(\$ in thousands)

Project Requests for State Funds

Project Title	Priority Ranking	Funding Source	2024		2026		2028	
Asset Preservation	1	GO	\$	30,000	\$	30,000	\$	30,000
Patient Housing Unit	2	GO	\$	20,000	\$	0	\$	0
Early Childhood Facilities	3	GO	\$	20,000	\$	20,000	\$	20,000
		GF	\$	20,000	\$	20,000	\$	20,000
Miller Building Remodel	4	GO	\$	50,000	\$	0	\$	0
St. Peter Water & Sewer Construction	5	GO	\$	13,000	\$	0	\$	0
Renewable Energy Systems	6	GF	\$	18,000	\$	0	\$	0
Anoka Dietary Building Remodel	7	GO	\$	7,000	\$	0	\$	0
St. Peter Office, Storage & Shop	8	GO	\$	7,000	\$	0	\$	0
Johnson Hall Demolition	9	GF	\$	550	\$	0	\$	0
DCT Security Systems	10	GF	\$	7,000	\$	0	\$	0
Cambridge Demolition	11	GF	\$	3,000	\$	0	\$	0
Total Project Requests	•	•	\$	195,550	\$	70,000	\$	70,000
General Obligation Bonds (GO) Total			\$	147,000	\$	50,000	\$	50,000
General Fund Cash (GF) Total			\$	48,550	\$	20,000	\$	20,000

(\$ in thousands)

Asset Preservation

AT A GLANCE

2024 Request Amount: \$30,000

Priority Ranking: 1

Project Summary: \$30 million to maintain, repair, and replace the Department of Human

Services' (DHS) capital assets throughout Minnesota. This will ensure that the state-owned DHS facilities used for Direct Care and Treatment

services are functional, safe, and in good repair.

Project Description

Asset Preservation funds are used throughout Department of Human Services' (DHS) state-owned facilities system and are allocated for projects on a prioritized basis based on need and level of deficiency, i.e.,

- 1. Critical projects that require immediate action to return a facility to normal operation, stop accelerated deterioration, or to correct a cited safety hazard;
- 2. Projects that will become critical within a short period of time;
- 3. Projects that require reasonably prompt attention to preclude predictable deterioration or potential downtime and the associated damage or increased costs if deferred further.

Each of the DHS facilities (including campus-based facilities and state-owned community-based facilities) is responsible for maintaining a dynamic Facility Condition Assessment (FCA) program, which identifies projects required to preserve the physical plant and facility assets. The FCAs are constantly monitored and updated based on evaluation and immediate need. These plans are comprised of projects directly related to maintaining existing assets, as well as projects to ensure the continued safe, effective, and efficient use of the facilities.

Accordingly, this proposal relates to the repair, replacement, and renewal needs specific to DHS' state-owned Direct Care and Treatment facilities. As noted above, these needs have developed over time and are under constant evaluation. They represent a system-wide assessment of known facility deficiencies, including, but not limited to:

- Security, safety and code compliance issues
- Life/fire safety deficiencies (fire sprinkling, detection/alarm systems)
- Emergency power/egress lighting upgrades
- Major mechanical and electrical utility system repairs, replacements, upgrades, and/or improvements, including the replacement of boilers and upgrade of heating and cooling systems
- Sewer and water infrastructure repairs/replacements
- Abatement of hazardous materials (asbestos, lead paint, etc.)

- Elevator repairs/upgrade
- ADA requirements/reasonable accommodation
- Roof repair/replacement and structural deficiencies
- Tuck pointing and other building envelope work (window and door replacement, fascia and soffit work, re-grading around building foundations, etc.
- Road, walk, and parking lot repair/replacement/maintenance.

Project Rationale

Asset preservation funding is essential to support the operations of the Department of Human Services (DHS) residential treatment facilities and community-based program operations. Because of the system-wide magnitude of projects related to deferred maintenance or renewal at the department's facilities, these projects cannot be addressed with the current level of repair and replacement funding appropriated in the agency's operating budgets.

Failure to adequately fund this request will only intensify the problem. Deteriorating conditions will worsen and the state's physical plant assets will continue to decline. Some facility components that are critical to the well-being of the facility's patients and staff may fail, posing significant health/safety risks to the individuals under DHS's care. Future costs will likely compound, as complete replacement may become the most cost effective and efficient alternative for addressing related deficiencies.

Funding of this request will enable DHS and its facilities to continue efforts to address deferred maintenance and renewal/replacement needs at DHS's state-owned facilities used for Direct Care and Treatment services.

