

**Facility Improvement Construction Initiative Appendices**

Facility Improvement Construction Initiative Appendix 1 – Avenal State Prison Program Document

Facility Improvement Construction Initiative Appendix 2 – California Training Facility Program Document

# APPENDIX 1

# Health Care Facility Improvement Program California State Prison System

## Avenal Facility Master Plan Report

San Francisco Pelican Bay State Prison

Susanville ★ High Desert State Prison  
★ California Correctional Center



California Medical Facility  
CSP Solano  
CSP San Quentin  
Deuel Vocational Institution

Sacramento ★ Folsom State Prison  
★ CSP Sacramento  
Vacaville ★ Mule Creek State Prison  
Stockton  
San Francisco  
Tracy ★  
Jamestown  
Sierra Conservation Center

Chowchilla ★ Valley State Prison For Women  
★ Central California Women's Facility  
Salinas  
Fresno  
Correctional Training Facility  
Salinas Valley State Prison  
Pleasant Valley State Prison  
**Avenal State Prison**  
California Men's Colony  
San Luis Obispo  
Bakersfield  
California Correctional Institution  
CSP Los Angeles County  
Santa Barbara  
CSP Corcoran  
Substance Abuse Treatment Facility and State Prison  
North Kern State Prison  
Wasco State Prison

Los Angeles, Chino, Riverside  
California Institution for Men  
California Institution for Women  
California Rehabilitation Center  
Elythe ★ Ironwood State Prison  
★ Chuckawalla Valley State Prison  
Calipatria State Prison  
San Diego  
El Centro ★ Centinela State Prison  
Richard J. Donovan Correctional Facility

**CALIFORNIA  
PRISON HEALTH CARE  
RECEIVERSHIP CORP.**



August 28, 2007

Vanir Construction Management, Inc.

Health Care Facility Improvement Program  
California State Prisons – Avenal State Prison

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**1. Signature/Approval Page**

Signature below represents that individual and/or department has been involved in the process and facility assessment resulting in the projects and spaces defined in Facility Master Plan and confirms that such projects have been reviewed and do not conflict with other projects and master plans in the planning process at this Institution.

**Avenal State Prison**

**Warden**

\_\_\_\_\_  
Lonnie Watson

**HCM/CMO**

\_\_\_\_\_  
Dr. Erica Weinstein

**DoN**

\_\_\_\_\_  
Maureen Mahoney

**CSO/CHSA**

\_\_\_\_\_  
Kathy Jones

**California Prison Health Care Receivership**

**Custody**

\_\_\_\_\_  
Joe McGrath

**Custody**

\_\_\_\_\_  
Steve Cambra

**Nursing**

\_\_\_\_\_  
Rosa Vazquez

**California Department of Corrections & Rehabilitation**

**CDCR**

\_\_\_\_\_  
Robin Dezember

**Mental Health**

\_\_\_\_\_  
Doug McKeever

**Dental**

\_\_\_\_\_  
Dr. William Kuykendall

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### 2. Executive Summary

In order to support the improvement in the quality and delivery of medical care at Avenal State Prison, allowing medical staff to be empowered to be able to see more patients, in a more timely manner, within high quality modern facilities that may effectively facilitate the recruitment of high quality medical professionals to the Institution a Facility Assessment and Master Plan has been prepared. The Master Plan defines the improvements needed to develop adequate facilities that can support the delivery of constitutionally adequate medical care to the inmate population and meet Goal F and Objective F.1 of the Receivers Plan of Action.

*Goal F: Create new clinical and administrative space to provide a safe environment for staff and patients based on the new clinical process redesign and on projections of future bed capacity needs.*

*Objective F.1: Plan, design and build clinical space to provide a safe environment for staff to deliver appropriate patient care at all levels.*

The process for developing and preparing this Facility Master Plan was initiated with a Kick-off meeting on July 9, 2007 in which all stakeholders, user groups, and CDCR departments (Mental Health and Dental) and court monitors (Coleman and Perez) were represented. A facility assessment of existing medical spaces was completed and multiple progress coordination meetings were held to define and develop the needed projects to achieve the defined goals and objectives. Additional coordination meetings were held with CDCR Mental Health and Dental representatives and court monitors to review progress, coordinate needs and include, as appropriate, needed spaces that aligned with Medical's project objectives; such needs are outlined in the Master Plan with cost impacts broken out separately.

The Facility Master Plan and the projects identified within have been separated into three project types, Emergency, Interim and Permanent to best reflect the action plan to provide immediate space to provide immediate relief and more interim projects that fully address the needs of the health services program. These project types are defined as follows:

Emergency Projects (60 – 90 days): Those projects which have been deemed to require the quickest time frame to supply immediate clinical space relief.

Interim Projects: Those projects which provide additional and "new" clinical space to address interim space for an unspecified period of time. These projects utilize various means, including a series of modular trailers installed on concrete slab on grade foundation systems, which are intended to support the various health care functions needed until which permanent solutions may be identified and implemented.

Permanent Projects: Although none of these projects were initially intended as permanent solutions, there are some needed Interim projects that lend themselves to be developed with

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permanent construction methods due to their integration within existing buildings or the ease of construction of its inherent building type.

It is anticipated that upon authorization for implementation of the projects identified in this Facility Master Plan, that all projects will be completed within one and a half years.

A summary of each project described in detail within the body of this report is included in the chart below.

Project	Description	Outcome	Budget	Schedule
<b>Emergency (60 – 90 days)</b>				
1.	5 <sup>th</sup> Wheel Trailer Clinics	a) Locate (2) 5 <sup>th</sup> wheel trailers next to Bldg. #395 b) Provide (6) 5 <sup>th</sup> wheel trailer units, and locate (1) 5 <sup>th</sup> wheel @ each Facility Clinic	a) Provides (4) new clinical exam rooms to support exist. Infirmery b) Provides (2) temp. clinical exam rooms to relieve space need until Project #5 is complete.	<u>Project:</u> a) \$400,000 b) \$1,200,000  a. Arrive 10/15/07 Occupy 11/2/07 b. Arrive 2/4/08 Occupy 2/15/08
2.	Temporary Admin. Modular	Lease (2)12'x60' modular trailer(s) and locate next to existing Infirmery bldg. #390.	Relocate admin: staff work space to trailer to free up space in Bldg #390 and #395 to convert into clinical uses.	<u>Project:</u> \$70,000  • Arrive 11/16/07 • Occupy 11/30/07
3.	Infirmery Modifications, Building #390	Relocate Sergeant and convert space for specialty minor procedure	Provides specialty minor procedure room and use by TTA for overflow.	<u>Construction:</u> \$35,000  <u>Project:</u> \$55,000  Complete 11/16/07
4.	Temp. Conversion of Isolation Rooms	Convert (2) OHU contact isolation rooms to temporary specialty clinical exam.	Provides (2) specialty exam rooms for new providers. Isolation rooms to be returned to originally intended use upon completion of Interim projects.	Institution has performed this work.  Complete

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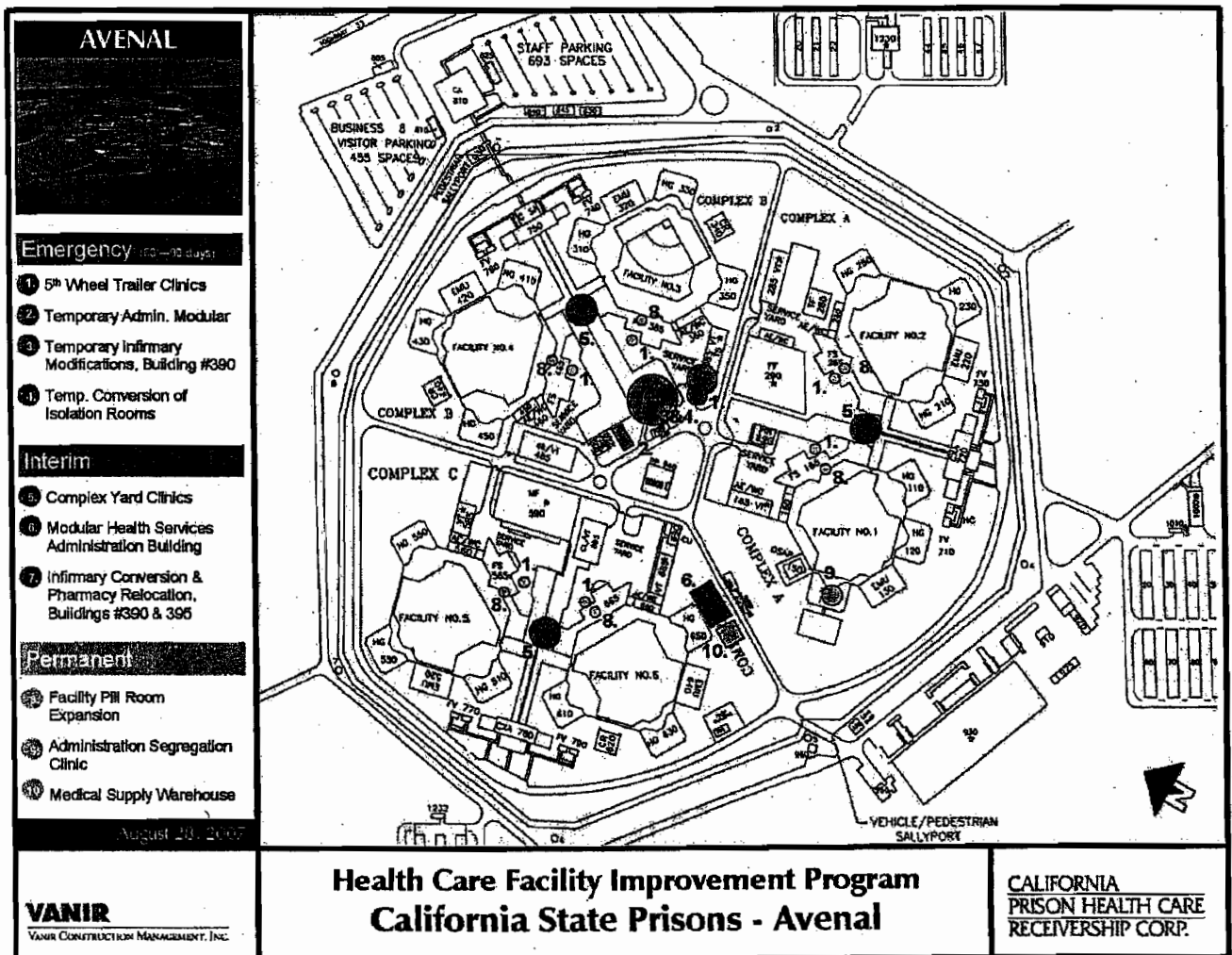
Project	Description	Outcome	Budget	Schedule	
<b>Interim</b>					
5.	Complex Yard Clinics				
	a. Medical Only b. Mental Health addition.	a. Construct modular clinic space for each Facility within a "Complex" bldg. model. b. Add needed M.H. clinic space to the clinic building.	Provides required clinical exam and treatment rooms and clinical support areas to service Facility based inmate populations within a centralized "Complex" bldg solution	Construction: a) \$7,000,000 b) \$2,150,000  Project: a) \$9,800,000 b) \$3,010,000	Complete 06/13/08
6.	Modular Health Services Admin. Bldg	Construct modular office space for non-clinical health services management administrative staff.	Provides consolidated administrative office space for non-direct health services admin., allowing Infirmary bldg. to be utilized for direct inmate clinical functions.	Construction: \$2,700,000  Project: \$3,800,000	Complete 05/16/08
7.	Infirmary Conversion & Pharmacy Relocation	Conversion of vacated admin. space (project #6) into clinical exam and support.	Provides consolidation of clinical and clinical support functions where patient services are provided.	Construction: \$540,000  Project: \$760,000	Complete 09/19/08
<b>Permanent</b>					
5b	Complex Yard Clinics	Construction of 'Permanent' clinic space for each Facility within a "Complex" bldg. model. 3 bldgs a. Medical Only b. Addition for M.H. space	Provides identical outcome of Project 5 with an additional building useful life.	Construction: a) \$7,400,000 b) \$2,900,000  Project: a) \$10,400,000 b) \$4,100,000	Complete 09/19/08
8.	Facility Pill Room Expansion	a. Enlarge (E) Pill Room with adjacent alcove area b. Convert (E) clinical exam to 2 <sup>nd</sup> Pill room and Pill Window	Provides 2 <sup>nd</sup> Pill window to increase pill distribut. from 2-lines to 4-lines and provides sufficient space for Pharmaceutical blister pak type prescriptions	Construction: \$88,000  Project: \$125,000	Complete 11/14/08
9.	Ad. Seg. Clinics	Construct sick call and clinical exam room within interior of housing block. a) Medical b) Mental Health	Provides clinical exam and support space within the block and reduces need for inmate movement and escorting	Construction: a) \$950,000 b) \$630,000  Project: a) \$1,350,000 b) \$890,000	Complete 03/21/08



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Project	Description	Outcome	Budget	Schedule
10. Medical Supply Warehouse	Construct a pre-engineered metal building within the secure perimeter.	Provides necessary warehouse space to allow supply inventory, control and efficient access and distribution to clinics.	Construction: \$1,700,000 Project: \$2,400,000	Complete 04/18/08

The following graphic outlines the proposed location of each of the projects identified above.



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In analyzing Project #5- Complex Yard Clinic, the team considered proposing the use of "permanent" construction, in lieu of the more interim level of "modular" construction. In performing this comparison and evaluation, the team determined that although the additional time required for construction was only 3½ months and the construction cost increase result was \$1,150,000 (or increase of \$1,690,000 – project cost, that besides the increase in building useful life, there was no additional functional space benefit with the upgrade to permanent construction. If increased operational and functional use is the primary basis for determination of which type of construction to proceed with, the team can not justify the added expense or time. It should be noted that the planned location for construction of the Interim Complex Yard Clinics is the ideal location for such a facility and development of centralized health services delivery. Should more permanent construction be desired in the future, proceeding with this interim modular solution in its proposed location will constrain placement of the permanent building in this location and may cause the permanent building's functional and operational use to be less than desirable.

### Mental Health Components:

Although the scope of work for the CPR at California's State Prisons does not include providing additional needed clinical or administrative space for the Mental Health and Dental components at the Institution, Vanir has nonetheless been requested by the Receivership to coordinate with these departments and document any unplanned or unmet needs and to additionally determine how and if such needs can be integrated into the plans of the Receivership projects. The planning team has incorporated this request into the planning process and those needs that could appropriately be combined with the projects defined by the medical needs assessment have been included and accounted for within this Facility Master Plan.

