(RM0) DEPARTMENT OF BEHAVIORAL HEALTH

MISSION

The mission of the Department of Behavioral Health (DBH) is to support prevention, treatment, resiliency, and recovery for District residents with mental health and substance use disorders through the delivery of high-quality, integrated services.

BACKGROUND

DBH administration and direct services are located at 64 New York Ave NE, St Elizabeths Hospital, 821 Howard Rd SE, 35 K St NE, and Building 14 of the DC General Hospital Compound, and 150 Wayne Ave. Sixty-four New York Ave NE and 150 Wayne Ave are owned by private firms. The other facilities are owned by the District of Columbia Government.

CAPITAL PROGRAM OBJECTIVES

- 1. Maintain St Elizabeths Hospital's compliance with best practices, standards and federal and District regulations by replacing floors, reconditioning wall surfaces, upgrading the electrical system, modernizing the HVAC system, acquiring new equipment to maintain sanitation and hygiene in food preparation and delivery, and acquiring a staffing scheduling system and hand scanners.
- 2. Improve the provision of Early Childhood, School Mental Health and Child Behavioral Health Services at 821 Howard Rd SE facility by modifying and expanding the usable space and upgrading the IT infrastructure.
- 3. Improve the provision of Adult Behavioral Health Services by renovating and enhancing the staffing area of 35 K St NE.
- 4. Improve the provision of mobile assessment and referral for substance abuse treatment services by replacing the mobile clinic vehicle.

RECENT ACCOMPLISHMENTS

- 1. St. Elizabeths Hospital completed installation of an automated system to closely monitor and manage the issuing of keys to staff and staff's return of keys upon shift changes, in order to ensure safety, security and accountability in operations.
- 2. St. Elizabeths Hospital has currently reached 60 percent completion of the installation of a new video surveillance camera system.
- 3. DBH completed the renovation of the Comprehensive Psychiatric Emergency Program (CPEP) in building 14 of the DC General Campus.

Elements on this page of the Agency Summary include:

• Funding Tables: Past budget allotments show the allotment balance, calculated as allotments received to date less all obligations (the sum of expenditures, encumbrances, intra-District advances and pre-encumbrances). Agencies are allowed to encumber and pre-encumber funds up to the limit of a capital project's budget authority, which might be higher than allotments received to date. For this reason, a negative balance on a project sheet does not necessarily indicate overspending or an anti-deficiency violation. A negative balance is permitted in this calculation of remaining allotment authority.

• Additional Appropriations Data (\$000): Provides a summary of the budget authority over the life of the project. The table can be read as follows:

• Original 6-Year Budget Authority: Represents the authority from the fiscal year in which budget was first appropriated through the next 5 years.

• Budget Authority Through FY 2027 : Represents the lifetime budget authority, including the 6-year budget authority for FY 2022 through FY 2027.

• **FY 2022 Budget Authority Revisions:** Represents the changes to the budget authority as a result of reprogramming, redirections and rescissions (also reflected in Appendix F) for the current fiscal year.

• 6-Year Budget Authority Through FY 2027 : This is the total 6-year authority for FY 2022 through FY 2027 including changes from the current fiscal year.

+ Budget Authority Request Through FY 2028 : Represents the 6-year budget authority for FY 2023 through FY 2028.

• Increase (Decrease): This is the change in 6-year budget requested for FY 2023 - FY 2028 (change in budget authority is shown in Appendix A).

• Estimated Operating Impact: If a project has operating impacts that the agency has quantified, the effects are summarized in the respective year of impact.

• FTE Data (Total budget in FTE Table might differ from actual budget due to rounding): Provides the number for Full-Time Equivalent (FTE) employees approved as eligible to be charged to capital projects by, or on behalf of, the agency. Additionally, it provides the total budget for these employees (Personal Services), the non personnel portion of the budget in the agency's capital plan, and the percentage of the agency CIP budget from either expense category.

