

Agency: Commerce, Community and Economic Development**Grants to Named Recipients (AS 37.05.316)****Grant Recipient: Southeast Alaska Regional Health Consortium****Federal Tax ID: 92-0056274****Project Title:****Project Type: Remodel, Reconstruction and Upgrades**

Southeast Alaska Regional Health Consortium - Front Street Clinic Relocation and Renovation

State Funding Requested: \$903,447
One-Time Need**House District: Juneau Areawide (3-4)****Brief Project Description:**

The SEARHC Front Street Clinic is in need of relocating to a large space and will need to renovated this new space.

Funding Plan:

Total Project Cost:	\$928,447
Funding Already Secured:	(\$25,000)
FY2013 State Funding Request:	<u>(\$903,447)</u>
Project Deficit:	\$0

Detailed Project Description and Justification:

The Front Street Clinic is an integrated health care clinic that serves individuals experiencing homelessness by providing medical, dental and behavioral health services. The demand for service in Juneau has increased significantly over the last four years: Between 2008 and 2011 the number of homeless people has more than doubled. At the Front Street Clinic combined medical and dental visits increased almost 50% from FY 2008 to 2011, jumping from 1,220 annual clients to 1,830.

The Clinic recently revised its scheduling procedures to allow time each day for walk-in clients; during the 1st quarter of FY 2012 this resulted in a 25% increase in clinic appointments (average of 222 seen each month).

Every service at the Front Street Clinic is at capacity. There is a 6-8 week waiting list for scheduled dental appointments and a 2 week wait for medical and behavioral health services. And, the demand for Clinic services is even higher than these numbers and backlog indicate because there are tests and services that cannot be offered due to facility space limitations. The expansion will include an increase in the entry and waiting area, an additional medical exam room, consolidation of laboratory and pharmacy functions and a separate sterilization and lab space for dental services along with an additional dental operatory.

The program analysis and resulting recommendations have two options: one based on the area required to minimally meet current needs (option 2), and the other based on the area required to meet current needs and offer limited, expanded services (option 1).

The area requirements identified in this report are based on an assessment of current Clinic space, function, interviews with clinicians, Architectural Graphic Standards (10th edition), and standard medical clinic codes and guidelines.

The existing gross area of the Front Street Clinic is 1262 SF. Option 1 would increase needed space to 3,080 SF; Option 2 to 2,646 SF.

There is no design yet for a proposed clinic expansion, however a professional cost estimation was conducted using current unit costs for the labor and materials required to build this type of facility as a tenant improvement in the Juneau area. Using this method, an expected cost of \$231.88/SF was established. Using a rough factor of 30%, expected soft costs as well as costs for fixtures, furnishings and equipment have been added to the construction costs to arrive at the total project budget for each option. Note that this is a budgetary estimate only (not based on a specific location) and should be considered a minimum as it assumes that all existing equipment will be salvaged and reused and is based on the minimum areas needed.

The proposed budget for Option 1 is \$928,447. The proposed budget for Option 2 is \$797,620.

Project Timeline:

Design and renovations will begin immediately upon securing funding and the final relocation of the clinic will occur between 4-6 months after start of the project.

Entity Responsible for the Ongoing Operation and Maintenance of this Project:

SEARHC

Grant Recipient Contact Information:

Name: Debra O'Gara
 Title: Director Planning and Development
 Address: 3245 Hospital Drive
 Juneau, Alaska 99801
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 Email: debrao@searhc.org

Has this project been through a public review process at the local level and is it a community priority? Yes No

SEARHC FRONT STREET CLINIC RENOVATION BUSINESS CASE : SUMMARY

The Front Street Clinic is an integrated health care clinic that serves individuals experiencing homelessness by providing medical, dental and behavioral health services. The demand for service in Juneau has increased significantly over the last four years: Between 2008 and 2011 the number of homeless people here more than doubled. At the Front Street Clinic combined medical and dental visits increased almost 50% from FY 2008 to 2011, jumping from 1,220 annual clients to 1,830.