**In Summary**, the total time to complete all (10) proposed projects is within the program implementation goal of 18 months from project approval. The construction cost (hard cost of construction) for the (10) projects totals \$17,423,000 with a project cost (soft costs associated with planning, design and construction) of \$23,860,000. In a program of this nature with multiple projects, we additionally recommend that a 15% Program Contingency be included. This additional contingency can be utilized for unanticipated conditions and needs of the health services teams during the implementation of the projects as well as potential unforeseen site and infrastructure conditions that may not have otherwise been able to be accounted for during the planning phase of the Program. With this Program Contingency added, the Total Facility Master Plan for Avenal State Prison would result in a Program Budget of \$27,500,000.

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### 3. Project Narratives

This section describes each of the ten (10) projects listed below and included in this Facility Master Plan through definition of the existing facility condition and identified need, a description of the project scope, a graphic conceptual plan of the proposed improvement(s) and a tabular space program.

Project #:

1. 5<sup>th</sup> Wheel Trailer Clinics
2. Temporary Administrative Modular
3. Infirmary Modifications, Building #390
4. Temporary Conversion of Isolation Rooms
5. Complex Yard Clinics
6. Modular Health Services Admin.
7. Infirmary Conversion & Pharmacy Relocation, Buildings #390 & 395
8. Facility Pill Room Expansion
9. Administrative Segregation Clinic
10. Medical Supply Warehouse

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### Project #1: 5<sup>th</sup> Wheel Trailer Clinics

#### A. Facility Condition & Need

Existing Condition: The Avenal State Prison's existing medical facilities suffer primarily from a shortage of specialty and general clinical exam room space. This shortage has caused a tremendous backlog in the number of inmates requesting medical attention, and as a result, they are not receiving medical attention in a timely manner.

Currently each existing facility yard clinic within the Institution includes one nurse sick call room and one provider exam room to provide general health services to an inmate population from 1,000 to 1,400 inmates. With only one exam room each for nurse screenings and provider examinations, the backlog of medical requests continues to increase.

Need: There is an emergency need to create immediate clinical exam rooms and nurse sick call rooms to assist in the ability of the medical staff to see and adequately provide needed health services to the inmate population at each of the six facilities.

#### B. Project Description

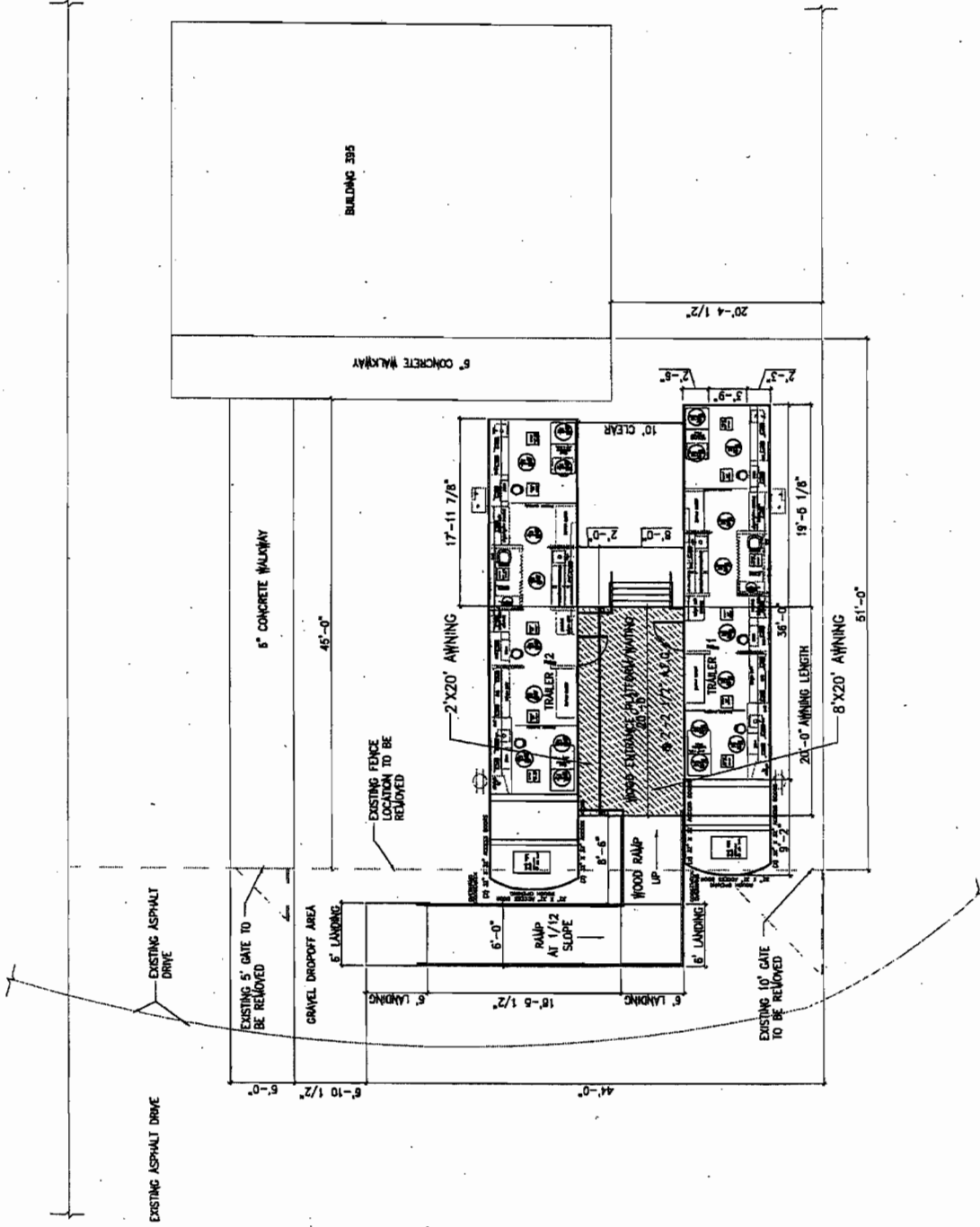
CPR, Corp. issued an RFP to identify a vendor to manufacture and provide custom medical clinic space within a mobile 5<sup>th</sup> wheel trailer. Multiple locations within the secure perimeter are identified for installation of these custom 5<sup>th</sup> wheel trailer clinics. The two included in the initial RFP will be installed within the secure core of the institution near Building 395. These two trailer clinics will provide (4) new clinical exam rooms for use by the institution for both general clinical exam and specialty exam as needed. An additional RFP has been initiated to supply six (6) additional 5<sup>th</sup> wheel trailer clinics for installation of (1) at each of the six facility yard clinics. These additional trailer clinics will provide space relief with the availability of (2) new clinical exam rooms for general exams directly in the yard without requiring custody escort out of the facility to the secure core or Infirmary Building #390. This addition of immediate clinical space will relieve the inadequate number of existing clinical exam spaces until which time the Complex Yard Clinics, Project #5, can be completed.

#### C. Concept Plan

A concept plan of the configuration of the initial two 5<sup>th</sup> wheel trailers is included here.



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**PROJECT #1 (Emergency) 5th WHEEL TRAILER CLINICS - SPECIALTY**

SCALE: 1/16" = 1'-0" 8/28/07

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### Project #2: Temporary Administration Modular

#### A. Facility Condition & Need

Existing Condition: Avenal's shortage of clinic exam space inside the prison is most evident inside the Infirmary Building #390. In addition to direct inmate clinical space, non-clinical administrative office space occupies portions of the same building that otherwise could be utilized for direct inmate clinical functions.

Need: In order to create more clinic space inside the Infirmary Building #390, there is a need to move some of the administrative support staff out of the building, creating suitable permanent space that may be utilized with minimal upgrades as much needed specialty exam and clinical support spaces.

#### B. Project Description

This project proposes to lease two (2) 12'x60' single-wide modular buildings as are typically used by construction teams as office space when implementing construction projects. These modular buildings will allow the six (6) supervising RNs and three (3) scheduling staff to be relocated from the Infirmary Building #390 and the spaces reassigned to facilitate additional specialty exam rooms and a soiled utility room that will support infection control needs. These modular buildings will additionally provide space for administrative functions that are currently utilizing Building #395 that will be necessary to be vacated to allow for its remodel for use as the Institution's Pharmacy (Refer to project description #7 for narrative related to existing inadequate space provisions of the Pharmacy within Building #390).

Both of these modular buildings will remain on a raised foundation with trailer and wheels intact, secured and grounded for temporary use as offices. The buildings will be located east of the Infirmary Building #390 and have connections for power, telephone, data, water and sewer to support the use by staff.

Upon completion of Projects #5, Complex Yard Clinics, and #6, Modular Health Services Administration Building, these leased modular buildings will then be disconnected, utility connections removed and capped at grade and removed from the Institution.

#### C. Concept Plan

No Concept Plan has been developed due to the temporary nature and ease of implementation of this project.

#### D. Space Program

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PROJECT #2 (Emergency): Temporary Administration Modular

Function	Number of People	Comments:
		All Temporarily Displaced admin. staff will work in the emergency, double-wide trailer until their new space is made available.
<b>Administration Offices</b>		
D.O.N.	1	
SRN II	6	
Off-Site Scheduling Nurses	4	
On-Site Scheduling Nurses	4	
UM Nurse	2	
Office Tech	1	
<b>Administration Support</b>		
Electrical	1	
Copy Alcove	1	
Restroom	2	
<b>Functional Net Subtotal (NSF)</b>		
<b>Total Building Area (GSF)</b>	<b>1,440</b>	<b>2-Single wide Modular Trailers 12x60 ea.</b>

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### Project #3: Infirmary Modifications, Building #390

#### A. Facility Condition & Need

Existing Condition: The space currently utilized by the Plata Sergeant in the Infirmary is a space originally used for clinical services, but has since been designated for his use when his assignment was made. The existing Infirmary in its present configuration and use has no excess space in order to create any new specialty exam rooms, as every room in the building is currently assigned and in use.

Need: In order to adequately serve the total spectrum of healthcare specialty needs of the inmate population of Avenal State Prison on-site without the need for additional off-site transportation, the Infirmary Building needs to be able to expand either physically, or through space re-allocation to transfer some non-direct medical functions out of the building, relocating them elsewhere within the Institution. This project provides for minor improvements to existing spaces, made available for direct inmate clinical use through the implementation of Project #2, for use as additional specialty exam rooms and a soiled utility room. This project and Project #4 will allow the Institution to move forward and contract with much needed providers to come to the institution to see patients that they would not previously been able to accommodate due to a lack of exam space for their use.

#### B. Project Description

The areas to receive modification under this emergency project are located within the existing 16,200 sf Infirmary Building #390 located within Avenal State Prison inside the secure perimeter. The project consists of multiple minor improvements and modifications to allow immediate increase in the existing number of specialty examination rooms available to incoming specialty providers for which examination space is not currently or otherwise available.

The Infirmary building is Type II-FR. The exterior walls are constructed of tilt-up concrete with interior walls constructed of either metal studs or CMU depending upon the use and the type of security requirements. Many institution health service functions occur in this building including, OHU (out-patient housing unit) with in-patient care, Pharmacy, TTA (Triage Treatment Area), X-ray, Laboratory and Lab Draw, Specialty Clinical Exam Rooms, Infirmary Support and Inmate Holding, and health services administration areas. Not all of these areas within the Infirmary will be addressed under this Emergency project #3.

In order to immediately facilitate the ability to create more space for specialty exam within the Infirmary Building #390, non-essential administrative space will be relocated into leased single-wide modular buildings (Project #2) located east of the Infirmary Building on a temporary basis. Three offices will be freed up through the relocation of 6- SRNs and the On-site scheduling group



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that currently occupy these spaces and functions shifted to open suitable existing rooms with existing sinks to be available for clinical exam.

A descriptive list of the planned modifications to the Infirmary as included in this projects has been included below. The numerical modification reference is included in this project's concept plan also included following this narrative: [Note that Item 1 is associated with Project #4.]

2. Conversion of Room 135- Sergeant's Office to Specialty Exam/Minor Procedures
  - a. Provide data, tel and fax lines into Room 173 for use by Sergeant (sergeant is being relocated to this room).
  - b. Room 135 requires no modification work to function as an exam room.
3. Conversion of Room 151- Dental Lab to Specialty Exam/Minor Procedures.
  - a. Enlarge opening and revise Door and HM Frame from 3'x7' to 4'x7'. Modification is within a 1-hr wall assembly and must be treated as such. Door and frame must have 20 min. label AND vision panel.
  - b. Relocate (E) Dental storage materials to Room 140. (Relocation agreed to by CDCR Dental and Chief Dentist.)
4. Return Room 152- Storage back to a Soiled Utility Room.
  - a. Relocate stored optometry equipment and glasses to Room 139. Store remaining prosthetics and supplies in converted Room 151-specialty exam within existing cabinetry.
5. Relocate Lab Supervisor and O.T. to Room 138 to allow room 156 to be used as a Specialty Exam Room.
6. Conversion of Room 139 to Optometry Specialty Exam
  - a. Enlarge opening and revise Door and HM Frame from 3'x7' to 4'x7'. Modification is within a 1-hr wall assembly and must be treated as such. Door and frame must have 20 min. label AND vision panel.