Project Timeline

Other Considerations

Without the requested asset preservation funding, the Department of Human Services (DHS) utilizes a large percentage of limited repair/replacement operating funds to address critical and expensive asset preservation projects. This action would limit DHS's ability to address routine preventative, predictive and corrective facility maintenance. Ultimately, this would compound the existing deferred maintenance problem resulting in a substantial increase in the long-range deferred maintenance and renewal/replacement projects at DHS's facilities.

Adequate funding levels for maintaining state physical plant assets could be appropriated to each agency's operating budget to maintain new or upgraded facilities. For example, when a new building is authorized, an appropriate amount of maintenance funding could also be appropriated to the agency's base budget to maintain the new facility into the future. These funds could be placed into a special agency revolving account for facility maintenance/repair/replacement so they would be available to be utilized and/or managed over a period of years to address major repairs, and replacement/renewal of major building/facility components, without agencies having to compete for such funding in future bonding bills.

Impact on Agency Operating Budgets

Asset preservation funding will not impact operational budgets.

Description of Previous Appropriations

2023 Legislature appropriated \$7.2 million in bond funds, \$2 million in cash

2020 Legislature appropriated \$8 million

2018 Legislature appropriated \$10 million

2014 Legislature appropriated \$3 million

2012 Legislature appropriated \$2 million

2011 Legislature appropriated \$4.7 million

2010 Legislature appropriated \$2 million

2009 Legislature appropriated \$2 million

2008 Legislature appropriated \$3 million

2006 Legislature appropriated \$3 million

2005 Legislature appropriated \$3 million

2002 Legislature appropriated \$4 million

Project Contact Person

(\$ in thousands)

Patient Housing Unit

AT A GLANCE

2024 Request Amount: \$20,000

Priority Ranking: 2

Project Summary: \$ 20 million is requested to design, construct, furnish and equip a new 48

bed patient housing unit on the St. Peter Campus for Forensic Services to meet the long-term needs of the distinctly different populations which Forensics is required to serve through the commitment process for the mentally ill. This request will utilize the existing building design that was used to construct the Forest View and Prairie View transition buildings.

Project Description

This project aims to create a new 48-bed patient housing unit on the upper St. Peter Campus utilizing the existing design of the two Transition buildings (Forest View & Prairie View) currently operating on the campus. The primary objective is to ensure consistency with the existing architectural archetype in design, construction methods, furnishing while accommodating the needs of the patients. The consistent design/project approach will ensure a cohesive campus environment, promoting a sense of familiarity for patients, staff, and visitors. The new building will be approximately 26,100 square feet consisting of two, 24 bed units with mechanical systems and staff support separating the two patient wings. Site improvements will include new parking, roadways, sidewalks, secure courtyards, and landscaping as required.

Project Rationale

The St. Peter campus has been in existence for over 150 years. Throughout its history, buildings have been erected as needed to meet the long term needs of the diverse patients that Forensic Services support. Currently there is a shortage of patient beds in the Forensics program. The existing wait list for an admission to the Forensics Mental Health Program is over 5 years (wait list is 53 individuals). Forensic patients committed as mentally ill & dangerous (MI&D) already, patients committed as Rule 20 (needing competency assessment and treatment) and pending MI&D commitments are being housed in community hospitals, jails and at AMRTC and are not getting adequate access to needed psychiatric care they deserve. By constructing a new patient housing unit on the upper campus Forensic Services will continue to contribute to the development of a modern residential treatment facility that serves all the people of our State and will be in compliance with State statute to provide treatment when people are committed to Forensic Services.

Project Timeline

Design - August 2024 to March 2025 Bid - April/May 2025 Construction - June 2025 to June 2027

Other Considerations

This project will help alleviate the current shortage of beds needed to provide treatment for the mentally ill population of the State of Minnesota.

Impact on Agency Operating Budgets

The design and construction of an additional patient housing unit will increase the square footage on the St. Peter campus and increase the overall cost of the future operating budget for the Forensic Services (FS) program. Costs are directly associated with the addition of residential units that will require new staff and support costs.

Description of Previous Appropriations

Project Contact Person

(\$ in thousands)

Early Childhood Facilities

AT A GLANCE

2024 Request Amount: \$40,000

Priority Ranking: 3

Project Summary: \$20 million in General Obligation bonds and \$20 million in General Fund

dollars are requested for statewide, Early Childhood Facilities grants. Grants help local entities, schools, and community-based organizations to acquire, construct, or renovate early childhood facilities. Grants will be implemented through a competitive RFP process. \$544,000 in general fund dollars is also requested for program administration, available

through the bonding bills cancellation date.

Project Description

Programs include program collaboration among Head Start, childcare and school-based early childhood programs. Projects must comply with DHS childcare licensing or certified exempt regulations, which assures that space is safe and accessible. Projects create classroom space with restroom access, cubby storage, parent rooms, prep spaces, secure entry, and indoor /outdoor large motor skills areas.