The Clinic recently revised its scheduling procedures to allow time each day for walk-in clients; during the 1st quarter of FY 2012 this resulted in a 25% increase in clinic appointments (average of 222 seen each month).

Every service at the Front Street Clinic is at capacity. There is a 6-8 week waiting list for scheduled dental appointments and a 2 week wait for medical and behavioral health services. And, the demand for Clinic services is even higher than these numbers and backlog indicate because there are tests and services that cannot be offered due to facility space limitations.

The program analysis and resulting recommendations have two options: one based on the area required to minimally meet current needs (option 2), and the other based on the area required to meet current needs and offer limited, expanded services (option 1).

The area requirements identified in this report are based an assessment of current Clinic space, function, interviews with clinicians, Architectural Graphic Standards (*10th edition*), and standard medical clinic codes and guidelines.¹

The existing gross area of the Front Street Clinic is 1262 SF. Option 1 would increase needed space to 3,080 SF; Option 2 to 2,646 SF.

There is no design yet for a proposed clinic expansion, however a professional cost estimation was conducted using current unit costs for the labor and materials required to build this type of facility as a tenant improvement in the Juneau area. Using this method, an expected cost of \$231.88/SF was established. Using a rough factor of 30%, expected soft costs as well as costs for fixtures, furnishings and equipment have been added to the construction costs to arrive at the total project budget for each option. Note that this is a budgetary estimate only (not based on a specific location) and should be considered a minimum as it assumes that all existing equipment will be salvaged and reused and is based on the minimum areas needed.

The proposed budget for Option 1 is \$928,447. The proposed budget for Option 2 is \$797,620.

¹ Codes and guidelines considered include the American Counseling Association (ACA) and American Psychological Association (APA) ethical and safety guidelines, Health Information Protection Act (HIPA) patient confidentiality, and the Joint Commission (JCO) and AAAHC (Accreditation Association for Ambulatory Healthcare) accreditation guidelines for clinics, and Occupational Safety and Health Administration (OSHA) guidelines.

SEARHC FRONT STREET CLINIC RENOVATION BUSINESS CASE

“Because of limited space we have had to narrow our scope of services so we are in compliance with code.¹”

Program Analysis and Proposed Changes

The Front Street Clinic is an integrated health care clinic that serves individuals experiencing homelessness by providing medical, dental and behavioral health services. The demand for these services in Juneau has increased significantly over the last four years. Between 2008 and 2011 the number of homeless people in Juneau more than doubled from 203 to 562. At the Front Street Clinic combined medical and dental visits increased almost 50% from FY 2008 to 2011, jumping from 1,220 annual clients to 1,830.

The Clinic recently revised its scheduling procedures to allow time each day for walk-in clients; during the 1st quarter of FY 2012 this has resulted in a 25% increase in clinic appointments (average of 222 seen each month). And, these numbers do not include an additional 80 visits per month for clients coming every day to the easily accessible Clinic for non-medical attention such as obtaining a bus token, a coupon for a meal, or a hot cup of coffee.

Every service at the Front Street Clinic is at capacity. There is a 6-8 week waiting list for scheduled dental appointments and a 2 week wait for medical and behavioral health services. The demand for Clinic services is even higher than these numbers and backlog indicate because there are tests and services that cannot be offered due to facility space limitations.

The space constraints at the Front Street Clinic not only limit the spectrum of services offered and number of clients served but at times compromise the safety and security of both homeless patients and staff². Clinic limitations fall into two categories:

- Those preventing staff from providing services where doing so could cause code compliance or security concerns; and
- Those preventing staff from providing more or better service due to quantitative and qualitative space issues.

¹ Katie Cranor, Clinic Director

² Codes and guidelines considered include the American Counseling Association (ACA) and American Psychological Association (APA) ethical and safety guidelines, Health Information Protection Act (HIPA) patient confidentiality, and the Joint Commission (JCO) and AAAHC (Accreditation Association for Ambulatory Healthcare) accreditation guidelines for clinics, and Occupational Safety and Health Administration (OSHA) guidelines.