### **C. Concept Plan**

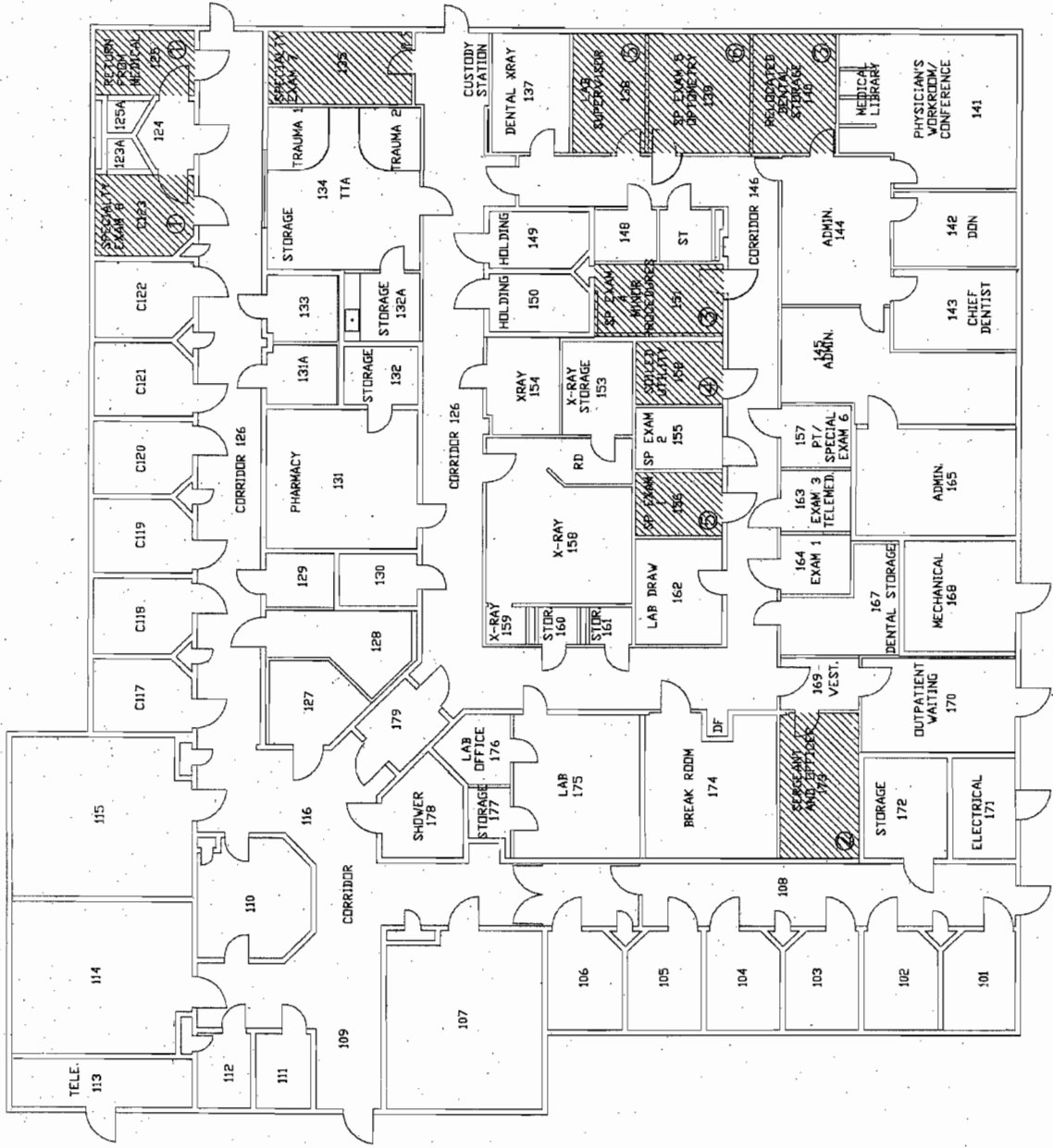
A concept plan of the existing Infirmary Building #390 is included here to graphically show the spaces being addressed and reallocated to provide for increased direct clinical use.

### **D. Space Program**

Refer to attached space program.



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**PROJECT #3 (Emergency) INFIRMARY MODIFICATIONS, BUILDING #390 FLOOR PLAN - Phase 1**

SCALE: 1/16" = 1'-0" 8/28/07

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### Project #4: Temporary Conversion of Isolation Rooms

#### A. Facility Condition & Need

Existing Condition: Rooms 123 and 125 within the OHU wing of Building #390 are contact isolation rooms that have been identified as rarely used and possibly available to address the immediate specialty clinical need on an emergency basis to provide immediate relief. The existing Infirmary in its present configuration has no excess space in order to develop new specialty exam rooms, as every room in the building is currently being used.

Need: In order to adequately serve the total spectrum of healthcare specialty needs of the inmate population of Avenal State Prison on-site without the need for additional off-site transportation, the Infirmary Building needs to be able to expand either physically, or through space re-allocation to transfer some non-direct medical functions out of the building, relocating them elsewhere within the Institution. This project in combination with Project #3 will allow the Institution to contract with much needed providers to come to the institution to see patients that they would not previously been able to accommodate due to a lack of exam space for their use.

#### B. Project Description

This project provides for minor improvements to the two contact isolation rooms and their physical separation from the OHU wing for use as a specialty exam room and return from medical. The emergency conversion of rooms 123 and 125 into specialty exam rooms has been completed by the Institution, and as such no further work is planned.

A descriptive list of the planned modifications to the Infirmary as included in this project has been included below. The numerical modification reference is included in this project's concept plan as included following the narrative of Project #3.

1. Temporary Conversion of OHU Contact Isolation Rooms:

#### C. Concept Plan

Refer to Concept Plan as included with Project #3 narrative.

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### Project #5: Complex Yard Clinics

#### A. Facility Condition & Need

Existing Condition: As stated in the narrative for Project #1, the existing medical facilities suffer from a shortage of clinical exam room space capacity which additionally impacts the number of healthcare providers at this institution and their ability to meet the medical needs of the inmate population in a timely manner.

Currently each existing facility yard clinic within the Institution includes one nurse sick call room and one provider exam room to provide general health services to an inmate population from 1,000 to 1,400 inmates. With only one exam room each for nurse screenings and provider examinations, the backlog of medical requests continues to increase.

The capacity of each of the six facilities at Avenal State Prison varies depending upon the overcrowding implemented. The following inmate capacities for each facility was provided at the July, 9<sup>th</sup> Kick-off meeting.

Facility	Current Inmate Capacity
Facility #1	1,083 inmates
Facility #2	1,382 inmates
Facility #3	1,382 inmates
Facility #4	1,382 inmates
Facility #5	1,181 inmates
Facility #6	1,199 inmates

For the month of June, 2007, the following data reflects the number of Form 7362s received, processed and referred to a provider.

Facility	Total # of 7362's Received	Average # of 7362's received per day	# of 7362's referred to Provider per day
Facility #1	739	43 per day	28 referred
Facility #2	630	30 per day	18 referred
Facility #3	765	45 per day	30 referred
Facility #4	1028	40 per day	26 referred
Facility #5	630	30 per day	20 referred
Facility #6	750	35 per day	23 referred

Need: In order to address and meet the medical needs of the inmate population within each facility, it is necessary to expand the capacity of the Institution's healthcare facility component, in order to have the ability to provide quality healthcare services in a timely manner. Such facility expansion, increasing the number of exam rooms and necessary clinical support spaces, will

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Additionally assist in the ability of the Institution to attract and retain qualified licensed primary healthcare providers. When developing spatial solutions to increase clinical areas, a need to centralize staff as much as feasible was identified to provide for effective and efficient management of staff and service delivery to the inmates. Providing a space model that will allow for separation of inmate populations, but yet allow for centralization of staff begins to address the needs of a peer network that can support staff development, training and effective management and supervision. Additionally, considering co-locating of medical and mental health services within the same building compliments the centralization concept and allows for more efficient use of health services support staff in the delivery of services. The need for a strategically placed clinic building, which will allow for the sharing and cooperation of medical and mental health staff between the two separate facility yard clinics, will be able to provide quality healthcare services, while still keeping costs in check by sharing a single building and optimizing staff utilization.

Based on reasonable rates and the # of form 7362's being received and referred, the team estimated that 1 to 2 nurse sick call rooms and 2 to 3 provider rooms would be required. It was determined that a total of 4 exam rooms would be ideal, this would allow sufficient space for both nurse sick call and provider examinations, acknowledging that the number of 7362's most probably will reduce with the decrease of repeated forms being submitted due to extensive backlog that creates untimely examinations. The team additionally acknowledged that as the inmate populations age, there may be a greater need for medical exam and treatment that, in some respects, may compensate for the reduction of repeat form submissions resulting in a similar number of screenings and examinations that is currently being experienced.

In addition to exam rooms, a lab draw station was added to each facility of the complex clinic. Currently inmates are escorted to the Infirmary, Building #390, for lab work which takes time and places unnecessary escort demand on officers. By placing a lab draw area within the facility clinic, inmate escorting and movement is decreased and sampling can occur with quicker processing and test results for provider diagnosis.

### **B. Project Description**

The project sites for the three new modular complex clinic buildings are located within the secure perimeter of Avenal State Prison, each located in the same location within each complex. The clinics will each be located at the end of the parallel fenced walkways behind the Security Administration Building for each complex, just beyond the point where the walkway for both facilities splits off toward each Inmate Facility Yard. The medical clinic footprint for each of the three complexes within the institution would be identical with a square footage of 4,320 s.f. Should the space needs of CDCR Mental Health be added to the medical Complex Yard Clinic building the clinic building would vary by Complex. The modular complex clinic building between Facilities #3 and #4 in Complex B would have an area of 6,480 s.f. and include the addition of two group rooms, six interview rooms and two psych. tech interview rooms, while the modular complex clinic buildings between Facilities #1 and #2 and between Facilities #5 and #6 would be the same with an area of 5,760 s.f. and include the addition of one group room to be shared

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between the sides of the clinic, four interview rooms and one psych. tech interview room. The reason for the differing space needs required for Mental Health is a result of the inmate population needs of the S&Y population that is housed in Facilities #3 and #4 of Complex B.

The existing site topography for each of the (3) complex clinic buildings will be slab-on-grade construction, and as existing site drainage is through the center of the proposed location for each complex clinic building slab, site grading and a moderate amount of fill under the central portion of the slabs will be necessary to redirect the natural drainage fall lines around both sides of the proposed slab foundation.

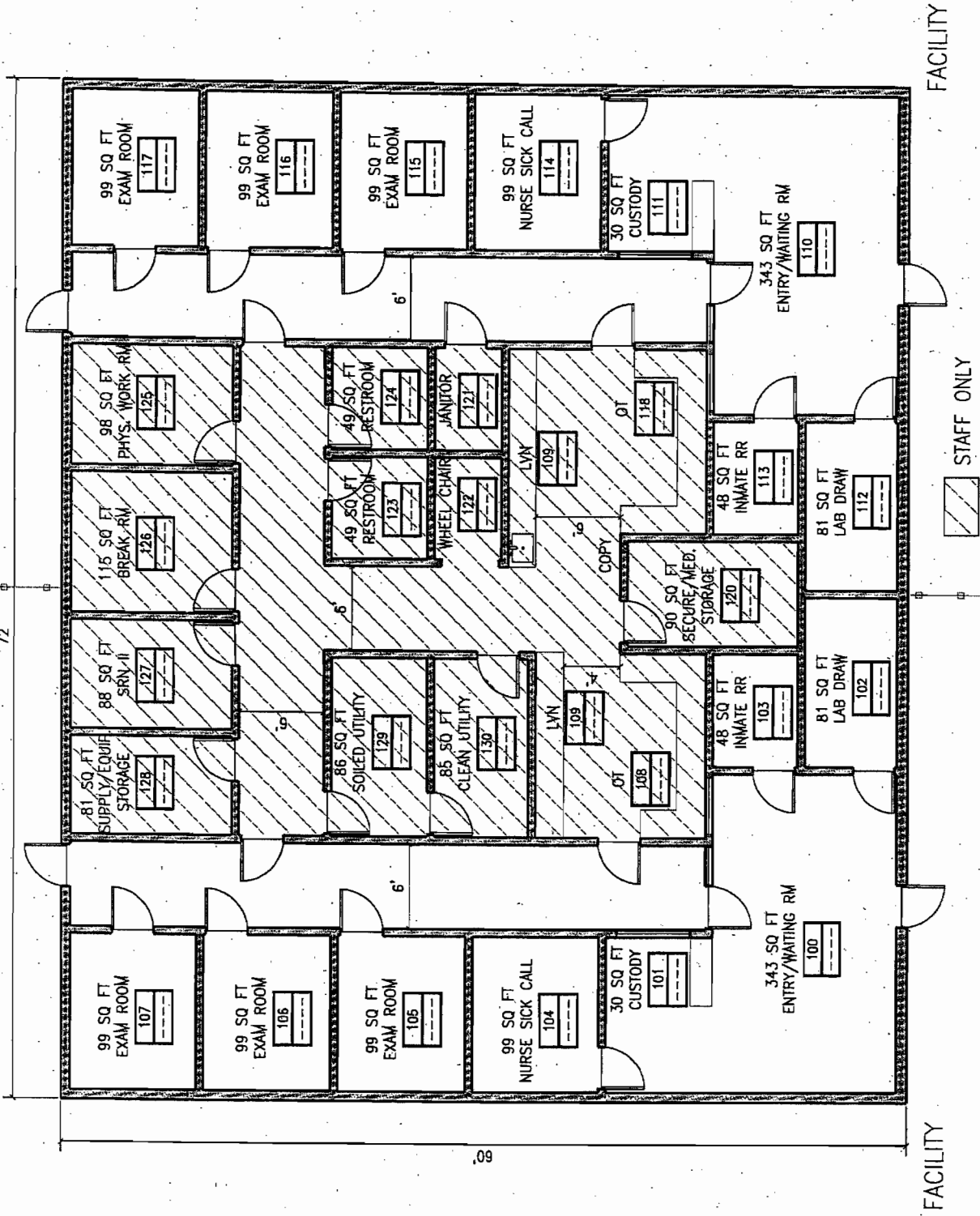
These clinic buildings are referred to as "Complex" yard clinics due to the sharing of staff/medical support space in each building between the two separated clinics serving each of the inmate population groups of their respective facilities. Each of the three clinic buildings are externally one structure, but internally house two distinctly separate inmate clinics, while sharing common medical staff and medical support spaces which are tucked in between both clinics.

### **C. Concept Plan**

Three concept plans have been included within this project narrative to describe the various building configurations and scenarios available to address the specific needs of each complex depending upon if the building is constructed solely for medical's use or if mental health's space needs are authorized for inclusion in this project scope.

