

**REPORT OF THE
DEPARTMENT OF CORRECTIONS**

Alternatives for Developing Additional Medical, Mental Health and Geriatric Facilities

**TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA**



HOUSE DOCUMENT NO. 57

**COMMONWEALTH OF VIRGINIA
RICHMOND
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October 16, 2006

MEMORANDUM

TO: The Honorable John W. Marshall
 Secretary of Public Safety

 The Honorable John H. Chichester
 Chairman, Senate Finance Committee

 The Honorable Vincent F. Callahan, Jr.
 Chairman, House Appropriations Committee

FROM: Gene Johnson
 Director of the Virginia Department of Corrections

RE: Interim Report – Item 387.H of the 2006 Acts of Assembly
 Virginia Department of Corrections

Introduction

Pursuant to Item 387.H of the 2006 Acts of Assembly, Moseley Architects and HKS Inc., both of Richmond, Virginia, have been contracted by the Virginia Department of Corrections to prepare this Interim Report describing our proposed work plan supporting the investigation and development of a potential statewide integrated healthcare program, specifically the “need for additional medical, mental health and geriatric facilities”.

Item 387.H. states:

“The Department of Corrections shall provide a planning report on alternatives for developing additional medical, mental health and geriatric facilities. The report shall consider the potential for cost savings through the expansion or replacement of the medical unit at Powhatan Correctional Center, the optimum mix of services and facilities at other facilities, the use of contract services, requirements for mental health services, requirements for geriatric services for older inmates, and financing options. Copies of an interim report, including a scope statement and work plan, shall be provided by October 16, 2006, and a final report by April 30, 2007, to the Secretary of Public Safety and the Chairmen of the Senate Finance and House Appropriations Committees.”

After several meetings and review sessions with our consultants and their analysis regarding the most efficient method to guide the investigation, they have developed a detailed Scope

and Work Plan, both of which are presented below for Committee review and consideration, in summary form:

The Scope

The scope of this study outlines the methodology the Design Team will follow to define the future facility needs in support of a Statewide Integrated Healthcare program. It is intended that this study will forecast the inmate healthcare facility needs for 2015 and 2021 based upon future inmate population projections provided by the Virginia Department of Corrections.

The Scope will include:

- Developing future dedicated inpatient correctional beds, which could consist of medical, mental health, infirmary and short-term outpatient beds;
- Developing future diagnostic and disease prevention/care units that could include surgery, radiology, medical oncology, dialysis, and physical rehabilitation;
- Design considerations for the physical plant to be responsive to natural and man-made disasters;
- Design considerations to maximize operational and functional flow by maximizing inmate/patient throughput and clinical staff efficiency;
- Logical conclusions to support the VADOC healthcare delivery model as substantiated by the study of alternatives, costings, transportation and financing models; and
- A recommended course of action supported by research, program development and graphic and costing models.

Of particular focus is the evaluation of centralizing inpatient care within a secured perimeter at an existing or a new correctional facility versus development of inpatient care services at multiple existing or new correctional facilities, based upon healthcare specialties. For example, should medical inpatient care be in one location while mental health care is located at a different facility? A second component of the project scope is to gather any existing information relative to current inmate healthcare and then forecast future facility needs based upon current and projected inmate populations and the healthcare delivery model deemed to be the most viable for VADOC.

The Design Team proposes the following Work Plan to guide the investigation and planning process.

Work Plan

Task 1 Organize and facilitate the planning process

- Organize the parameters of all subsequent tasks and clarify responsibilities and project goals.

- Task 2 Evaluate existing services
- Collect, review and categorize any available healthcare services currently provided: where? what? cases? costs? Collect like information from other state Departments of Corrections as well as national trending of care to the general populace.
- Task 3 Evaluate existing facilities
- Physical counterpart to Task 2 includes evaluating the physical conditions of those facilities and associated sites with healthcare units.
- Task 4 Define operating models
- Quantify existing healthcare service lines with the forecasted need; determine optimal healthcare delivery model and provide comparative cost models.
- Task 5 Forecast future volume projections
- Summarize information from information gathered in Tasks 3 through 4 and project future need based upon projected inmate population growth.
- Task 6 Analyze alternatives and prepare recommendations
- Analyze existing correctional healthcare facilities to determine the viability of reuse to meet future need; if a new facility is required, or possibly a combination of both. This task is a major milestone in the study and requires a decision by the responsible parties.
- Task 7 Space Programming
- Based upon the decision in Task 6, the Design Team will determine the room-by-room and department level square footage requirements that are necessary to support the healthcare delivery model.
- Task 8 Concept development
- The Design Team will prepare conceptual site and building “block” diagrams that show building entrances, internal circulation routes, department adjacencies and department sizes developed in Task 7 in both a horizontal (plan) and vertical (stacking diagram) format for any new facilities. Healthcare square footage requirements for existing facilities included in this study will also be noted.
- Task 9 Budget development
- The Design Team will develop project budgets for new construction and major renovation projects identified during Tasks 7 & 8 that will be combined with forecasted associated operational costs.
- Task 10 Implementation Schedule
- Define the project implementation schedule beginning with Task 1 through Task 12

Task 11 Identify financing/development options

- The Design Team will work with VADOC and external financial consultants as necessary to define available financing/development options.

Task 12 Final report document

- Summarize all data, analyses, recommendations, operational and space programs, graphic diagrams, project cost projections and implementation plan into a comprehensive summary document from which further action may be undertaken.

A Final Report documenting the results of the tasks outlined above, alternatives investigated, recommendations and development of the recommendations shall be delivered for consideration and action on or before April 30, 2007.