Medical providers and staff at the Front Street Clinic have arranged their space and practice to derive maximum benefit from crowded, cramped and inadequate space. Improvement and expansion of this facility is critical for the Clinic to meet not just future, but current, demand.

A room-by-room program analysis, coupled with proposed quantitative and qualitative changes, is summarized on Table 1, on the attached Existing Program and Proposed Changes diagram and described below.

Table 1. SEARHC - Front Street Clinic

Program Quantification

Program	Existing Area <i>in square feet</i>	Proposed (option 1). Additional area increase for expanded service <i>in square feet</i>	Minimum (option2). Required area increase to meet safety, code and architectural standards <i>in square feet</i>
Entry and Waiting Area	175	74	74
Reception Area	47	0	89
Restrooms	76	73	36
Medical Exam Rooms	204	100	0
Medical Lab and Pharmacy	0	0	115
Dental Operatories	233	100	45
Behavioral Health Specialist Office	82	0	59
Clinic Manager Office	0	0	120
Provider Offices	118	0	152
Meeting/Conference/Group Therapy/ Telemedicine & Polycom communication Room	0	0	270
Mechanical Room	116	0	-35
Storage Room	45	0	96
Sub Total	1096	347	1021
Total Existing Area (no circulation)	1096		
Total Proposed Area - Safety and Code (no circulation)			2117
Total proposed Area - Expanded Service (no circulation)		2464	
Circulation Area (25% for proposed, new construction)	166	616	529
Total Area: Existing	1262		
Total Area: Proposed (option 1)		3080	
Total Area: Minimum (option 2)			2646

Entry and Waiting Area

The existing space is approximately 175 SF. It serves as a waiting area for patients, a daytime refuge from difficult weather and occasionally as a drop-off and pick-up area for donated clothing and personal hygiene products. It is well known that the Clinic's restroom is available. The Front Street Clinic serves as a front porch and living room for a community that has none. At 175 SF, a comfortable and safe capacity is approximately five clients, there are currently six seats. The size limits capacity and overcrowding causing safety concerns for both staff and clients.

Proposed: The Clinic needs to accommodate eight to nine individuals at peak times. To meet this demand, the proposed space must be approximately 325 SF in this area. The clinic can operate with slightly less space, accommodating five to six individuals regularly with approximately 250 SF, however this is not optimal. Position in a street front setting with sunlight or natural light is desired.

Reception Area

The existing reception area is approximately 47 SF and barely accommodates one staff member. Two staff are required here to safely and efficiently manage arriving clients in the waiting area and facilitate the delivery of services. In addition this area should accommodate clerical equipment and activity, but currently cannot. Medical files are not secure in the current space.

Proposed: The minimum requirement per staff member for a reception area is 48 SF, which includes space for limited office equipment such as printers and scanners. This area must also accommodate medical files whose required space is equivalent to two side-by-side, 5 drawer, lateral files, and access space, totaling 28 SF. A copy machine (30" x 30") and access space is 12.5 SF. The total minimum space required for the reception area therefore is 136 SF.

Increase the current area from 47 SF to 136 SF to accommodate two staff, medical files and office equipment and position it to control the entry from the street to the waiting room and from the waiting room to the service areas. This increase represents the minimum required.

Restroom

Provision of safe, sanitary and private restrooms for patients and staff is an essential service that is not being provided in the current clinic. The existing facility has a single restroom for both patients and staff, is not ADA compliant, and has a single medical shower that cannot be easily accessed. The bathroom's location provides little privacy. A single restroom is inadequate to meet the demands of clients and staff. Ailing clients can tie up the facility, forcing others, including staff, to visit nearby businesses to use their bathrooms until a biohazard crew can clean the facility.

Proposed: Provide separate bathroom facilities for clients and staff. The Clinic can serve eight to nine guests plus staff at any one time. Locking, single fixture unisex restrooms are the practical solution for facilities of this nature. Two, and preferably three, restrooms are needed

(two for clients and one for staff). At least one bathroom must have a medical shower and eyewash station. Secure depository for urine and other samples is needed.