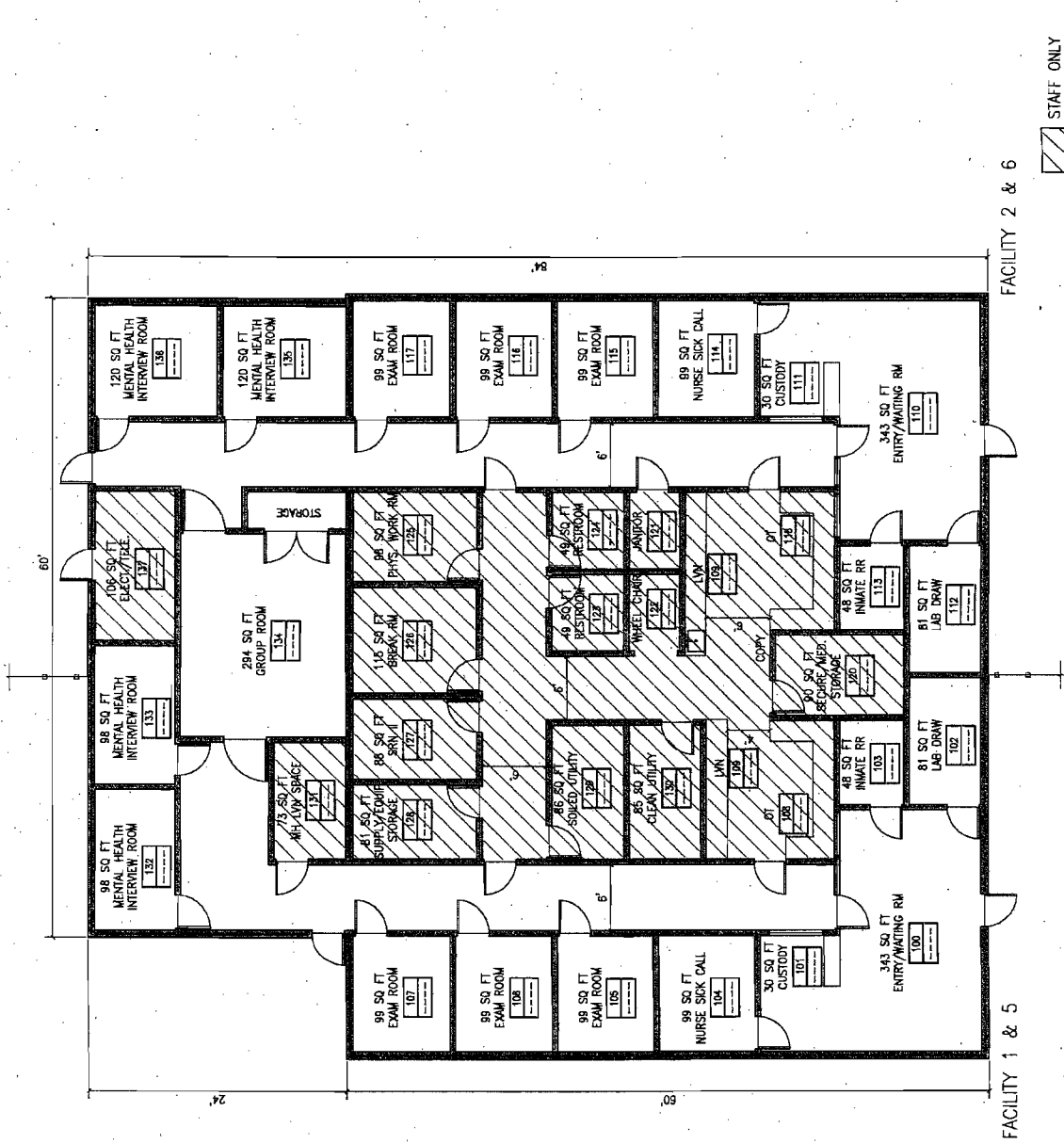
### **D. Space Program**

A space tabulation has been included to define the spaces included in each of the complex yard clinic schemes. The spaces required to support the medical clinic are included in the tabulation as the base building with the additional space need for Mental Health has been tabulated separately and by the Complex within which it is required.



PROJECT #5 (Interim) COMPLEX - CLINIC MODULAR (Medical only option)

SCALE: 3/32" = 1'-0" 8/28/07

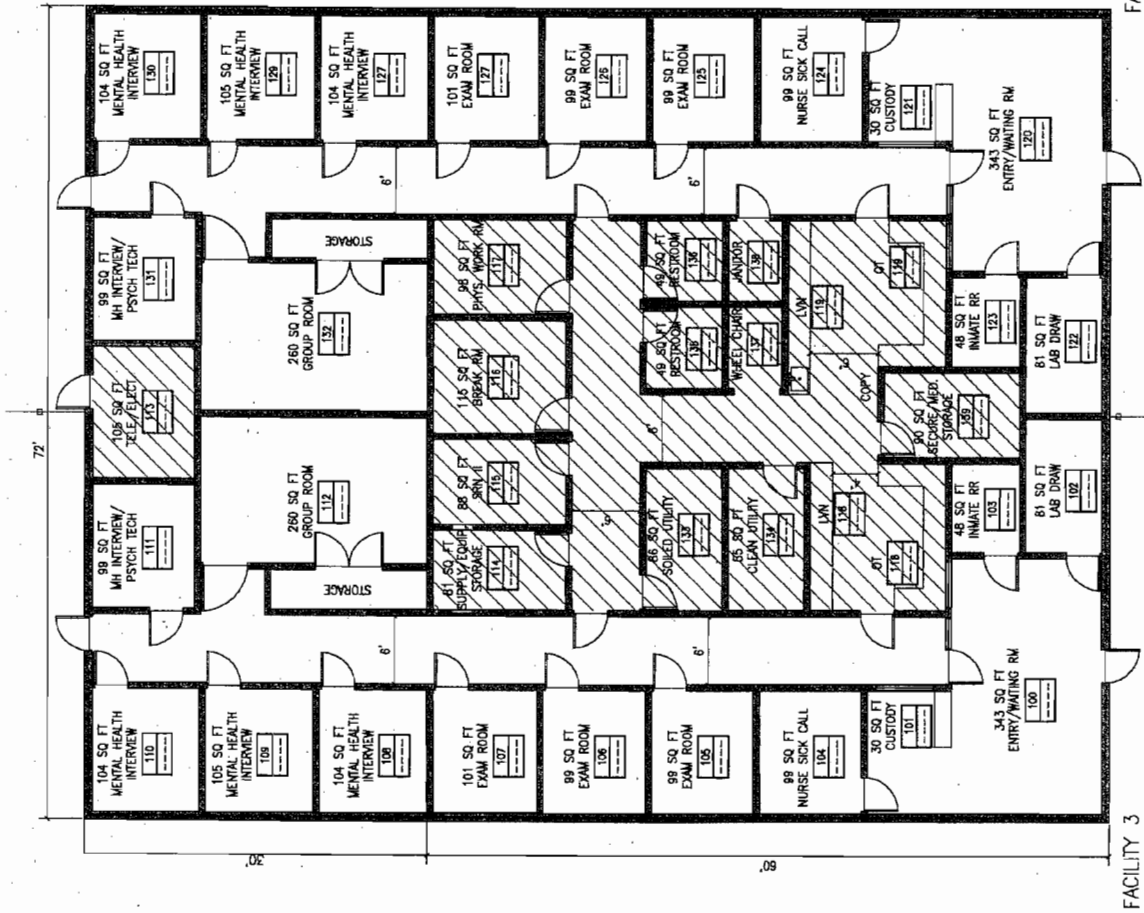


STAFF ONLY

PROJECT #5 (Interim) COMPLEXES A&C-CLINIC MODULAR FLOOR PLAN (Medical w/ Mental Health)

SCALE: 3/32" = 1'-0" 8/28/07





FACILITY 4 STAFF ONLY

**PROJECT #5 (Interim) COMPLEX B- CLINIC MODULAR FLOOR PLAN (Medical w/ Mental Health Option)**

SCALE: 3/32" = 1'-0" 8/28/87

Health Care Facility Improvement Program  
California State Prisons- Avenal

PROJECT # 5 (Interim): Complex Yard Clinic

Function	New Space			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Clinical: Complexes A, B, &amp; C</b>				
<b>Medical Examination/Treatment Service Area</b>				
Waiting	2	298	596	
Inmate Toilet	2	48		
Custody station	2	82	164	
Nurse Sick Call	2	99	198	
Lab Draw	2	81	162	
Secure/Medication storage	1	90	90	Storage of sharps, syringes, medications, etc.
Physician Workroom	1	98	98	
Exam / Treatment Room	6	99	594	Portable Telemedicine capabilities
LVN Workstation	2	60	120	
SRN II	1	88	88	
Supply Equipment Storage	1	81	81	
Soiled Utility/Work Room	1	86	86	
Clean Utility/Workroom/Storage	1	85	85	
Stretcher/wheelchair storage	1	50	50	2 stretchers=35 sf + 3 chairs=15 sf
Women's staff Restroom	2	49	98	Shared in building
Men's staff Restroom	2	49	98	Shared in building
Janitorial Closet	1	34	34	utility sink, mop holder, shelving for supplies and space for cart/equip.
Office Tech	2	68	136	
Break room	1	115	115	
<b>Functional Net Subtotal Clinic (NSF)</b>			<b>2,893</b>	
Circulation/Efficiency Factor (34%)			978	
<b>Total Functional Area (GSF)</b>			<b>3,871</b>	
Building Grossing Factor (.12%)			449	
<b>Total Building Area (GSF)</b>			<b>4,320</b>	<b>Medical Only</b>

Health Care Facility Improvement Program  
California State Prisons- Avenal

PROJECT # 5 (Interim): Complex Yard Clinic

Function	New Space			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Mental Health Complex A &amp; C</b>				
Mental Health Interview Room	2	120	240	
Mental Health Interview Room	2	98	196	
Mental Health Lyn Workspace	1	73	73	
Mental Health Group Room	1	294	294	
Storage	1	39	39	
Electrical/Tele.	1	106	106	
<b>Functional Net Subtotal (NSF)</b>			<b>948</b>	
Circulation/Efficiency Factor (40%)			379	
<b>Total Functional Area (GSF)</b>			<b>1,327</b>	Mental Health Complex A/C only
Building Grossing Factor ( 9%)			113	
<b>Total Building Area (GSF)</b>			<b>5,760</b>	<b>Medical + Mental Health Complex A/C</b>

<b>Mental Health Complex B</b>				
Mental Health Interview/Psych Tech.	2	99	198	
Mental Health Interview Room	6	104	624	
Mental Health Group Room	2	260	520	
Storage	2	63	126	
Electrical/Tele.	1	105	105	
<b>Functional Net Subtotal (NSF)</b>			<b>1,573</b>	
Circulation/Efficiency Factor (22%)			351	
<b>Total Functional Area (GSF)</b>			<b>1,924</b>	Mental Health Complex B only
Building Grossing Factor ( 12%)			237	
<b>Total Building Area (GSF)</b>			<b>6,480</b>	<b>Medical + Mental Health Complex B</b>

## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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### Project #6: Modular Health Services Administration Building

#### A. Facility Condition & Need

Existing Condition: The majority of the administrative staff which are slated to be relocated into this new building are currently located in the Infirmary building. If the need for direct inmate clinical space in the Infirmary were not so great, it might make sense to leave the Administrative staff there. But such is not the case, and since there is no need to place the administrative staff with the medical staff in order for both groups to do their day to day work, moving the administrative staff out of the Infirmary Building #390 should have little to no affect on the functionality of either group.

Need: Once the decision was made to move the administrative staff out of the Infirmary, it created the need for new office space to house the relocated staff. The use of modular trailers as a response to that need is desirable for two reasons. The use of modular construction will allow the relocation to occur more quickly than permanent construction, and the first cost of the moduls is less than for permanent construction. The modular construction can easily be used for 15 to 20 years before a different or permanent solution will be needed. Finally, the relocation allows the various administrative department heads to be consolidated into a single structure, which will allow for more interaction and information sharing between the various administrative staff.

#### B. Project Description

The project site is located within the secure perimeter of Avenal State Prison, approximately 400 feet north of the existing vehicular sallyport entry gate along the sallyport entry road, on the west side. It will be adjacent but not physically connected to the proposed new Medical Supply Warehouse building. The project site is a relatively flat area with adequate existing sheet drainage towards the road. A minimal amount of fill soil material may be needed to be imported to the area of the building to minimally raise the finish floor approximately 2" above average adjacent grade, to minimize any potential for heavy rains to introduce water into the building at the primary entrance points of the building.

The new 5,040 s.f. Modular Administration Building will contain general office and support space, including approximately 700 square feet for a much needed Staff Training Room that may be effectively utilized by all departments of health services within the Institution. This training room is planned to accommodate up to 45 staff for training sessions and is also configured to allow division into two smaller conference rooms for smaller meetings and groups.

The interim Modular Health Services Administration Building will house offices for the following medical staff: the Associate Warden for Healthcare, the Director of Nursing, the Healthcare Manager and Chief Medical Officer, the Chief Dentist, the Healthcare Program Specialist J's for Dental, Mental Health and Medical, the Chief Physician, the CHSA, the Chief of Mental Health,

## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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the Plata lieutenant, the Nurse Instructor, the Public Health Nurse and Infection Control Nurse, the health services budget analyst and contract analyst, and a medical transcriber. The building will also house 8 office technicians that support the administrators located within this building, a waiting area and office support, copy and storage.

Upon occupancy of the completed new Modular Health Services Administration building, the existing interior space vacated within the existing Infirmary building will be renovated into medical exam rooms and direct clinical support services.

