenue to two lanes, converting the curb lanes to landscaping, and City & Tour bus access for loading and unloading passengers. Construction includes landscaped medians at three locations and raising the crosswalk six inches, creating a pedestrian table in front of the State Capitol. The project also will provide new traffic signals at Van Buren, Adams, Jefferson, and Madison Streets, parking bay for media vehicles in front of the Capitol, historic-era pedestrian and street lights, and illuminated street name signs.

The project, was designed by ADOT Consultant Logan Simpson Design of Tempe, in conformance to the Capitol Mall Pedestrian Study. Construction is scheduled to begin in May 2000, with completion in August 2000.

The Pedestrian Landscape, Traffic Calming project design was developed in partnership with ADOA, City of Phoenix, Capitol Museum and the Governor's Specialist for the Americans with Disabilities Act (ADA). The Capitol Mall Commission reviewed the project concepts. ADOT will provide 5.7 percent matching funds for this project.

Additional information can be obtained from LeRoy Brady's office, Manager of ADOT's Roadside Development Section. (602) 712-7357.

STATE OF ARIZONA

Joint Committee on Capital Review

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BOB MCLENDON
ANDY NICHOLS
CHRISTINE WEASON

DATE: September 7, 2000

TO: Representative Bob Burns, Chairman
Members, Joint Committee on Capital Review

THRU: Richard Stavneak, Director

FROM: Lorenzo Martinez, Senior Fiscal Analyst
Steve Grunig, Research Fiscal Analyst

SUBJECT: UNIVERSITY OF ARIZONA - REPORT ON LEASE-PURCHASE PROJECTS

Request

The University of Arizona (U of A) is submitting a report on the issuance of Certificates of Participation (COPs) to finance the construction of Power Lines to the Mt. Graham International Observatory (MGIO) and to partially finance construction of the Sixth Street Parking Garage and Office Building.

Recommendation

This item is for information only and no Committee action is required. The COP issuances are estimated to total \$28,500,000.

Analysis

At its May 2000 meeting, the Committee was informed that JLBC Staff had requested that any university projects financed with COPs, also known as lease-purchase agreements, be submitted to JCCR as informational items. Current statutes do not require legislative approval or review of university lease-purchase agreements.

The Arizona Board of Regents, at its June 2000 meeting, approved the issuance of \$32,900,000 in COPs to construct power lines to the MGIO (\$12,000,000), to prepay a license agreement for the use of Oracle Corporation software (\$4,400,000), and to partially finance the construction of the Sixth Street parking garage and office building (\$16,500,000). The university has decided not to prepay the Oracle Corporation license agreement and will only issue \$28,500,000 for the other 2 projects.

(Continued)

Mt. Graham International Observatory

As the primary permit holder on Mt. Graham, the U of A has taken the primary responsibility of obtaining utility and sanitary services at the MGIO facilities. The addition of the Large Binocular Telescope requires the installation of a power line from the base of Mt. Graham to the MGIO. Cost of the project is estimated to be \$12,000,000. Repayment will come from user fees at the MGIO.

Sixth Street Parking Garage and Office Building

The U of A plans to construct a 1,700 parking space garage and a 15,000 square foot office building. The additional parking spaces will accommodate increased demand and the displacement of approximately 1,000 parking spaces from university expansions. The office building will house 75 Parking and Transportation Services Department employees. The total cost of the project is estimated to be \$17,000,000. Of that amount, \$16,500,000 will be financed with COPs and the remaining \$500,000 will come from existing parking revenue reserves. Repayment for the COPs will come from revenues generated by parking services.