Medical Exam Rooms

The Front Street Clinic has two medical exam rooms, which are adequately sized if the current burden of medical supply and secure pharmaceutical storage can be relocated. A third exam room is needed to provide a triage function, whose equipment and access requirements are different from and compete with those required for exam rooms. When demand is low, though inefficient, it is acceptable to conduct triage work from an exam room, but when demand is high, particularly during times of crisis, this function either displaces treatment, or is forced to take place in the waiting room which is inefficient, and potentially harmful to staff and clients.

Proposed: A third exam room organized to serve primarily as a triage area/function. Additional, separate spaces for medical supply and secure pharmaceutical storage.

Medical Lab and Pharmacy

Currently, the facility has a lab space so inadequate it can often only be useful for storage. The space is adjacent and open to the facility's main corridor, very small and lacks security and privacy making it impossible to offer some lab tests/procedures while remaining in code compliant. The existing pharmacy is a secure cabinet located in one of the two exam rooms. When the second exam room is in use this means the security that pharmacy areas require can be difficult to achieve. Vaccines are stored in a small refrigerator unit in the break room. The autoclave is in a dental operatory.

Proposed: Consolidate laboratory and pharmacy functions in a single location that is adequately sized to accommodate the security, testing, diagnostic, and sterilization functions and equipment that the Clinic requires to serve its patients.

Dental Operatories

Dentistry and denture construction services have a profound and productive impact on homeless individuals; having teeth can make the difference between being selected or denied a job, and socially can have a huge effect on quality of life. The Front Street Clinic has two dental operatories in a shared space without separate sterilization or lab quarters. One of these operatories is used almost exclusively for cleaning, and the second is inadequate to meet the demands of general dental treatment. The space is small making it difficult for the dentist and dental assistant to work efficiently in tandem. The sterilization and denture area crowd the operatory. There is a 6-8 week waiting list to get dental services; if an additional operatory existed funding for the services of an additional dentist could be pursued – but the added space must come first.

Proposed: Separate sterilization and lab space, and an additional dental operatory.

Behavioral Health Office

The Front Street Clinic's behavioral health office doubles as the clinic manager's office and is too small to accommodate either function. It does not provide a comfortable and safe spatial relationship between client and therapist, does not offer a code required means of egress for the therapist and has no natural light (good for any function, but especially helpful in a behavioral health environment).

Proposed: The clinic manager needs a small separate office where paperwork and communication can be secure and separate. The behavioral health clinician's office should be sized to accommodate three people (a third provider is commonly brought in for combined consultation), be located to allow secondary egress and natural light is desired.

Meeting/Conference/Group Therapy/Telemedicine & Polycom communication Room

There is no space in the Front Street Clinic to accommodate meeting, conferences, teaching, Tele-medicine/SEARHC polycom communication, or larger therapy needs. A broad range of services that would increase the effectiveness and success of behavioral and medical services could be offered if the space to do so were available. It is common for several providers to team to collectively address the needs of homeless clients and there currently is not space at the Clinic for this. In addition, there is no place to conduct telemedicine consultation nor communicate via the SEARHC polycom system. There is no capacity for conferences or meetings nor a break area for staff. One multi-purpose room could meet all these needs, as well as offer a room for small group therapy or instructional clinics.

A typical conference room/break room provides roughly 27 SF per person. The minimum number of individuals to accommodate for the success of this proposed function is 10. Therefore, the proposed conference room would be at least 270 SF.

Proposed: A minimum 270 SF space to serve multiple purposes as a meeting-conference-group, telemedicine/polycom area, therapy-small classroom, and as a staff break room.

Provider Offices

Currently, as many as five providers share a 118 SF office. For a single professional office 100 SF is considered the minimum area. The current space also holds the clinic's refrigerator for immunization pharmaceuticals and is used, for lack of another option, as the break room. The current condition has no storage, no privacy, and very little room to work.

It is expected that providers can share office space, which reduces the area requirement from that for an office, to that of a work station which is 48 SF per provider. If equipment and storage are shared the required space can be reduced further, to roughly 25 SF per provider. Space for circulation and for shared office equipment and storage must be added to that needed for work stations.