### C. Concept Plan

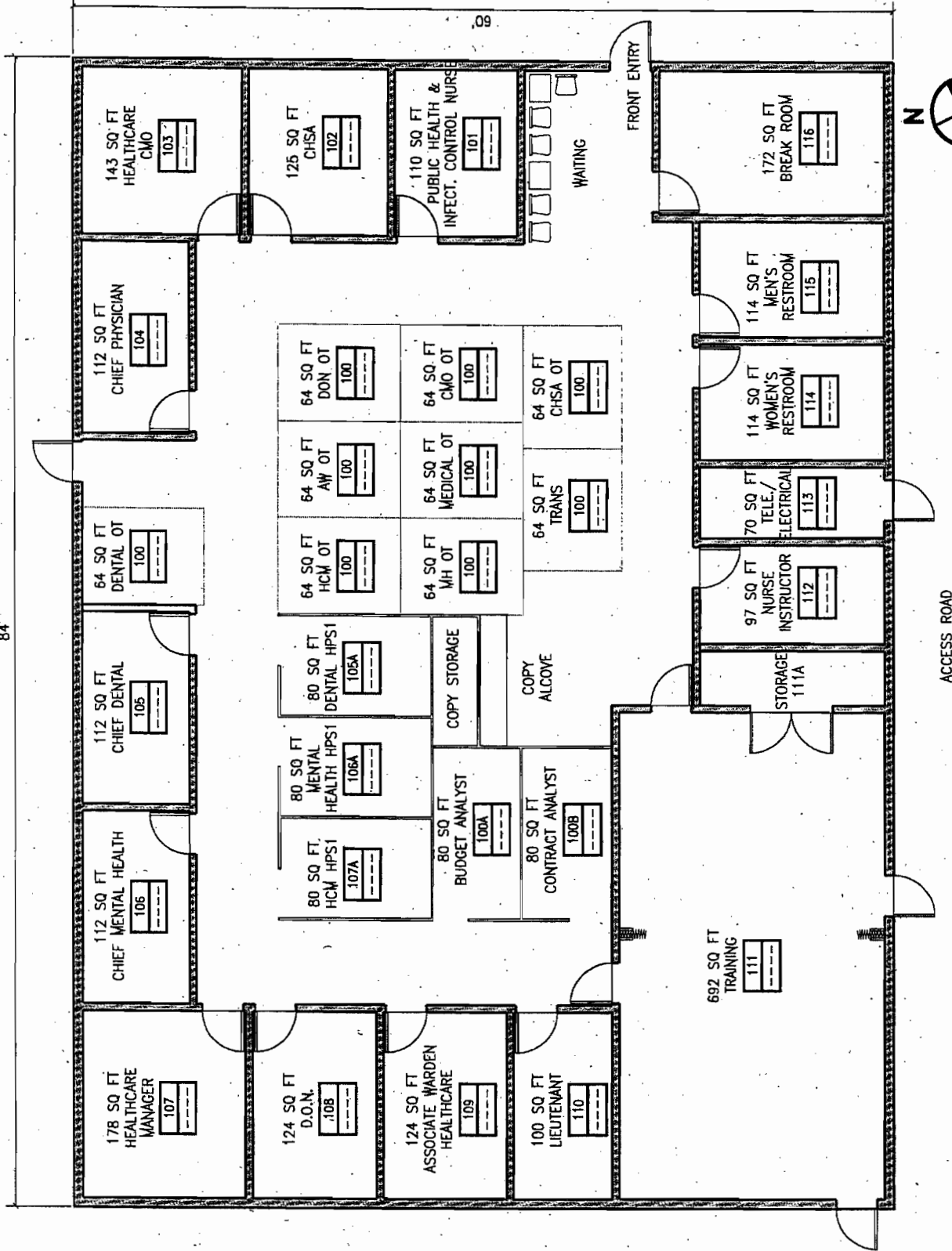
A concept plan has been included within this project narrative to describe the proposed layout of a modular building. The concept assumes use of a standard modular building component internally customized to provide the space configuration desired by the staff to respond to the functional use of the building.

### D. Space Program

A space tabulation has been included to define the spaces included in this building.



PROJECT #6 (Interim) MODULAR HEALTH SERVICES ADMIN. BUILDING



Health Care Facility Improvement Program  
California State Prisons- Avenal

PROJECT # 6 (Interim): Modular Health Services Administration Building

Function	New Space			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Executive Administration</b>				<b>Outpatient Clinic and Nursing Units. No inmate access.</b>
Waiting Area	1	30	30	Waiting for two people at 15 sf/person. Collocate with Medical Secretary. Required by licensing
Health Care Manager (HCM)	1	178	178	Private Office
HCM HPS1	1	74	74	Partially Private Office, Low partition office; Supports HCM
Director of Nursing (DoN)	1	124	124	Private Office.
Chief Support Ops (CSO) (Correctional Health Services Administrator)	1	125	125	Private Office.
Associate Warden - (Health Services)	1	124	124	Private Office
Chief Medical Officer (CMO)	1	143	200	Private Office
Chief Primary Care MD	1	112	112	Private Office
Chief Dentist	1	112	112	Private Office
Dental HPS1	1	74	74	Partially Private Office, Low partition wall;
Office Tech (OT)(Dental)	1	64	64	Open Office.
Office Tech (OT)	1	64	64	Open Office.
Office Tech (OT)	1	64	64	Open Office.
Office Tech (OT)	1	64	64	Open Office.
Office Tech (OT)	1	64	64	Open Office.
Office Tech (OT)	1	64	64	Open Office.
Office Tech (OT)	1	64	64	Open Office.
Lieutenant	1	100	100	Private Office.
Chief Mental Health	1	112	112	Private Office.
Health HPS/Mental	1	80	80	Open Office.
Mental Health (OT)	1	64	64	Open Office.
<b>Administration Staff</b>				
<b>Medical</b>				
Public Health Nurse & Infect. Control Nurse	1	110	110	Enclosed office; Common work space; 2 workstations + circ.; indiv. Carrels to divide workspaces for sound isolation
Nurse Instructor	1	80	80	Prive office near training room.
Contract Analyst	1	80	80	Cubical Office
Budget Analyst	1	74	74	
Medical Transcriber	1	64	64	

Health Care Facility Improvement Program  
California State Prisons- Avenal

PROJECT # 6 (Interim): Modular Health Services Administration Building

Function	New Space			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Staff Support Area</b>				<b>Locate near entry to Admin. Area</b>
Training room	1	700	700	
Break Room	1	161	161	Table for six. Counter and sink, with lockable drawers below and cabinets above. Utility connections for coffee maker, microwave and refrig. Eight five-tier lockers for staff who do not have offices or assigned workstations.
Storage/Supplies	1	56	56	Off of training for Nurse instructor materials
Male Staff Toilet	1	114	114	Multiple stalls
Female Staff Toilet	1	114	114	Multiple stalls
Copier/Collating Work Station	1	100	100	copier and work table combined area
Electrical	1	70	70	
<b>Functional Net Subtotal (NSF)</b>			<b>3,680</b>	
	Circulation/Efficiency Factor (24%)			883
	<b>Total Functional Area (GSF)</b>			<b>4,563</b>
	Building Grossing Factor ( 11%)			476
	<b>Total Building Area (GSF)</b>			<b>5,040</b>



## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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### Project #7: Infirmary Conversion, Building #390 and 395

#### A. Facility Condition & Need

Existing Condition: The existing Infirmary in its present configuration and use has no excess space in order to create any new specialty exam rooms, and specific space needs of specialty, including Physical Therapy, as every room in the building is currently assigned and in use and many of the existing exam rooms are substandardly sized.

Need: In order to adequately serve the total spectrum of healthcare specialty needs of the inmate population of Avenal State Prison on-site without the need for additional off-site transportation, the Infirmary Building needs to be able to expand either physically, or through space re-allocation to transfer some non-direct medical functions out of the building, relocating them elsewhere within the Institution. This project provides for reconfiguration of existing spaces and upgrades to existing spaces, made available for direct inmate clinical use through the implementation of Project #6.

Additionally, the existing Pharmacy is approximately 200 square feet significantly undersized from that preliminarily identified by Maxor, CPR's Pharmaceutical consultant, as they unroll centralization and use of daily blister pack prescriptions. Maxor has reviewed proposed pharmacy space layouts and has requested a minimum of 1,400 square feet for the medication process and storage of emergency medication supplies. With such a disparity of available space, alternate locations for the Pharmacy at Avenal State Prison were reviewed. If vacated, the existing Pharmacy could provide sufficient space for a Physical Therapy room that can more adequately respond to the increasing aging population and chronic conditions with space to accommodate the necessary equipment, including parallel bars, full view mirror, training stairs, treatment table, privacy screen and step stool.

#### B. Project Description

The areas to receive modification under this Project are located within the existing 16,200 sf Infirmary Building 390 located within Avenal State Prison inside the secure perimeter. The project consists of multiple areas of remodel and modification to allow final conversion of spaces to support appropriate and effective centralized health services delivery through providing sufficiently sized spaces to accommodate their use and function and to consolidate services to improve staff effectiveness and efficiency in providing clinical care to the inmates of the institution.

The Infirmary building is Type II-FR. The exterior walls are constructed of tilt-up concrete with interior walls constructed of either metal studs or CMU depending upon the use and the type of security requirements. Many institution health service functions occur in this building including, OHU (out-patient housing unit) with in-patient care, Pharmacy, TTA (Triage Treatment Area), X-ray, Laboratory and Lab Draw, Specialty Clinical Exam Rooms, Infirmary Support and Inmate

## **Health Care Facility Improvement Program California State Prisons – Avenal State Prison**

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Holding, and health services administration areas. Not all of these areas within the Infirmary will be addressed under this Project.

In order to facilitate the Phase 2 improvements of this Project, the remaining non-essential administrative and support functions will be relocated out of the Infirmary Building 390 into an interim administration modular building and the Pharmacy will have been relocated to a more appropriately sized location within Building 395. The remodel of Building 395 to accommodate the Pharmacy is included in the project scope and description of this project.

A descriptive list of the planned modifications to the Infirmary as included in this projects has been included below. The numerical modification reference is included in this project's concept plan also included following this narrative:

1. Conversion of Room 131- Pharmacy and Room 132- Storage/office to Physical Therapy (PT) Specialty Exam and PT Storage.
  - a. Revise the door hardware, as needed, from the high security lock required by a pharmacy function to a standard exam office lock.
2. Provide sufficient TTA work space and secure storage to allow its relocation off of the TTA floor in order that all 3 trauma bays may be appropriately utilized.
  - a. Remove section of wall and door between 132A and 134-TTA. Patch floor and ceiling to match existing. Construct 5 lf of nursing counter/worksurface.
  - b. Remove 4 lf of cabinets from 135, refinish remaining end panel to match existing and install 3'x7' door and frame. Patch (E) flooring.
  - c. Remove and dispose of existing door and frame at Room 135 and infill with 1-hr construction, patch, finish and paint to match (E).
  - d. Provide fiberoptic wiring into the TTA for transmission of digital x-ray from outside source and from X-ray room.
3. Conversion of Room 162- Lab Draw back to a Nursing Station. Lab draw space has been provided at each of the new Complex Yard Clinics. Upon completion of the Yard Clinics, Lab Draw will no longer be needed within this Building and will reduce the escort and travel of inmates from the yard to the Infirmary Bldg 390 for lab draw.
4. Return Room 167- Dental Storage back to a Clean Utility Room.
  - a. Relocate stored dental equipment and supply out to the newly completed Medical Warehouse Building (Project No. 10).
5. Installation of telecommunication wiring and power to accommodate Telemedicine usage in ALL exam rooms.
6. Combine rooms 157 and 162 to make an adequately sized specialty exam room.
  - a. Remove the framed partition between rooms 163 and 157. Patch ceiling and flooring to match existing.
  - b. Remove and dispose of existing door and frame at Room 162 and infill with 1-hr construction, patch, finish and paint to match (E).
7. Combine rooms 165, 145, 144, and 143 to provide open work area for consolidation of scheduling services and staff. Space to accommodate On-site Scheduling, Off-site Scheduling

## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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and UM nurse and allow for staff communication with providers and SRNs to effectively allow for scheduling of inmate services.

- a. Remove the CMU wall and door between Rooms 165 and 145. Remove the framed partitions and doors of rooms 143 and 145. Patch ceiling and flooring to match existing. Staff in these spaces to be relocated to new Administrative Modular (Project #6)
  - b. Provide additional surface mounted electrical, data and telecom. wiring to support the workstations shown.
  - c. Offices 142 and 140 to be occupied by the SRN in charge of the OHU and the SRN in charge of TTA.
  - d. Physician's Workroom/Conference/Medical Library retained in this building to allow direct access to providers by schedulers and SRNs, localized charting location for specialty providers, provide for common and centralized location for provider collaboration and peer discussions.
  - e. Re-assign Room 140 to SRN (TTA) and relocate Dental storage to completed new Medical Supply Warehouse building (Project No. 10).
  - f. Re-assign Room 142 to SRN (OHU) and relocate DoN out to new Administrative Modular (Project No. 6.)
8. Conversion of Room 138 to Optometry/Ophthalmology Specialty Exam
    - a. Enlarge opening and revise Door and HM Frame from 3'x7' to 4'x7'. Modification is within a 1-hr wall assembly and must be treated as such. Door and frame must have 20 min. label AND vision panel.
  9. Provide and install a new small roof mounted or ceiling mounted HVAC unit to provide direct ventilation to Room 172 to allow its conversion from an existing storage room to a Mental Health office. Install a half vision panel in the door to allow inmate supervision during use.

The project scope includes the renovation of Building #395 to accommodate Pharmacy. The existing Pharmacy in the Infirmary Building 390 is approximately 300 s.f., far below the defined pharmacy program space required to support the inmate population and to support the centralized pharmaceutical program in the planning stages by Maxor. In previous planning discussions, Maxor specified a minimum of 1,400 s.f. as a minimal space requirement. Building 395 is approximately 1,500 s.f. and constructed of hardened CMU walls making it ideally suited for minor renovation into the pharmacy for ASP. Building #395 is located within the secure perimeter of Avenal State Prison south of the Infirmary Building #390. Building #395 currently supports various administrative health services functions and staff. The project scope is to demolish the majority of the interior and partitions within the building, leaving the masonry interior partitions as a secure pharmacy transaction vestibule, an enclosed office for the pharmacist and a room for secure storage of narcotics. The building is Type II-FR with its exterior walls constructed of CMU and shall remain as such. The interior renovations and modifications include the following items.

- a. Remove and dispose of existing interior framed partitions as noted on exhibit for building 395. Patch, finish and paint existing floor and ceiling to match existing.
- b. Remove existing watercloset and wall mounted hand sink and install 13.5 lf of base cabinet with cabinet mounted hand washing sink and 6.5 lf of upper cabinets.

## **Health Care Facility Improvement Program California State Prisons – Avenal State Prison**

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- c. Upgrade door hardware at 2 exterior doors for appropriate security provisions to accommodate Pharmacy, if needed.