Funds are awarded through a competitive grant process. Bond funding is available to the state or political subdivisions. Space may be leased to nonprofit service providers. General funds will be made directly to Head Start, childcare, tribal and other non-profit programs.

A grant for an individual facility must not exceed \$1M for each program that is housed in the facility, up to a maximum of \$3M for a facility that houses three or more programs.

Project Rationale

There is a large demand for new and improved early childhood facilities to meet the needs of children and families across the state. This project will enhance communities' ability to prepare children for kindergarten.

In 2016, DHS canvassed superintendents and principals throughout the state for early childhood facility project needs and received over 77 inquiries totaling \$275 million. In 2020, a survey of statewide Head Start programs identified nearly \$34 million in project needs. Additionally, COVID-19 revealed the need to increase square footage for facilities.

Additional dynamics point to the need for new facilities. There is movement at the federal level toward offering free preschool for 3 and 4 year-olds; this would increase space needs. Space is already at a premium due to the onset of all-day Kindergarten, which displaced former early childhood spaces. Families with low incomes that now have access to high quality programs also creates more demand.

These newly constructed or renovated facilities promote developmental outcomes for children who are at the highest risk of being unprepared for kindergarten.

Project Timeline

An RFP will be initiated upon the appropriation of funding for the program; projects are awarded using the full amount of the appropriation and are distributed throughout the state—with a priority to fund projects in non-Metro regions of the state; projects are completed within the four-to-five-year state bonding window.

Other Considerations

Funding has been sporadic or absent over the years and consistent funding would help to stabilize the program and better serve the needs of young children across the state.

Impact on Agency Operating Budgets

Local projects are required to have sufficient, ongoing operating funds to be eligible. DHS will not operate the facilities. DHS is requesting 1 temporary FTE to manage the grants awarded through this request. \$544,000 in general fund dollars is needed for program administration, available through the bonding bills cancellation date.

Description of Previous Appropriations

In 2023, the Governor recommended \$30 million for early childhood projects. The final bonding bills in the 2023 session appropriated \$900 thousand in GO bonds and \$1.125 million in general fund dollars.

Prior to 2023, the last appropriation was granted in 2014: \$6 million in general obligation bond proceeds went to 8 Early Childhood projects throughout the state; \$3 million was available for an RFP, and the other \$3 million went to an earmarked project. DHS received over \$7 million in requests; considering the earmarked project, this left the RFP \$4 million over subscribed.

To date (since 1992) the Early Childhood Facilities program has funded 76 projects with \$23 million of state grants; however, funding has been sporadic or absent over the years. Nearly 80 percent of the projects were in greater Minnesota.

Project Contact Person

Elyse Bailey Agency Budget Director 651-402-7046 elyse.bailey@state.mn.us

(\$ in thousands)

Miller Building Remodel

AT A GLANCE

2024 Request Amount: \$50,000

Priority Ranking: 4

Project Summary: \$50 million is requested to predesign, design, renovate, furnish and equip

the Miller Building at the Anoka Metro Regional Treatment Center (AMRTC) for residential treatment facilities for Direct Care and Treatment.

Project Description

This project will consist of the renovation of the entire Miller Building to provide residential treatment facilities consisting of four units with a minimum 16 single bedrooms and support space per unit.

Currently, a portion of the building is housing a chemical dependency unit while the rest of the building is vacant. The construction of this project will be completed in two stages. The first stage will remodel the north, east and west wings. When the first stage of remodeling is complete the chemical dependency residential treatment unit will move from the south wing to the north wing. After the south wing is vacant stage two will begin to gut and renovate the south wing.

This project will consist of replacement and/or renovation of HVAC components to connect to the new system, plumbing, electrical, security, and life safety systems including fire protection, and other building code deficiencies; replacement of the roof, windows and doors; reconfigure and remodel space; design and abate asbestos and other hazardous materials; remove and/or demolish nonfunctioning building components necessary to support the programmed use.

Project Rationale

The Anoka Metro Regional Treatment Center (AMRTC) is a state-operated inpatient psychiatric hospital that serves Minnesota. The campus has three main structures – the hospital with six residential treatment units, the Miller Building, and the Old Dietary/Warehouse.

The Miller Building was built in 1951 to provide additional bed capacity and updated facilities for mentally ill patients. It is connected to the main AMRTC building via an above ground secure indoor walkway. It also provided additional support space for the facility, including a large swimming pool, gymnasium and office space for the campus clinical and recreational programs. It currently houses a chemical dependency residential treatment program, the state-wide behavioral health program admissions team, and other support functions necessary for operating the campus programs.