RS/LM/SG:jb

Senior Vice President
For Business Affairs

THE UNIVERSITY OF
ARIZONA[®]
TUCSON ARIZONA

Administration Building
Tucson, Arizona 85721
(520) 621-5977
(520) 621-7714

July 17, 2000

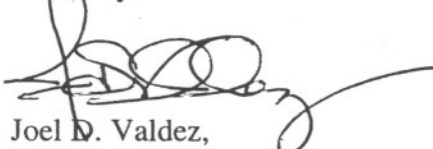
Mr. Lorenzo Martinez
Senior Fiscal Analyst
Joint Legislative Budget Committee
1716 West Adams
Phoenix, AZ 85007

Dear Mr. Lorenzo:

This letter is to inform you that the Arizona Board of Regents, at its June 29, 2000 meeting, approved the Sale of Certificates of Participation in the amount of \$32,900,000 for the Mt. Graham Power Line Project, and Sixth Street Parking Garage and Office Building.

Enclosed for your information is a copy of the Agenda Item as approved by the Board. If you have any questions, please feel free to contact me at (520) 621-5977.

Sincerely,



Joel D. Valdez,
Senior Vice President, Business Affairs

js

Enclosure

c: w/o enclosure
Peter Likins
Greg Fahey
Linda Blessing



EXECUTIVE SUMMARY

ACTION ITEM: The University of Arizona requests authority (i) to sell Certificates of Participation (COPs) for the purpose of financing the Sixth Street Parking Garage and Office Building project, the Mt. Graham International Observatory (MGIO) Power Line Project and the prepayment of the Oracle Corporation Site License Agreement and paying the costs of issuance of the COPs and (ii) to take related actions and to enter into necessary documents.

ISSUE

The University of Arizona seeks Board authorization to sell one or more series of Certificates of Participation (COPs) sufficient to (a) finance a portion of the construction of the Sixth Street Parking Garage and Office Building, (b) finance the acquisition and construction budget for the Mt. Graham (MGIO) Power Line Project, and (c) finance the prepayment of the Oracle Corporation Site License Agreement and (d) finance the costs of issuance related to the COPs. In connection with this financing, the University seeks authorization to take all related actions and to enter into all necessary agreements related to the COPs or the projects, including bond insurance, reserve fund surety bonds, and certificate purchase, liquidity and interest rate exchange agreements.

BACKGROUND

The Sixth Street Parking Garage and Office Building Project. The project consists of a parking garage of approximately 1,700 parking spaces and approximately 15,000 gross square feet of office space on land owned by the University. Previously, the University intended to use a public/private partnership for financing, design and construction of this facility. The University now intends to construct it using either a traditional design/bid/build process or one of the alternate processes recently authorized by the Arizona Legislature. The parking structure will meet the increased demand and declining parking spaces on campus. During the past ten years, the parking spaces on campus have declined by approximately 400 spaces. Projected growth of the University and associated parking displacement in the next two to four years is expected to reduce the inventory of permit spaces by approximately 600. The office building portion of the project will be occupied by the Parking and Transportation Services Department (PTS). Using a combination of individual offices and conference rooms and "open office" design, the floor space will accommodate 75 full-time and part-time employees of PTS. It is anticipated the University

EXECUTIVE SUMMARY

will finance \$16,500,000 of the total cost of \$17,000,000 through the issuance of COPs, with the remaining \$500,000 coming from parking reserves.

Previous Board Action:

Information Item	October 1994
Information Item	June 1995
Project Initiation Approval	June 2000

Mt. Graham (MGIO) Power Line Project. As the permit holder on Mt. Graham, the University has undertaken primary responsibility for obtaining utility and sanitary services for the telescopes comprising the MGIO, although the costs of such services are to be shared by all users. With the construction of the Large Binocular Telescope, the long-term reliable electric power needs of MGIO will require the installation of a power line from near the base of Mt. Graham to the MGIO. The line is expected to lie, for the most part, under or along highway rights of way. The current project budget is \$12,000,000, which the University intends to finance through the issuance of COPs.