### **C. Concept Plan**

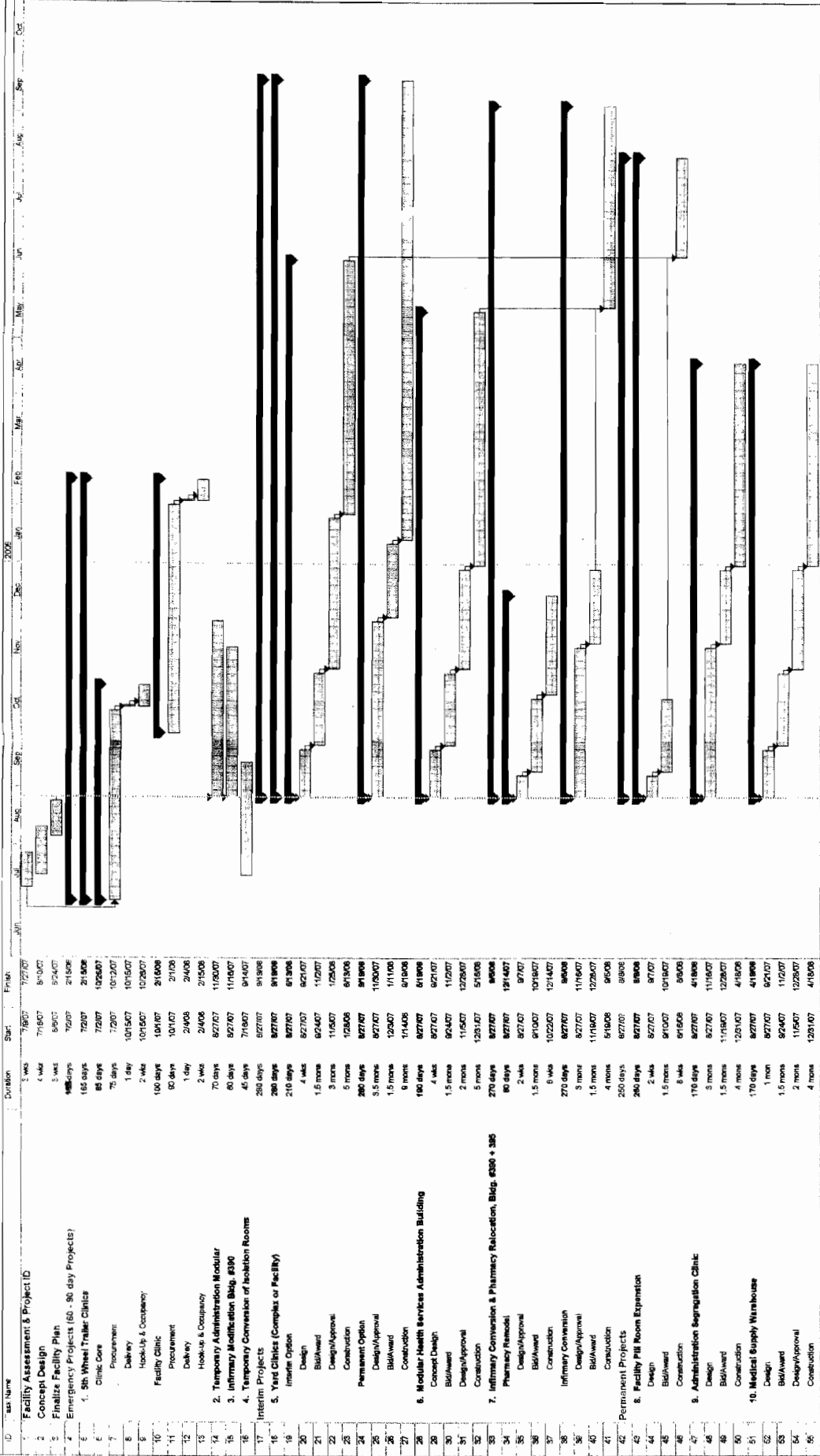
A concept plan of the existing Infirmary Building #390 is included here to graphically show the spaces being addressed and reallocated to provide for increased direct clinical use.

A second concept plan is additionally included to graphically show the extent of renovation required within Building #395 to convert it to use for the Pharmacy.

### **D. Space Program**

A space tabulation has been included to define the spaces included in this building.

HEALTH CARE FACILITY IMPROVEMENT PROGRAM  
 CALIFORNIA STATE PRISONS - AUBURN  
 PROJECT MASTER SCHEDULE



ID	Task Name	Start	Finish
1	Facility Assessment & Project ID	7/18/02	7/18/02
2	Concept Design	7/18/02	8/1/02
3	Finalize Facility Plan	8/9/02	8/24/02
4	Emergency Projects (60 - 90 day Projects)	7/20/02	2/15/03
5	5th Wheel Trailer Clinic	7/20/02	2/15/03
6	Clinic Core	7/20/02	10/26/02
7	Procurement	7/20/02	10/12/02
8	Dakery	10/15/02	10/15/02
9	Hook-up & Company	10/15/02	10/29/02
10	Facility Clinic	10/16/02	2/16/03
11	Procurement	10/16/02	2/16/03
12	Dakery	2/4/03	2/4/03
13	Hook-up & Occupancy	2/4/03	2/15/03
14	Temporary Administration Modular	8/27/02	11/20/02
15	Infirmity Modification Bldg. #390	8/27/02	11/19/02
16	Temporary Conversion of Isolation Rooms	7/18/02	8/14/02
17	Interim Projects	8/27/02	8/19/03
18	5. Yard Clinics (Complex or Facility)	8/27/02	8/19/03
19	Interim Option	8/27/02	8/19/03
20	Design	8/27/02	8/27/02
21	Bid/Award	8/24/02	11/27/02
22	Design/Approval	11/5/02	1/29/03
23	Construction	1/28/03	8/13/03
24	Permanent Option	8/27/02	8/19/03
25	Design/Approval	8/27/02	11/20/02
26	Bid/Award	12/30/02	11/11/03
27	Construction	11/14/03	8/19/03
28	Modular Health Services Administration Building	8/27/02	8/19/03
29	Concept Design	8/27/02	8/27/02
30	Bid/Award	8/24/02	11/27/02
31	Design/Approval	11/5/02	1/29/03
32	Construction	1/28/03	5/19/03
33	Infirmity Conversion & Pharmacy Relocation, Bldg. #390 + 395	8/27/02	8/19/03
34	Pharmacy Renovation	8/27/02	12/14/02
35	Design/Approval	8/27/02	8/27/02
36	Bid/Award	8/13/02	10/19/02
37	Construction	10/22/02	12/14/02
38	Infirmity Conversion	8/27/02	8/19/03
39	Design/Approval	8/27/02	11/19/02
40	Bid/Award	11/19/02	1/29/03
41	Construction	8/19/03	8/19/03
42	Permanent Projects	8/27/02	8/19/03
43	Facility Hill Room Expansion	8/27/02	8/19/03
44	Design	8/27/02	8/27/02
45	Bid/Award	8/13/02	10/19/02
46	Construction	8/19/03	8/19/03
47	Administration Segregation Clinic	8/27/02	4/19/03
48	Design	8/27/02	11/19/02
49	Bid/Award	11/19/02	1/29/03
50	Construction	1/29/03	4/19/03
51	Medical Supply Warehouse	8/27/02	8/27/02
52	Design	8/24/02	11/27/02
53	Bid/Award	11/27/02	11/27/02
54	Design/Approval	11/27/02	1/29/03
55	Construction	1/28/03	4/19/03

Project Draft Schedule: 07/27/02  
 Date: 02/15/03

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 Milestone: [ ]

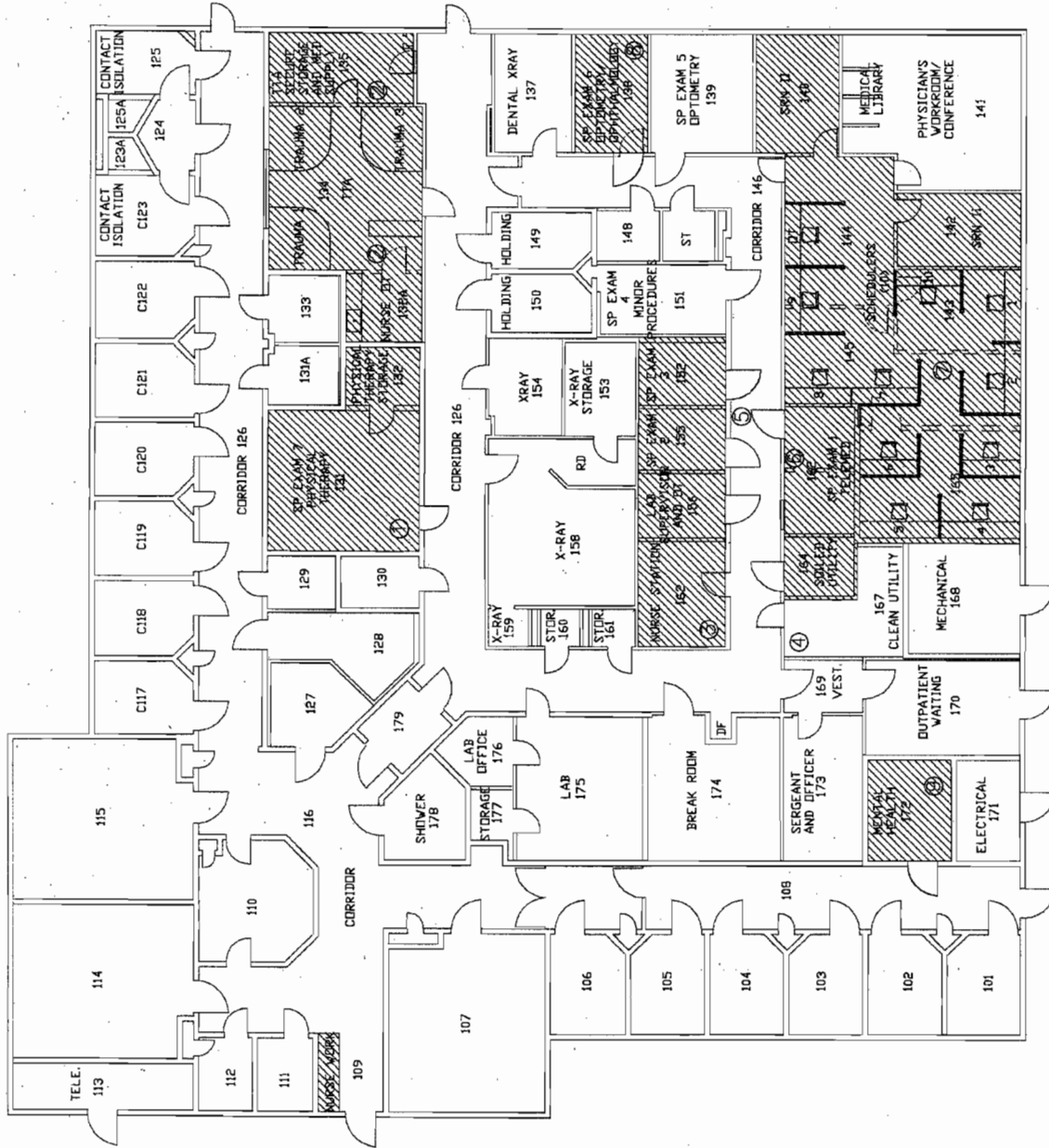
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 Project Summary: [ ]

External Tasks: [ ]  
 External Milestone: [ ]

Progress: [ ]  
 Milestone: [ ]

Deadline: [ ]

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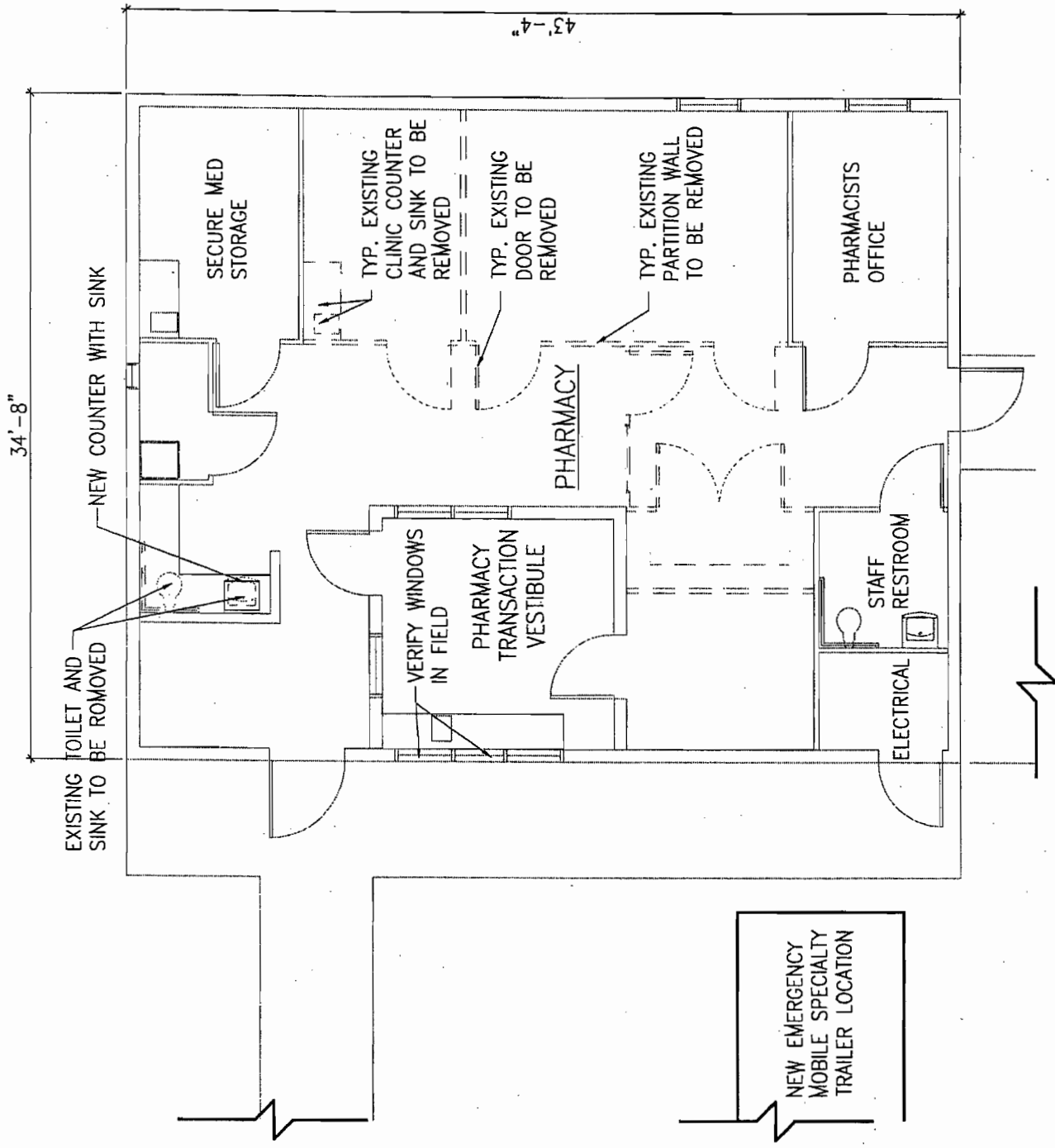


PROJECT #7 (interim) INFIRMARY CONVERSIONS, BUILDING #390 FLOOR PLAN - Phase 2

SCALE: 1/16" = 1'-0" 82807



PROJECT #7 (Permanent) PHARMACY RELOCATION, BUILDING #395



Health Care Facility Improvement Program  
California State Prisons- Avenal

CALIFORNIA  
PRISON HEALTH CARE  
RECEIVERSHIP CORP.