Many of AMRTC's facilities need maintenance or system upgrades to prevent building deterioration

and to maximize their use for the future, most of which can be addressed with operating funds and/or the use of asset preservation. However, the scope and total cost of the work proposed for the Miller building exceeds the Department of Human Services' (DHS) ability to use either operating funds or asset preservation appropriation funding. Therefore, this project requires capital funding dedicated specifically to addressing the improvements outlined herein.

The Miller building is in very good structural condition; however, there is deferred maintenance estimated at \$6.6 million. During the 2018 legislative session, the Department of Human Services (DHS) was appropriated \$6.550 million for roof and HVAC replacement at AMRTC. Approximately half of this funding was slated for the HVAC replacement in the Miller building. This project was started in late summer 2018. The project was put on hold when asbestos abatement was required in the south half that was occupied. Approximately **\$2 million** of the \$3.3 million is remaining of the original proposal. An approved amendment in the **2021 legislation session** for the remaining funds will be utilized for renovation. The swimming pool has been demolished and a new concrete floor has been installed in the pool area.

Project Timeline

Currently in design, complete construction documents by 06/01/2024.

Bid and award construction contract 09/01/2024.

Construction 09/2024 thru 09/2026.

Other Considerations

Upon project completion, the Miller building will be ready for full utilization as treatment, recreation, and support space for Direct Care and Treatment.

Impact on Agency Operating Budgets

Design and renovation of the Miller Building will increase the overall cost of the future operating budget. Costs are directly associated with the addition of residential units that will require new staff and support costs.

Description of Previous Appropriations

2021 Legislature approved remaining previously appropriated funds could be used for this project.

2018 Legislature appropriated \$6.550 million for roof and HVAC replacement at AMRTC. Approximately 50% of this appropriation is planned for the HVAC replacement for the Miller Building 2017 legislature appropriated \$2.25 million for safety and security upgrades at AMRTC. Approximately 25% of this appropriation is planned for safety and security for the Miller Building.

Project Contact Person

(\$ in thousands)

St. Peter Water & Sewer Construction

AT A GLANCE

2024 Request Amount: \$13,000

Priority Ranking: 5

Project Summary: \$13 million to upgrade and replace the water, sanitary and storm sewer

infrastructure at the St. Peter campus. This will ensure that the stateowned DHS facilities used for Direct Care and Treatment services are

functional, safe, and in good repair.

Project Description

History of Utilities included in this project:

Water System: The original system consisted of wells for water supply needs along with associate piping to the various buildings constructed at the time. As the campus expanded, a more reliable watermain system was constructed. Currently, potable water is supplied by the City of St. Peter. The present water system in the lower campus was constructed in the early 1950's and consists of 6-inch to 12-inch diameter cast iron pipe. The hydrants that service the lower campus date back to as early as 1948. The valving and service lines to buildings vary in age, although majority of the valves date back to the 1950's.

The investigation and rating of the water system analysis was based on age, type of pipe material, watermain breaks, sizing of pipe, looping of dead-end mains and testimony from system operators.

Sanitary Sewer System: The existing system in the lower campus has been modified and extended numerous times since it was originally installed. Much of the original sewer system was constructed to discharge into tunnels, which in turn discharged to the Minnesota River. In 1960, an 18-inch diameter sewer was constructed to divert the sanitary sewer flow to the City of St. Peter's sanitary sewer collection system. The present sanitary sewer collection system consists of 6-inch to 27-inch diameter pipes made from clay, concrete, PVC, and composite lining. The system has a series of manholes at pipe junctions that provide access to the pipe network.

The investigation and rating of the sanitary sewer system was completed by televising the pipes, which is completed by pulling a camera through the sewers and noting conditions encountered. The scoring of each segment results in a rating which correlates to the life expectancy of the sewer. All manholes were also inspected and evaluated during the investigation.

Storm Sewer System: The storm sewer systems were built and expanded as buildings, streets, and parking lots developed. The network of piping ranges from 6-inches to 27-inches in diameter and is primarily concrete pipe. Manhole and catch basin structures were placed in strategic locations to collect runoff. These structures are constructed with concrete block or precast concrete. The discharge of storm drainage is generally to the wetlands located southeasterly from the campus. The wetlands ultimately discharge into the Minnesota River.

The investigation and rating of the storm sewer system was completed by televising the pipes, similar

to the sanitary sewer system above. The scoring of each segment results in a rating which correlates to the life expectancy of the sewer. All manholes were also inspected and evaluated during the investigation.