Proposed: Separate the cold storage and break functions, and increase the size of the provider's shared office from 118 SF to 270 SF. This will not provide separate discreet offices for

individual providers but will provide enough space to create internal boundaries and meet provider's individual record-keeping, professional and storage needs.

Clinic Manager Office

The existing facility has no clinic manager's office. Current conditions have the behavioral health expert doubling as manager (two full time jobs) and both functions taking place in a small single office as noted above. This is not sustainable.

The minimum area for a manager's office able to accommodate the manager and periodically up to two others (when private consultation is required), is 120 SF.

Proposed: The addition of an approximately 120 SF private office for the Clinic Manager.

Circulation Space

Circulation - A minimum allocation for circulation space for the facility is approximately 15% of the gross area. However, this figure does not include the additional circulation space required for an integrated multi-purpose clinic facility to separate functions and provide patient privacy and staff security. The minimum area required for private and secure circulation is 25% that of the gross facility area.

Proposed: Addition to the gross minimum area required to accommodate the program elements described herein of 25% of that area.

Storage

The facility currently has no dedicated storage space. Storage demands have taken over all available space, to the point of displacing other functions and occasionally causing code compliance issues. In addition to the expected storage load of a medical/dental facility, the clinic serves as an informal drop-off and pick-up point for clothing, donated toiletries, and more. While not a primary function, due to the Clinic's downtown location and walk-in ambiance there is a demand for these items and many businesses and individuals spontaneously and generously help provide them. This allows the Clinic to provide this secondary benefit effortlessly.

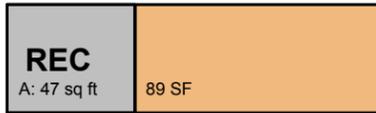
Proposed: Approximately 140 SF of storage space is needed, divided into two reach-in closets, and one 72 SF walk-in closet. The latter may also serve to house mechanical equipment, pending the equipment space demands for an expanded facility.

Mechanical

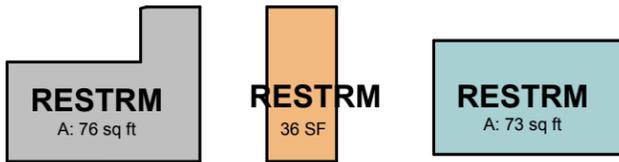
The current mechanical room accommodates HVAC as well as dental mechanical equipment and serves as the custodial closet for the clinic. The size of this space is adequate to meet the demands placed upon it. The space provided for mechanical equipment can be reduced, with any balance given over to storage.