PROJECT # 7 (Interim): Conversion and Pharmacy Relocation, Building #390 and 395

Function	NEW OR REMODELED SPACE			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Clinical - Specialty</b>	<b>7</b>			
Optometry/Optomology/ENT Room	1	150	150	For exam
Optometry - Exam # 5	1	190	190	For follow-up, glasses, etc.
Telemedicine Room	1	160	160	Telemedicine office with telemedicine tech drop
Minor Procedures Room (Lump & Bump)	1	145	145	
Physical Therapy	1	200	200	Space to accommodate 2 tables + exercise equipment + desk space
Physical Therapy Storage	1	70	70	
Specialty Exam Rooms	2	90	180	Rooms available for scheduling of all required
<b>Functional Net Subtotal (NSF)</b>			<b>1,095</b>	

Function	NEW OR REMODELED SPACE			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>TTA</b>				
Triage Treatment Bays	3	100	300	Curtained Separated bays, sink, counter, storage
Nurse Workstation	1	100	100	
Secure Storage/Medical Supply	1	160	160	
<b>Functional Net Subtotal (NSF)</b>			<b>560</b>	

Project #7 (Permanent): Pharmacy Relocation, Building #395 Remodel

Function	New Space			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Clinical</b>				
Pharmacy Transaction Vestibule	1	130	130	
Pharmacy	1	615	615	
Pharmacists' Office	1	95	95	
Secure Medication Storage	1	100	100	
Staff Restroom	1	50	50	
Electrical	1	35	35	
Waiting	1	78	78	
Counter and Sink Alcove	1	45	45	
Janitor	1	25	25	
<b>Functional Net Subtotal (NSF)</b>			<b>1,173</b>	



## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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### Project #8: Facility Pill Room Expansion

#### A. Facility Condition & Need

Existing Condition: One of the most common complaints from the medical staff at Avenal deals with how painfully slow and inefficient the process is of distributing the daily doses of medicine to the inmate population through the singular pill line, located at the rear of the yard clinic at each facility, facing out toward the inmate recreation yard.

Need: The obvious need is to have the ability to increase the speed by which medications can be distributed to the inmates, so a second adjacent pill line was suggested to be created out of the relocation of the Sick Call Nurse space, an exam room, and an OT/LVN space. These functions are being relocated into the nearby new Complex Clinic Building.

#### B. Project Description

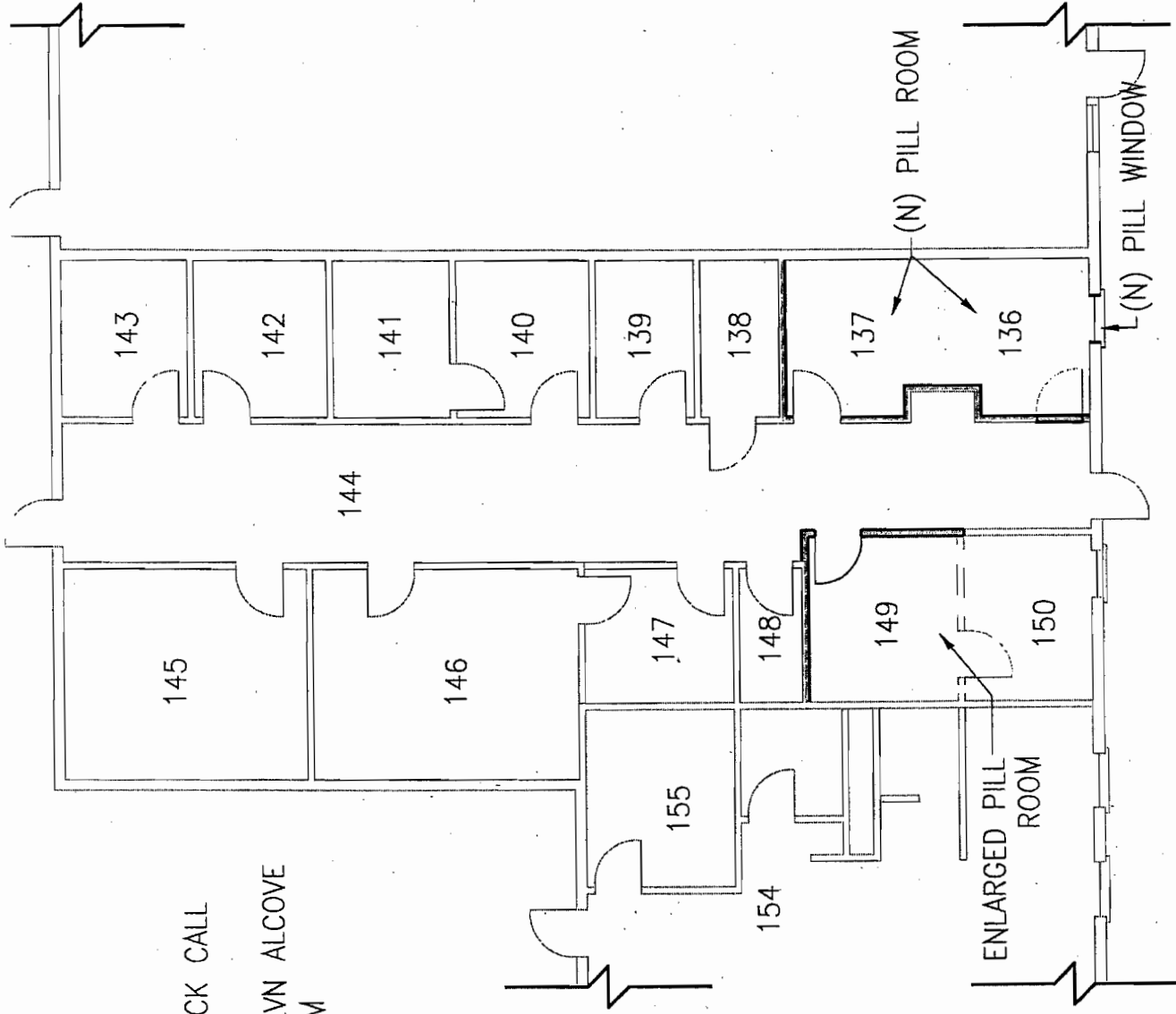
The Pill Line expansion is located and being created from the two existing Pill Rooms, the Pill Window area, and the OT and LVN alcove at each Yard Clinic in every Facility at Avenal State Prison. Since the existing Nurse Sick Call room #136, the Exam Room #137 and the OT/LVN space #149 are being provided over in the new Complex Clinic Building, these spaces are being combined to create 2 enlarged pill rooms/pill lines. The existing walls separating rooms 149 and 150 are to be removed, along with the wall separating rooms 136 and 137. The existing remaining walls and ceilings of these existing four two rooms are to have the drywall stripped off down to the studs, and a layer of expanded metal lath is to be anchored to the studs, with a new layer of 5/8" plywood overlaid on the metal lath, and finally 5/8" type-X gypsum board is to be installed over the plywood on the walls and ceilings, in order to reestablish the secure perimeter around the pill line rooms. A new pill window to match the existing window used on the other side is to be installed where shown on the plan. The floors are to receive new VCT tile and vinyl base.

#### C. Concept Plan

A concept plan is included to graphically show the extent of renovation required within the existing facility yard clinics to provide for adequate pill room space as well as the additional pill room and distribution window needed to alleviate the delays being experienced in distribution of medications.

#### D. Space Program

A space tabulation has been included to define the spaces revisions included in this project.



- 136 (E) NURSE SICK CALL
- 137 (E) EXAM
- 149 (E) OT AND LVN ALCOVE
- 150 (E) PILL ROOM

**PROJECT #8 (Permanent) FACILITY PILL ROOM EXPANSION FLOOR PLAN**

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PROJECT # 8 (Permanent): Facility Pill Room Expansion

Function	NEW SPACE			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Clinical</b>				
Pill Room	2	144	144	
Functional Net Subtotal (NSF)			144	

## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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### Project #9: Administrative Segregation Clinics

#### A. Facility Condition & Need

Existing Condition: There are currently no medical exam rooms in the Administrative Segregation Facility at Avenal, and two extremely small mental health interview rooms.

Need: To effectively deal with the day to day healthcare issues inside the Ad. Seg. Unit in a timely manner, without having to move the Administrative Segregation inmates over to the Infirmary, which is currently unavoidable and problematic at best, they would need two exam/treatment rooms, along with a place to securely store medical supplies. Any proposed solution to address this need should link the medical solution to the existing lack of adequate Mental Health Interview space. The proposed solution shows two new interview rooms added to the far side of the core, opposite from where the new medical exam rooms are proposed to be constructed. Note that the dashed-in area near the proposed new Mental Health interview rooms is for a related future Mental Health project that is not currently a part of this scope of work, which involves the installation of seven new inmate treatment modules in a semi-circular fashion.

#### B. Project Description

The project site is located within the secure perimeter of Avenal State Prison, within the existing Administrative Segregation Unit, Facility #5. The addition consists of two new clinic exam rooms, converting an existing room adjacent to Clinic exam room #2 into a medical storage room, and the extension of the existing second floor observation room.

The walls of the two new clinic rooms will be constructed of 8" grout filled and reinforced CMU, extending up to the roof structure. The existing core of the Administrative Segregation Unit now has a second floor built over the top of the core below, with an observation room with gunports located there. The scope of work for this clinic addition also includes extending the secure observation platform over the top of the new clinic exam rooms, and to move or relocate the existing abuse resistant windows/glazing units/gun ports from their present location to the new outer walls of the observation platform.

#### Mental Health Component:

There will be two new Mental Health Interview rooms added to the other side of the core of the cell block for use by Mental Health staff. The rooms will be constructed of the same reinforced masonry construction as the two clinic exam rooms on the opposite side of the cell block core. However, the walls shall only run up high enough to accommodate a 9'-0" ceiling within the Interview rooms. The ceiling over the top of the Interview rooms shall be the same construction as the floor over the clinic exam rooms, which is a concrete filled metal floor deck supported by a centrally located steel beam. The doors and frames to both the clinic rooms and the Interview rooms are to be security grade steel doors and frames, with security grade locks. Razor wire will be

## **Health Care Facility Improvement Program California State Prisons – Avenal State Prison**

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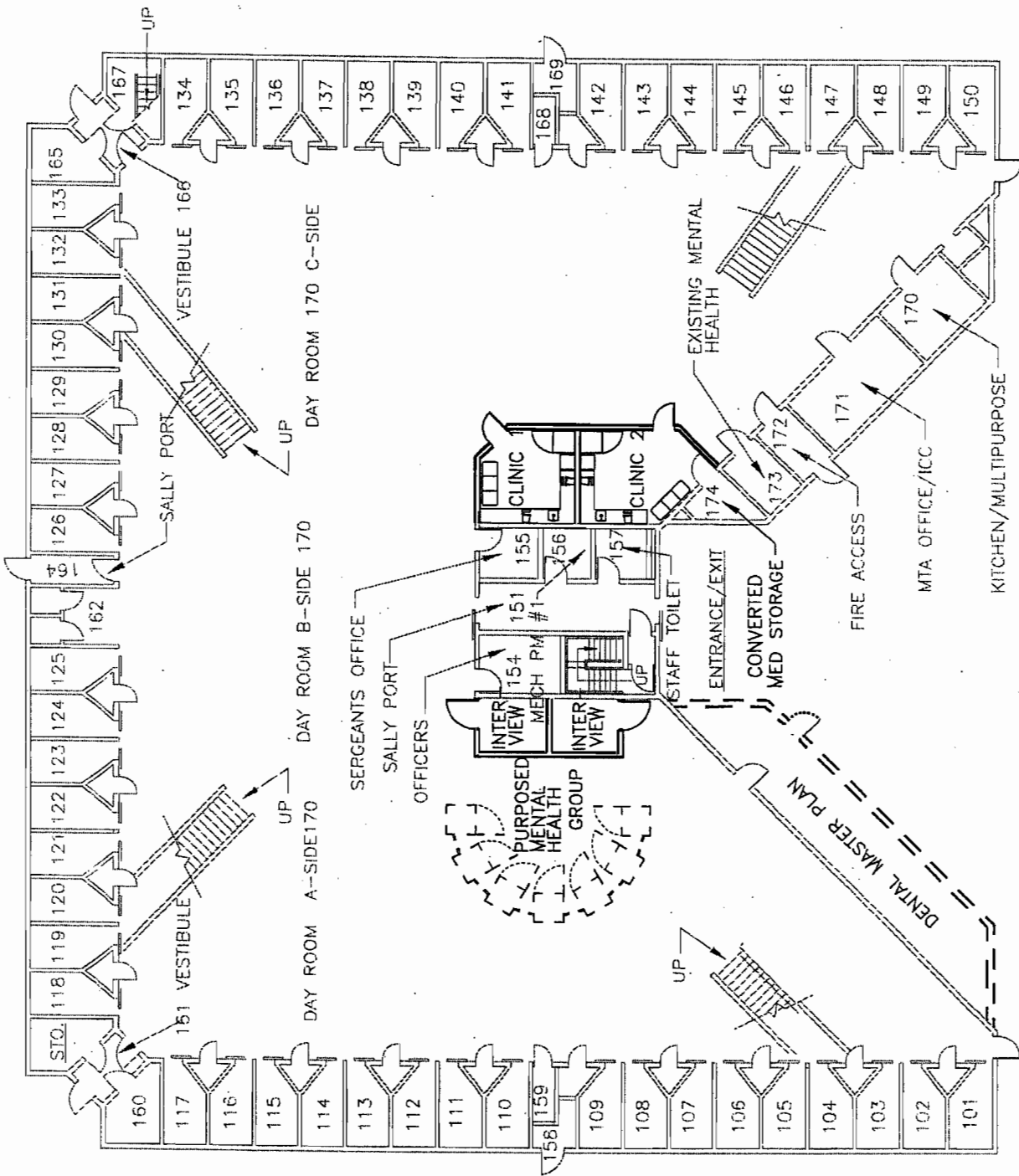
placed on top of the Interview room structural deck, to assure that an inmate cannot climb onto the top of the deck and gain access to the Observation Room. These two Mental Health rooms have been budgeted separately to allow costs to be appropriately tracked by department.

### **C. Concept Plan**

A concept plan has been included within this project narrative to describe the proposed layout of a medical supply warehouse based on estimated quantity of supply and warehousing needed at a similarly sized institution.

### **D. Space Program**

A space tabulation has been included to define the spaces revisions included in this project.