Project Rationale

In 2018, DCT contracted with Bolton & Menk Engineers to conduct a water and sewer system analysis. The resulting report provided an evaluation of the existing systems and associated recommendations for replacement of the water main, sanitary sewer, and storm sewer infrastructure located throughout the entire campus. Majority of the systems, especially on the lower campus, were constructed in the early 1950's and have far exceeded their useful life. It is imperative to replace this critical infrastructure to ensure the campus can continue to operate and serve the needs of patients, clients, and employees.

This investment will directly affect the health and safety of over 1,100 people, consisting of patients, clients and staff on-site 24/7/365.

Based on all the data collected, the lower campus has a number of infrastructure deficiencies and should be improved. Without improvement, the probability of infrastructure failing in the near future is very high and increases with each passing year. A project of this scope and magnitude presents challenges for security, traffic control, parking, temporary water supply, sewer bypass pumping, work phasing, temporary shutdowns, coordination and more.

Various options for constructing the necessary infrastructure improvements were discussed with local construction industry experts. A recommendation of developing a comprehensive project to address all deficiencies noted in the report. This request would be administered as one contract and be constructed over a 2-year period to achieve efficiencies in scheduling, coordination, phasing, and project management.

Project Timeline

Currently in design, complete construction documents by 06/01/2024.

Bid and award construction contract 09/01/2024.

Construction 9/2024 thru 09/2027.

Other Considerations

Water and sewer infrastructure do not represent all of the underground assets on campus. Other underground components vital to the operation include steam lines for heat supply, communication/data supply lines, and electric supply lines. These buried utilities must be considered as part of any construction project and will at the very least need to be included in the process of scheduling, potential shutdowns and/or temporary facilities to maintain operation of the campus. The age and condition of these other assets should be considered for potential replacement as well, either prior to or concurrent with these improvements. This request does not include funding for these other assets. If and when replacement is warranted, funding will come from appropriated asset preservation.

Impact on Agency Operating Budgets

Funding this project will not impact operational budgets.

Description of Previous Appropriations

2023 Legislature appropriated \$1.050 million for design

Project Contact Person

(\$ in thousands)

Renewable Energy Systems

AT A GLANCE

2024 Request Amount: \$18,000

Priority Ranking: 6

Project Summary: \$18 million is requested to install renewable energy systems and energy

upgrades for buildings on the St. Peter campus, the Moose Lake campus, and the Anoka Metro Regional Treatment Center (AMRTC) campus. Annual electricity costs at all three sites was \$2.4 million from April 2022

to March of 2023.

Project Description

This \$18 Million request is the Department's #6 priority for the 2024 Capital Budget. Annual electricity costs are as follows:

- St. Peter campus = \$890,850;
- Moose Lake campus = \$911,577;
- AMRTC = \$595,310.

The St. Peter campus consists of 54 buildings, totaling 1,477,038 square feet and a replacement value of \$429,065,939.

The Moose Lake campus consists of 6 buildings, totaling 658,766 square feet and a replacement value of \$216,461,235.

AMRTC consists of 11 buildings, totaling 386,621 square feet and a replacement value of \$114,169,540.

The three campuses have already completed many energy upgrades including LED lighting, HVAC replacements, and building envelop upgrades, but many more upgrades will be required to bring these sites to net zero energy use. This project will address and prioritize upgrades and replacements at all three sites. The renewable energy systems will be right-sized to accommodate more energy efficient campuses.

DCT is currently conducting commercial grade energy audits that will assist in identifying the optimal renewable energy system and upgrades required base on analysis of historical energy use data from 2011-2023.

Project Rationale

The St. Peter campus houses individuals committed to the Minnesota Security Hospital (MSH) and the Minnesota Sex Offender Program (MSOP). The campus is occupied by more than 1,100 people, consisting of patients, clients, and staff.

The Moose Lake campus houses individual committed to the Minnesota Sex Offender Program (MSOP). The campus is occupied by more than 800 people, consisting of clients and staff.

AMRTC houses individual committed to the mental Health and Substance Abuse Treatment (MHSATS) program. The campus is occupied by more than 400 people, consisting of patients and staff.

All three locations operate 24 hours a day, 7 days a week and 52 weeks a year. There is no "down time" - nor can there be based on the patients and clients served at these DCT facilities. Each location has highly sophisticated security systems that are powered by electricity.

Electricity consumption at these three sites total 24,514,630 kWh of electricity used, \$2,397,737.47 expended which includes peak demand charges due to our 24/7 operations, and 11,150.35 total metric tons of CO2e emitted. Natural Gas consumption at the three sites is 1,723,378 therms of energy, \$1,702483.38 expended, and 9,153.69 total metric tons of CO2e emitted. The installation of renewable energy systems (solar, wind, geothermal, etc.) and other energy upgrades would significantly lower those numbers.