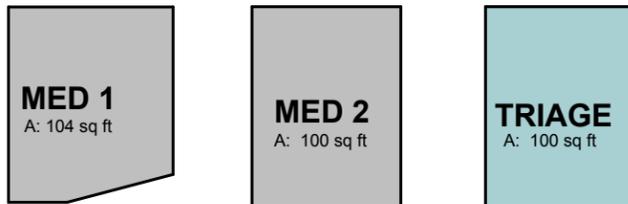
ENTRY AND WAITING AREA 323 SF TOTAL



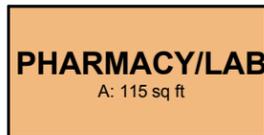
RECEPTION AREA 136 SF TOTAL



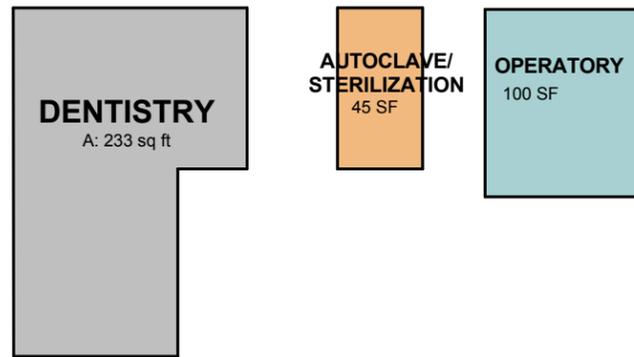
RESTROOM 185 SF TOTAL



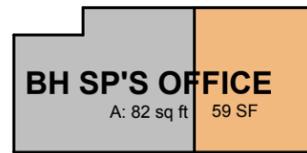
MEDICAL EXAM ROOMS 304 SF TOTAL



MEDICAL LAB AND PHARMACY 115 SF TOTAL



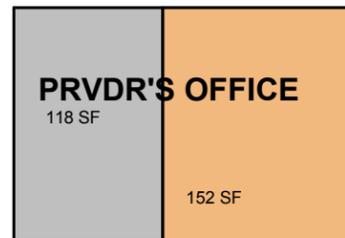
DENTAL OPERATORIES 378 SF TOTAL



BEHAVIORAL HEALTH SPECIALIST OFFICE 141 SF TOTAL



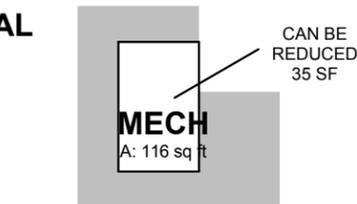
CLINIC MANAGER'S OFFICE 120 SF TOTAL



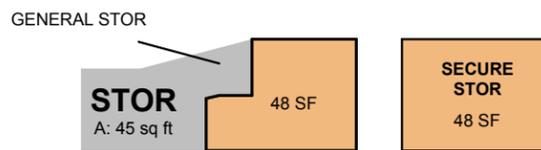
PROVIDER'S OFFICES 270 SF TOTAL



MEETING/VIDEO CONF/ GROUP THERAPY/ TELEMEDICINE 270 SF TOTAL



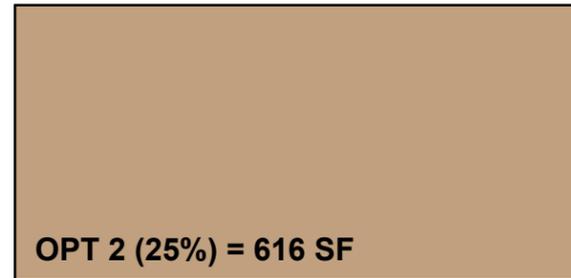
MECHANICAL 81 SF TOTAL



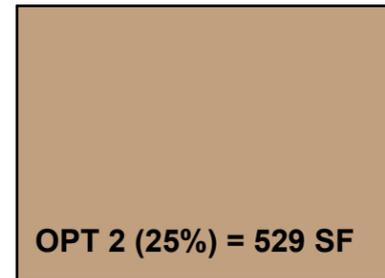
STORAGE 141 SF TOTAL



EXISTING - 166 SF

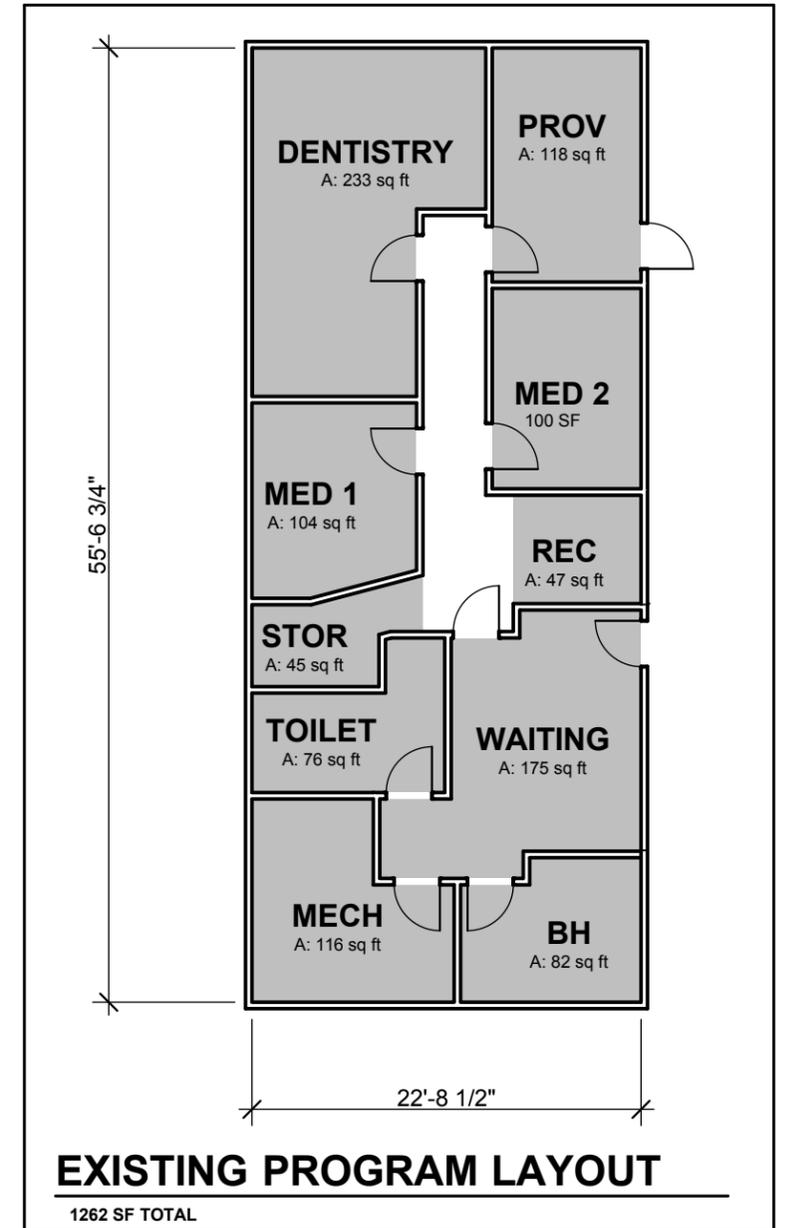


OPT 2 (25%) = 616 SF



OPT 2 (25%) = 529 SF

CIRCULATION



AREA SUMMARY	
TOTAL SF EXISTING:	1262 SF
TOTAL SF OPTION 1:	3080 SF
TOTAL SF OPTION 2:	2646 SF

LEGEND	
	EXISTING FRONT STREET CLINIC AREA - 1096 SF TOTAL
	PROPOSED AREA - NEEDED FOR SECURITY, SAFETY AND CODE RELATED IMPROVEMENTS 1021 SF TOTAL
	PROPOSED AREA - EXPANDED SERVICE - 347 SF TOTAL

EXISTING PROGRAM AND PROPOSED CHANGES





Executive Offices
3245 Hospital Drive, Juneau, AK 99801
907-463-4000 - www.searhc.org

March 30, 2012

The Honorable Dennis Egan
State Capitol Rm 510
Juneau, AK 99801

The Honorable Cathy Muñoz
State Capitol Room 403
Juneau, AK 99801

Representative Beth Kerttula
State Capitol Room 404
Juneau, AK 99801

RE: Front Street Clinic Relocation & Renovation

Dear Representatives Muñoz and Kerttula, and Senator Egan;

I want to express my gratitude and appreciation for all that you do for the City of Juneau and the State of Alaska.

I would also like to share with you a very exciting development concerning the Front Street Clinic. As you know from my staff, SEARHC has been seeking new space for the clinic. I am happy to report that we have made an offer to the Central Council Tlingit and Haida for a lease option on the vacant first floor space in the Andrew Hope Building (AKA: the ANB Hall). Yesterday afternoon we received verbal confirmation that our offer has been accepted and we will sign the papers next week.

With the securing of space for the clinic to move into, we would like your assistance to help us secure capital budget funds from the State Legislature by including our allocation request for \$928,447 into the Senate Capital Budget bill. It is my hope that this full amount can be included.

Please contact me at 907-463-4000 or Debra O'Gara, Director of Planning and Development at 463-6685 or debra.ogara@searhc.org if you have any questions.

Sincerely yours,



Charles Clement
President and CEO

By email and hand delivery