Previous Board Action:

Conceptual Approval	July 1990
Revised Conceptual Approval	June 2000

Prepayment of Oracle Corporation Site License Agreement. In May, 1999, the University entered into a Perennial Site License Agreement with Oracle Corporation, under which all faculty, staff and students at the University receive unlimited use of all of Oracle Corporation's database and other software products for a five-year period, including all upgrade releases to such software during the license period. At the end of the Site License period, the University will still be entitled to use the upgraded software until the end of the Site License period.

The University's remaining payments under the Site License Agreement total \$9,600,000 but can currently be prepaid for \$4,400,000 for a reduction of \$5,200,000. Financing the prepayment through the COPs is expected to result in a significant benefit to the University through reduced annual and aggregate payment requirements from those called for in the Site License Agreement.

EXECUTIVE SUMMARY

FINANCING PLAN

The University intends to finance the projects described above by selling one or more series of COPs in amounts sufficient to fund the budgets and costs for the projects, or portions thereof, described above (currently \$32,900,000) and to pay the costs of issuance of the COPs. The University expects that the COPs of each series would mature over a period of not more than 25 years from their date. The University expects that the COPs will be issued under common or similar financing documents. Projects would be combined into financing packages, to the extent practicable, both to achieve size efficiencies in issuance costs and to provide diversified collateral, which is often more attractive to COPs investors. The first financing is expected to be combined with the COPs financing previously approved by the Board at its May 2000 meeting for the McKale Athletic Performance Center Addition and Heritage Hall and the University Police Department Facility.

The first financing package may be issued in series, as follows:

1. *Mt. Graham (MGIO) Power Line Project.* Federal tax-exempt bond rules may require that COPs providing funds for portions of the Mt. Graham (MGIO) Power Line Project be issued as a separate series.
2. *Variable Rate COPs.* Depending upon market conditions at the time of sale, the University may fund all or a portion of the projects through variable rate COPs series after reviewing the funding needs of each project. The University has to date, had a favorable experience with the variable rate COPs issued last August to fund a portion of the new Student Union/Bookstore project and is currently considering additional variable-rate financing projects. In a variable rate mode, the COPs can be prepaid at any time without penalty.
3. *Fixed Rate COPs.* Any remaining COPs would be issued as conventional fixed-rate instruments with debt retirement adapted to the funding sources for the projects being financed.

The University will be called upon to enter into various agreements in connection with the COPs, such as bond insurance for the COPs, reserve fund surety bonds, certificate purchase and liquidity agreements and, if the University decided either presently or in the future to increase or decrease its variable rate component of the variable rate COPs, interest rate exchange agreements with counterparties.

EXECUTIVE SUMMARY

Marketing of COPs; Timing. All COPs would be sold at current market rates at the time of pricing. Fixed rate COPs would not exceed a yield of 7.5% per annum and initial rates on variable rate COPs would not exceed 5.5% per annum. The University expects the COPs series will be marketed and sold immediately following Board approval and delivered before the end of July, in order to meet the construction and acquisition schedules.

The University intends to utilize its current bond counsel, Snell & Wilmer, and its current financial advisor, Dain Rauscher Incorporated, in conjunction with the proposed financing. The COPs would be marketed and sold through a negotiated basis to one or more of the investment banking firms previously selected by the University through a competitive process. All debt will be retired from:

1. Parking structure - from parking revenues
2. Power line - from operating budget of LBT Corporation
3. Oracle site license - from university local funds

The action being requested would authorize the University to execute these financings within the parameters set by the Board. Following the completion of each financing, the University will report to the Board the results and terms of the financing.

RECOMMENDATION/CONCLUSION

RESOLVED: That the University of Arizona be, and hereby is, authorized to sell a series of Certificates of Participation in amounts to produce sufficient proceeds to finance the acquisition, construction and improvement budgets for the Sixth Street Parking Garage and Office Building, and the Mt. Graham International Observatory (MGIO) Power Line Project (currently \$32,900,000) and to pay costs of issuance of the COPs, to take related actions and to enter into all necessary agreements, as provided in a resolution reviewed by Board counsel and staff.