In the effort to meet the Governor's strategic priorities for climate change, this request supports maximizing renewable energy while reducing our carbon footprint and utility costs.

Project Timeline

Retro-Commissioning - current to March 2024
Design - April 2024 to February 2025
Bid - February 2025
Construction - April 2025 - April 2027

Other Considerations

Impact on Agency Operating Budgets

The installation of renewable energy systems and other energy upgrades in the request is anticipated to reduce the overall cost of the future operating budget for the campuses, while also eliminating the "peak demand" premium charges that are typical of all 24-hour secure facilities. Cost reductions will be directly associated with renewable energy systems and energy efficient equipment and upgrades.

Description of Previous Appropriations

Project Contact Person

(\$ in thousands)

Anoka Dietary Building Remodel

AT A GLANCE

2024 Request Amount: \$7,000

Priority Ranking: 7

Project Summary: \$7 million is requested to design, renovate, furnish, and equip the Old

Dietary/Warehouse Building at the Anoka Metro Regional Treatment

Center (AMRTC).

Project Description

This project will consist of the renovation of space for a permanent DCT Central Warehouse, offices, and training spaces.

The DCT Central Warehouse will require replacement and/or renovation of HVAC components, plumbing, electrical, security, and life safety systems including fire protection and other building code deficiencies; reconfigure and remodel space; remove and/or demolish nonfunctioning building components necessary to support the programmed use.

This project will also require abatement of hazardous materials.

Project Rationale

The Anoka Metro Regional Treatment Center (AMRTC) is a state-operated inpatient psychiatric hospital that serves Minnesota. The campus has three main structures – the hospital with six residential treatment units, the Miller Building and the Old Dietary/Warehouse Building.

The Old Dietary/Warehouse Building was built in 1959 to provide kitchen and dining services for the old regional treatment center for mentally ill patients. In the mid 1990's, the hospital building was built which also encompassed kitchen and dining services. The Old Dietary/Warehouse building was used as support space for the campus, mainly as heated storage. It currently houses a large cache of surplus furniture for use at all DCT sites, a workshop for Community Based Services, and other support functions necessary for operating the campus programs.

Many of AMRTC's facilities need maintenance or system upgrades to prevent building deterioration and to maximize their use for the future, most of which can be addressed with operating funds and/or the use of asset preservation. However, the scope and total cost of the work proposed for the Old Dietary/Warehouse exceeds the Department of Human Services' (DHS) ability to use either operating funds or asset preservation appropriation funding. Therefore, this project requires capital funding dedicated specifically to addressing the improvements outlined herein.

The Old Dietary/Warehouse is in very good structural condition; however, there is deferred maintenance estimated at \$6.8 million. During the 2018 legislative session, the Department of Human Services (DHS) was appropriated \$10 million in asset preservation. One of the projects completed on the asset preservation list was for envelope upgrades on the Old Dietary/Warehouse including cleaning and tuckpointing of the entire brick facade, window, and door replacement, rebuilding of the existing loading dock, and restoration of the metal cladding.

With the onset of the COVID pandemic, DCT centralized the purchasing and dispersing of personal protective equipment (PPE) and cleaning supplies. A small warehouse space in the Miller Building was used for storage and packaging/receiving of PPE and supplies. This was very successful in acquiring adequate PPE and cleaning supplies for all 200+ DCT sites during the early onset of the pandemic. Economic success was also realized in purchasing bulk orders versus multiple, smaller orders.

Project Timeline

Design - current to April 2024
Bid - July/August 2024
Construction - September 2024 to September 2026

Other Considerations

Impact on Agency Operating Budgets

This project will not impact operational budgets.

Description of Previous Appropriations

In 2017 the Legislature appropriated \$2.250 million for safety and security upgrades across the AMRTC campus.

Project Contact Person

(\$ in thousands)

St. Peter Office, Storage & Shop

AT A GLANCE

2024 Request Amount: \$7,000

Priority Ranking: 8

Project Summary: \$ 7 million is requested to predesign, design, construct, furnish and equip

a new Office, Storage and Shop Building at the St. Peter Campus. This request also includes the demolition of existing buildings to be replaced.

Project Description

This project will consist of predesign, design and construction of a new Office/Shop/Storage building to replace the following nine buildings on campus:

The new building will be approximately 17,000 square feet consisting of 2,000 square feet of office space, 5,000 square feet of heated shop space and 10,000 square feet of cold storage. The project will also include the demolition of the nine buildings mentioned above and may include the need for hazardous abatement.

Project Rationale

The St. Peter campus has been in existence for over 150 years. Throughout its history, buildings have been erected and demolished as needed and funded. Currently, there are 51 buildings on campus totaling over 1.1 million square feet of space. The buildings consist of hospital, residential, treatment, office, and storage space.