• Facility Location Map: For those agencies with facilities projects, a map reflecting projects and their geographic location within the District of Columbia.

(Dollars in Thousands)

	Funding By Ph	ase - Prio	r Funding		A	pproved Fu	nding					
Phase	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Tota
(01) Design	19,641	15,180	2,851	436	1,173	0	0	0	0	0	0	C
(02) SITE	13,688	13,688	0	0	0	0	0	0	0	0	0	C
(03) Project Management	46,619	45,632	407	338	242	0	0	0	0	0	0	0
(04) Construction	279,112	276,144	1,639	0	1,328	0	0	0	0	0	0	0
(05) Equipment	28,119	28,074	0	0	46	0	0	0	0	0	0	0
(06) IT Requirements												
Development/Systems Design	12,689	3,802	4,691	220	3,977	7,900	2,600	0	0	0	0	10,500
(08) IT Deployment & Turnover	500	0	500	0	0	4,800	0	0	0	0	0	4,800
TOTALS	400,369	382,520	10,088	994	6,766	12,700	2,600	0	0	0	0	15,300
	Funding By So	urce - Prio	or Funding		A	pproved Fu	nding					
Source	Allotments		Enc/ID-Adv	Pre-Enc	Balance	EY 2023	EY 2024	EY 2025	EY 2026	EY 2027	EY 2028	6 Yr Total

Source	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Total
GO Bonds - New (0300)	218,123	202,449	8,299	994	6,381	6,900	2,600	0	0	0	0	9,500
Pay Go (0301)	2,306	1,771	535	0	0	0	0	0	0	0	0	0
Short-Term Bonds – (0304)	1,970	330	1,255	0	385	5,800	0	0	0	0	0	5,800
Certificate of Participation (0340)	177,970	177,970	0	0	0	0	0	0	0	0	0	0
TOTALS	400,369	382,520	10,088	994	6,766	12,700	2,600	0	0	0	0	15,300

Additional Appropriation Data	
First Appropriation FY	1998
Original 6-Year Budget Authority	406,697
Budget Authority Through FY 2027	401,682
FY 2022 Budget Authority Changes	
ABC Fund Transfers	-164
6-Year Budget Authority Through FY 2027	401,519
Budget Authority Request Through FY 2028	415,669
Increase (Decrease)	14,150

Estimated Operating Impact Summary Expenditure (+) or Cost Reduction (-) FY 2023 FY 2024 FY 2025 FY 2026 FY 2027 FY 2028 6 Yr Total No estimated operating impact

	Full Time Equivalent Data			
64	Object	FTE	FY 2023 Budget	% of Project
19	Personal Services	0.0	0	0.0
59	Non Personal Services	0.0	12,700	100.0

RM0-HX995-ELECTRONIC HEALTH RECORD SYSTEMS REPLACEMENT

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Agency:	DEPARTMENT OF BEHAVIORAL HEALTH (RM0)
Implementing Agency:	DEPARTMENT OF BEHAVIORAL HEALTH (RM0)
Project No:	HX995
Ward:	
Location:	VARIOUS
Facility Name or Identifier:	UNIFIED ELECTRONIC HEALTH RECORD SYSTEM
Status:	Ongoing Subprojects
Useful Life of the Project:	
Estimated Full Funding Cost:	\$5,300,000

Description:

This request is for capital funds for FY 2022 and years after. DBH worked with Triage consulting agency during FY 2019 to develop an Information Technology roadmap for systems used within DBH. Currently, DBH has two electronic health records (EHR) that require consolidation. The outpatient system, iCAMS, was poorly conceived and ineffective at achieving the majority of the agencies requirements. The aforementioned consultant recommended the expansion of Avatar to consolidate DBH's EHR's into a single system. The recommended solution will solve issues with data entry redundancy and inadequate medication management due to the existing systems inability to cross communicate.