PROJECT #9 (Permanent) ADMIN. SEGREGATION CLINIC

SCALE: 3/64" = 1'-0" 8/28/07

**PROJECT #9 (Permanent): Administrative Segregation Clinic**

Function	New Space			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Clinical</b>				
Exam Room #1	1	215	215	enclosed, permanent construction with control booth extended overhead
Exam Room #2	1	200	155	
Secure Medication Storage	1	24	70	existing enclosed room 174 to be connected to new clinic space
<b>Functional Net Subtotal (NSF)</b>			<b>440</b>	
Circulation/Efficiency Factor (0%)			0	
<b>Total Functional Area (GSF)</b>			<b>440</b>	
Building Grossing Factor ( 17%)			75	
<b>Total Building Area (GSF)</b>			<b>515</b>	Clinical Only

<b>Mental Health</b>				
Interview Room	2	74	148	
Group Area	1	300	300	not enclosed; semi-circle of holding cages
<b>Functional Net Subtotal (NSF)</b>			<b>448</b>	
Circulation/Efficiency Factor (27%)			121	
<b>Total Functional Area (GSF)</b>			<b>569</b>	Mental Health only
Building Grossing Factor ( 17%)			97	
<b>Total Building Area (GSF)</b>			<b>666</b>	including Clinical and Mental Health

## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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### Project #10: Medical Supply Warehouse

#### A. Facility Condition & Need

Existing Condition: The existing storage warehouse for the Institution resides just outside the secure perimeter of Avenal State Prison. It is currently used to store the large majority of Avenal's supplies and materials, but is not adequately sized to additionally accommodate medical supplies. Medical supplies are currently stored in a combination of non-conditioned con-x space, leased space within the City of Avenal, and a small distribution room located in a modular building #395A. The method of utilizing multiple, scattered and inaccessible storage locations is totally non-conducive to proper storage, inventory and distribution of medical supplies that are critical in providing adequate healthcare to the inmate population of this Institution. Many of the con-x boxes utilized are located outside the secure perimeter of the perimeter, causing medical staff to be processed through the sallyport, taking upwards of an hour at times to retrieve needed supplies. Due to the inadequate storage, a functional and thorough system is not in place to accurately keep track of what is stored and available, causing supplies to fall out of date prior to their retrieval for use.

Need: There is a need for adequate medical supply storage space to be located inside the secure perimeter of the Institution. The space should have the ability to provide for conditioned a, in order to maximize the shelf life of all medical supplies. The supply storage space should be adequately sized to allow medical staff to be able to track the inventory accurately and to ensure that critical medical supplies are remain sufficiently in stock, and product may be appropriately reordered.

#### B. Project Description

The project site is located within Avenal State Prison inside the secure perimeter. The project consists of constructing a new 4,000 s.f. medical supply warehouse building, on the west side of the service road coming into the prison from the vehicle sallyport, approximately 400 feet north of the sallyport gate. The proposed site is in a relatively flat area with adequate existing sheet drainage toward the road. A minimal amount of fill soil material may be needed to be imported to the area of the building to minimally raise the finish floor approximately 2" above average adjacent grade, to minimize any potential for heavy rains to introduce water into the building at the primary entrance points around the perimeter.

In order to ensure adequate medical supplies are in stock and immediately available for use in the delivery of medical care and services, there is a need to consolidate and organize the supply and equipment needs of medical services into a single warehouse building inside the secure perimeter, to allow for effective inventory control, dispersment of materials and staged storage within an easily accessible central location.



## **Health Care Facility Improvement Program California State Prisons – Avenal State Prison**

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The new 4,000 s.f. warehouse building footprint is approximately 80' x 50', with separately secured, fully caged interior warehouse areas for bulk storage items, "hot" secure medical supplies, and death and archive medical records. The building will be constructed using a pre-engineered steel structure and slab on grade construction. The building's exterior walls will be composed of pre-finished metal siding, consistent with existing adjacent warehouse type structures.

The warehouse building interior will be designed to allow for three tier high pallet stacking of bulk supplies, medical forms and nutritional packets with wide aisles for either forklift or pallet jack access, 8' high fixed shelving units for smaller items, one 12' x 12' roll-up door and one man door with call buzzer at the southwest facing elevation. The interior space layout includes a fully caged secure storage area near the front entrance for small items, a fully caged medical records area for storage of death and archived inmate files, a bulk storage area behind a 10' high chain-link fence at the building rear for wheelchairs, beds, and stretchers, a 100 s.f. 2-hour rated storage area housing medical gas, workspace for 4 warehouse staff, including one office, a workroom and a single unisex toilet. In addition, the building will be alarmed, reporting to central control. An intercom PA system and temperature/humidity control will be provided throughout.

### **C. Concept Plan**

A concept plan has been included within this project narrative to describe the proposed layout for new medical clinical exam space as well as the requested addition of two interview rooms for Mental Health's use.

### **D. Space Program**

A space tabulation has been included to define the spaces revisions included in this project.

## **Health Care Facility Improvement Program California State Prisons – Avenal State Prison**

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### **6. Conclusion**

As our formalized overall response to meet the needs of the CPR, Corp. Plan of Action, specifically for Avenal State Prison, this final report represents the distillation of all of the information retrieved and developed through numerous meetings with CPR and the medical, mental health, dental and correctional officials from both Avenal State Prison as well as CDCR headquarters and respective court monitor oversight during the months of July and August of this year. With the input and support of all of these professionals, the focus will now shift from assessment and documented plan to approval and implementation. The recommendation which defines 10 separate yet interconnected projects contained in this report are geared to do the following for this Institution.

1. To provide adequate space to all of the clinical medical functions within the Infirmary and within each facility yard clinic.
2. To allow the medical component of Avenal State Prison to retain and bring in needed specialists to provide for high quality healthcare on-site to the inmate population.
3. To accomplish items 1 and 2 above in the shortest timeframe possible, and therefore elevating the level of healthcare to that as called for in the Receiver's Plan of Action.

It is the Site Planning Team's intention to assist the Receiver in implementing all 10 of the projects included within the Master Plan upon approval to do so.

## Process Checklist

### STEPS:

1. **Identify Facility for evaluation and clinical upgrades**

- Contact Institution and notify of intent to initiate assessment and project planning and implementation.
  - Schedule date for team kick-off meeting, assessment and planning meetings
- Prepare task schedule for assessment and planning activities
- Notify Court Representative of CDCR Mental Health of intent to begin assessment and planning of clinical upgrades at institution. Invite to participate.
- Notify Court Representative of CDCR Dental of intent to begin assessment and planning of clinical upgrades. Invite to participate.
- Notify CDCR, Facilities Planning, to be advised of start of assessment and planning and request notification of any developments related to CDCR work and AB900 developments.

2. **Assign and establish Planning Team and Site Implementation Team**

- Assign and schedule team for kick-off meeting, assessment and planning meetings. (CPR and VCM to complete)
- Reserve meeting room(s) and distribute calendar notifications to team members. (CPR)

3. **Site Facility Assessment**

- Review AB900 plans and other improvements under planning by CDCR and the Institution to avoid conflict of project space.
- Hold a kick-off meeting to orient the planning and site implementation teams to the objectives and work plan to perform the assessment, planning and project implementation.

Attendees (required):

Warden / AW  
HCM  
CMO  
DoN

Regional Admin. – Medical  
Court Rep. (M.H.)  
Court Rep. (Dental)  
Chief of Plant

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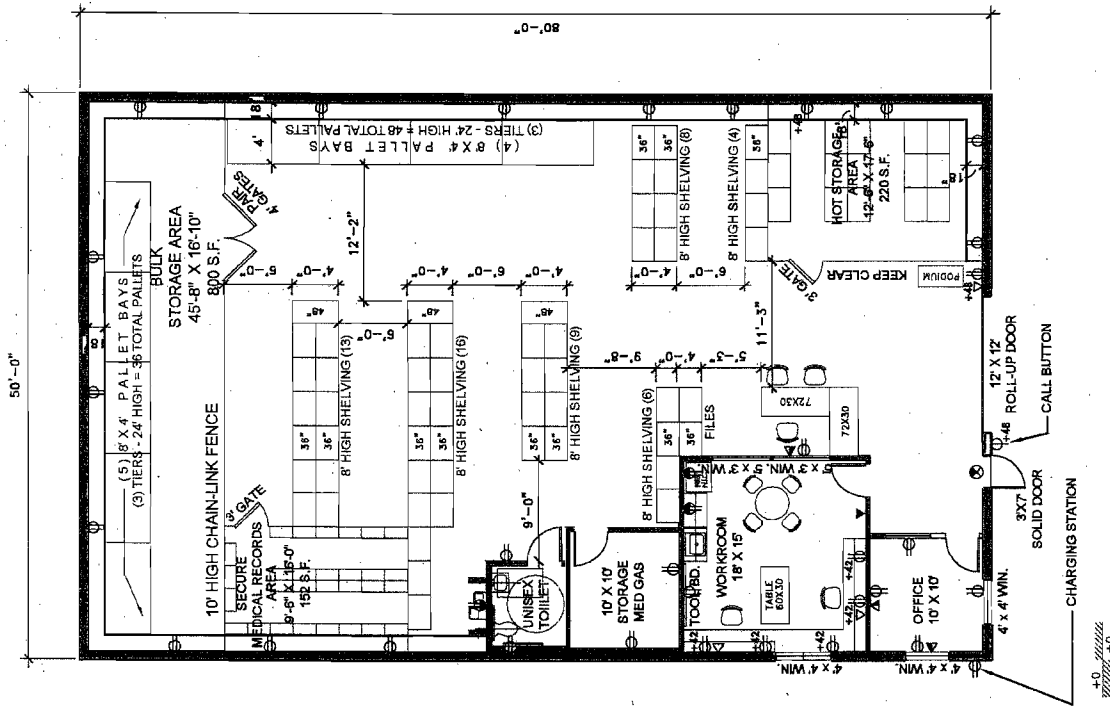
- Hold a planning meeting to review programming and planning checklist/questionnaire with site planning team to define existing conditions and parameters of the institution.
- Discuss any project plans and ideas that the Institution has to address identified clinical deficiencies. Consider and validate suggestions.
- Assemble as-built plans of institution for use in assessment.
- Walk the facilities to assess existing conditions and deficiencies as outlined by questionnaire discussions of team.

**4. Facility Improvement and Project Identification & Planning**

- Compare information and data collected with model space program/guidelines.
- Highlight clinical deficiencies required to be addressed.
- Identify site locations and options for facility improvements.
- Coordinate and share with CDCR Mental Health and Dental to advise of planned projects and integrate Mental Health and Dental needs as applicable.
- Review proposed projects and options with Planning Team and refine consensus for project definition.
- Confirm if CDCR Mental Health and Dental contacts if their respective departments will be participating in clinical health services space revisions concurrent with CPR's schedule and plans? Coordinate agreement with them for their participation or inability to participate.
- Finalize project definition scope, and conceptual planning, including budget and schedule.
- Prepare and present to Receiver for final Project Approvals.
- Define possible implementation strategies for consideration and execution by the Site Implementation Team.

**5. Project Implementation**

- Planning Team hands off projects to Construction Implementation Team.
- Implementation Team structures implementation strategy for each project and defines implementation schedule with activities to complete.
- Implementation Team reviews project schedule with site for coordination related access and security measures.
- Implementation Team executes and completes the project
- Implementation Team coordinates occupancy with Institution staff.



**PROJECT #10 (Permanent) MEDICAL SUPPLY WAREHOUSE FLOOR PLAN (4,000 SQ. FT)**

SCALE: 3/32" = 1'-0" 8/28/07

**Health Care Facility Improvement Program  
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**PROJECT # 10 (Permanent): Medical Supply Warehouse**

Function	New Space			Comments:
	Proposed Qty of Areas	Proposed Net Sq. Ft.	Total NSF	
<b>Clinical</b>				
Office	1	100	100	
Workroom	1	270	270	
Med Gas Storage	1	100	100	
Unisex Toilet	1	50	50	
Workspace	1	64	64	
Hot Storage	1	220	220	
Medical Records	1	170	170	
Bulk Storage	1	775	775	
Pallet Racks	1	128	128	
Shelving	1	346	346	
<b>Functional Net Subtotal (NSF)</b>			<b>2,223</b>	
		<b>Circulation/Efficiency Factor (60%)</b>	<b>1,334</b>	
		<b>Total Functional Area (GSF)</b>	<b>3,557</b>	
		<b>Building Grossing Factor (12%)</b>	<b>443</b>	
		<b>Total Building Area (GSF)</b>	<b>4,000</b>	

## Health Care Facility Improvement Program California State Prisons – Avenal State Prison

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### 4. Budget

#### Construction Cost:

Based on the determined project scope, anticipated building construction and associated concept plan, budget estimates have been developed to define the hard construction cost of the project. As a result of the conceptual nature and level of planning prepared prior to the start of design, cost models for similar building types and functions were utilized to form the basis for the cost of a project. Additionally, geographical factors have been applied to adjust the cost models to the bid conditions anticipated to be experienced in the Central Valley where Avenal State Prison is sited. The base project costs include the following mark-ups:

- General Conditions (GC) (10%)
- GC Overhead and Profit (8%)
- Bonds and Insurance (2%)
- Market and Prison Inefficiency Factor (15%)

The costs estimated for the projects are based on today's dollars. Cost escalation and construction materials and labor rates continue to change and escalate. The construction costs have been escalated by project to the mid-point of construction to best anticipate the bid cost at the time the project will be publicly bid.

#### Project Cost:

In addition to hard construction costs, soft costs must additionally be budgeted for when planning a project. Soft costs may include, planning costs, design and engineering, survey and field investigation, specialty consultants (CEQA), testing and inspection, guarding costs, management, and furniture procurement and installation. These costs may vary based on the size of the project and its complexity; we have anticipated 40% of the construction costs to cover these project related expenses.

Costs estimated by project have been included in Section 2, Executive Summary. In review, one can identify the costs attributed to medical space and those attributed to supplemental space provided for Mental Health to accommodate their program and space needs at the institution.

## **Health Care Facility Improvement Program California State Prisons – Avenal State Prison**

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### **5. Schedule**

All 10 of the various projects which are defined in this report are displayed in the attached Master Schedule for Avenal, and defined as either Emergency projects, Interim projects, or Permanent projects. Assuming all projects were started on or near September 1, 2007, the Master Schedule for Avenal shows that the last of the 10 projects would be completed by October 2008, or in approximately fourteen months.