The current Grounds Crew office was built in 1935 as a garage. In the late 1960's, the garage space was converted into office space. The latest Facility Condition Assessment (FCA) rated the building in crisis. Eight additional garage and/or storage buildings were built between 1920 and 1968. These eight buildings had a poor or crisis FCA rating in 2021. The nine buildings are 17,525 square feet of space.

Project Timeline

Predesign and Design - December 2024 to December 2025

Bid - January 2026

Construction - April 2026 to April 2027

Other Considerations

This project will not increase the square footage on the St. Peter campus.

Impact on Agency Operating Budgets

The construction of a new Office/Shop/Storage Building is anticipated to reduce the overall cost of

the future operating budget for the campus. Cost reductions will be directly associated with new construction and energy efficient components.

Description of Previous Appropriations

Project Contact Person

(\$ in thousands)

Johnson Hall Demolition

AT A GLANCE

2024 Request Amount: \$550

Priority Ranking: 9

Project Summary: \$550,000 is requested in general fund dollars to demolish Johnson Hall on

the St. Peter campus. This request includes demolition, hazardous

abatement, utilities capping and disconnect, and site restoration.

Project Description

Johnson Hall is located on the lower campus of the St. Peter Regional Treatment Center. It was built in 1961 and first occupied in 1962. The building was originally designed and constructed as a dormitory for nurses that worked at the campus. Upon discontinuation of the nursing program, the building was utilized for a Chemical Dependency Program, followed by the Minnesota Security Hospital Transition Program. The building has been vacant since Spring 2017.

The building suffers from a multitude of design shortcomings in general and specific to potential uses by the campus. The result is relatively poor overall functional utility, with the following addressing functional issues:

- The design of the building is both multi-level and split-level. The result is a total of six different floor elevations with relatively small floor plates. Increased operational costs result from the necessary staffing of multiple floors. This contrasts with modern building design that is one level with centralized staff stations.
- Drawbacks of building design also include heightened safety and security concerns. Sightlines are not optimum in terms of monitoring and observing activity. Multiple narrow stairways generated security concerns and are also challenging to those with physical impairments.
- The design as a dormitory and the corresponding floor plan are not a good match to current space needs and best operational practices. Altering the floor plan is neither practical nor financially feasible.

In 2018, DCT declared Johnson Hall surplus to operational needs. In early 2019, an appraisal was conducted. Johnson Hall was appraised with a negative (-) \$200,000 value. The most recent Facility Condition Assessment (FCA) rated the building as "Poor" and a deferred maintenance of over \$5 million.

Project Rationale

The demolition of Johnson Hall would include hazardous surveying and abatement, capping and disconnect of utilities, above and below ground demolition of the building, tunnel removal and capping, sidewalk and paving removal, rubble grinding and disposal, fill material, landscape grading, topsoil and seeding.

Project Timeline

Bid - August 2024 Demolition - September 2024 Ground Restoration - October 2024

Other Considerations

Impact on Agency Operating Budgets

Funding this project will not impact operational budgets.

Description of Previous Appropriations

Project Contact Person

(\$ in thousands)

DCT Security Systems

AT A GLANCE

2024 Request Amount: \$7,000

Priority Ranking: 10

Project Summary: \$7 million is requested to improve patient and staff safety at Direct Care

and Treatment (DCT) facilities. This project will include the installation of new and upgraded essential security systems and electronic monitoring tools, and physical modifications to enhance the safety and security of our

staff and patients.

Project Description

This request includes funding to support the following activities:

- 1. Add new and upgrade/replace current security systems, communications and security monitoring systems at DCT facilities.
- 2. Design and construction for physical modifications to enhance security (ie. eliminate dead end corridors, enclose nurses stations, etc.) and modifications for existing building components to work with upgraded systems and tools (ie. door frames with magnetic locks).

Project Rationale

Direct Care and Treatment (DCT) provides an array of about 200 geographically dispersed specialized inpatient, residential and treatment programs and services for people with mental illness, intellectual disabilities, chemical dependency, brain injury and civilly-committed sex offenders that providers do not serve. This request will support security improvements and replacements at the facilities which will create a safe and secure environment.

DCT security systems and electronic monitoring tools are critical to safely operating a secure health care system, 24/7, 365 days per year. The needs of the population served within DCT require a variety of electronic systems and equipment to ensure the safety and security of the facilities, the clients/patients, the staff and the public.

These electronic systems and equipment include both software operating systems and the equipment those systems operate on. Many of the systems also require hardware operating equipment to function appropriately; and many of our facilities existing security system have failed, and continue to fail because of outdated systems or systems that are no longer supported.

In addition, several DCT sites and facilities need to be modified and fitted with modern security measures. This will require design, construction and installation coordination of the upgraded security systems and electronic monitoring tools.

Project Timeline

Design - August 2024 to January 2025 Bid - February/March 2025 Construction - April 2025 to April 2027

Other Considerations

There is no current budgetary appropriation to add new and upgrade/replace current security systems, communications and security monitoring systems at DCT facilities unless it is part of a larger bondable project.

Impact on Agency Operating Budgets

This project will have no impact on the operating costs for the program.

Description of Previous Appropriations

Project Contact Person

(\$ in thousands)

Cambridge Demolition

AT A GLANCE

2024 Request Amount: \$3,000

Priority Ranking: 11

Project Summary: \$3 million is requested to demolish the surplus buildings for the

Department of Human Services (DHS) Cambridge campus in order to

proceed with the sale of site.

Project Description

The Cambridge campus is a 63 acre site within Cambridge, Minnesota, with eight residential cottages and several support buildings. Currently, there are no inpatient programs operating on the site.

Each of the eight residential cottages is 39,956 square feet and is made up of six bedrooms, a kitchen, living, dining and restroom spaces. The cottages were built between 1998 and 1999 and have not been used since August 2014.

In addition, the Cambridge campus has several support buildings: the recreation building (a 29,542 square foot building that was built in 1919), the vocational building (a 24,872 square foot building that was built in 1961), and the administration building (a 52,228 square foot building built in 1955). All of the support buildings are currently vacant.

Project Rationale

The Department of Human Services' Cambridge campus is an underutilized asset with a complex history. This proposal seeks funding to conduct a feasibility study to determine future potential uses.

The Cambridge campus was originally established in 1923 as a colony for epileptics. In 1949, the facility's name changed from the Minnesota Colony for Epileptics to the Cambridge State School and Hospital – representing the common practice at the time to build more institutions for the care of patients with mental illness and developmental disabilities. In 1961, the site reached its peak population of 2,008 patients.

During the mid-1970's, the Cambridge State Hospital became more program-oriented, instead of medically oriented, with the attempt to involve every resident of campus in six hours of programming per day, five days per week. Population at this time was 658 residents. During the 1980s and 1990s, the Hospital, now known as the Cambridge Regional Treatment Center, continued downsizing and increased placement of patients into community-based programs. In June of 1999, the last patient was placed in the community and the hospital facility is officially closed.

The 1995 Legislature directed the Department of Human Services (DHS) to "develop a specialized model at the Cambridge campus to serve citizens of Minnesota who have a developmental disability and exhibit severe behaviors which present a risk to public safety. This service will have the capacity to serve between 40 and 100 individuals." In 1997, the Minnesota Extended Treatment Options (METO) was established on the Cambridge campus to provide specialized services for persons with developmental disabilities who presented a public safety risk. By 2000, the Cambridge campus provided space for 48 clients.

The Department of Human Services (DHS) officially closed the Minnesota Extended Treatment Options (METO) program June 30, 2011 as part of the Jensen Settlement Agreement. The Jensen Settlement Agreement is the result of a lawsuit filed against the DHS in 2009 alleging that residents of the Minnesota Extended Treatment Options (METO) program were unlawfully and unconstitutionally secluded and restrained. The Jensen Settlement Agreement allowed DHS and the plaintiffs to resolve the claims in a mutually agreeable manner. The Comprehensive Plan of Action outlines the path that the department will take to come into compliance with the terms of the agreement.

The Minnesota Specialty Health System (MSHS)-Cambridge replaced the METO program and began operation on July 1, 2011. Additionally, as part of the settlement, DHS agreed to close MSHS-Cambridge.

On Aug. 29, 2014, the last individual transitioned out of the Minnesota-Specialty Health System-Cambridge and DHS closed the facility as part of the terms of the Jensen Settlement Agreement.

The lone remaining occupant of the campus (dental office) has been closed and moved to another location as of July 2023. MNIT has removed their equipment and the campus is now vacant with all systems shut down (HVAC, elevator, electrical, etc.). Lawn maintenance and snow removal in critical areas will have to continue to keep the site presentable.

Project Timeline

Hazardous Abatement - July 2024 to September 2024 Demolition - October 2024 to April 2025 Site Remediation - May 2025 to June 2025

Other Considerations

Even though the site is vacated, funding is still required to maintain the site to keep it presentable (lawn cutting in the summer) and safety access (snow plowing in the winter). The Department of Administration has recommended this demolition in order to make a future sale viable.

Impact on Agency Operating Budgets

This project would reduce the overall cost of operations for DCT and allow the sale of the site to occur.

Description of Previous Appropriations

Project Contact Person