Current System Overview/ Implementation Recommendation:

At present, there are two medical records which make it difficult to track the patient population when travelling through the various inpatient and outpatient facilities within DBH. The inpatient program uses Credible and Saint Elizabeths hospital uses Avatar. The implementation to consolidate both the inpatient and outpatient programs would allow for one clear electronic health record that would extend across the entire agency, provide clear data, and support the clinician's requirement to successfully track a patient, inside all agency locations and programs, within a single medical record. Enhancements would include Health Information Exchange (HIE) integration and performance metrics (dashboards).

Justification:

The project is a necessary effort to effectively align agency needs for advancements in technology which serve to reduce costs, streamline processes, reduce time consuming efforts in managing multiple systems, improve patient services by minimizing the risks associated with improper data management between multiple systems, and advance overall efficiency.

Progress Assessment:

Due to Covid restrictions and funding the agency was unable to meet the projected deadlines.

Related Projects:

None

(Dollars in Thousands)

Fundin	g By Phase -	Prior Fund	ing		Р	roposed Fu	unding					
Phase	Allotments	Spent E	nc/ID-Adv	Pre-Enc	Balance	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Total
(08) IT Deployment & Turnover	500	0	500	0	0	4,800	0	0	0	0	0	4,800
TOTALS	500	0	500	0	0	4,800	0	0	0	0	0	4,800
Fundin	g By Source ·	Prior Fund	ling		Р	roposed Fi	unding					
Funding Source	g By Source - Allotments		ling nc/ID-Adv	Pre-Enc	P Balance	FY 2023	Inding FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Total
Source GO Bonds - New (0300)				Pre-Enc 0				FY 2025 0	FY 2026 0	FY 2027	FY 2028 0	6 Yr Total 0
Source	Allotments		nc/ID-Adv	Pre-Enc 0 0				FY 2025 0 0	FY 2026 0 0	FY 2027 0 0	FY 2028 0 0	6 Yr Total 0 4,800

Additional Appropriation Data	
First Appropriation FY	2022
Original 6-Year Budget Authority	500
Budget Authority Through FY 2027	500
FY 2022 Budget Authority Changes	0
6-Year Budget Authority Through FY 2027	500
Budget Authority Request Through FY 2028	5,300
Increase (Decrease)	4,800

Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-) No estimated operating impact FY 2023 FY 2024 FY 2025 FY 2026 FY 2027 FY 2028 6 Yr Total

Full Time Equivalent Data			
Object	FTE	FY 2023 Budget	% of Project
Personal Services	0.0	- 0	0.0
Non Personal Services	0.0	4,800	100.0
	Object Personal Services	Object FTE Personal Services 0.0	Object FTE FY 2023 Budget Personal Services 0.0 0

Increase (Decrease)		4,8
Milestone Data	Projected	Actu
Environmental Approvals	10/1/2022	
Design Start (FY)	01/28/2023	
Design Complete (FY)	02/28/2023	
Construction Start (FY)	07/25/2023	
Construction Complete (FY)	09/9/2023	
Closeout (FY)	09/30/2023	

RM0-HX990-FACILITY UPGRADES

Agency:	DEPARTMENT OF BEHAVIORAL HEALTH (RM0)
Implementing Agency:	DEPARTMENT OF BEHAVIORAL HEALTH (RM0)
Project No:	HX990
Ward:	8
Location:	SAINT ELIZABETH HOSPITAL
Facility Name or Identifier:	SAINT ELIZABETH HOSPITAL
Status:	Developing scope of work
Useful Life of the Project:	10
Estimated Full Funding Cost:	\$17,605,000



Description:

This request is for capital funds for FY2023 and years after for SEH. Project 1: Parking Lot Expansion A reduction in hospital parking by 114 spaces has created a parking crisis and undermines the hospital's ability to perform its educational, patient care, judicial system support, and community services mission. Project 2: Energy Management Systems (Honeywell Control) The current energy management system at Saint Elizabeth Hospital was installed in 2009 and has reached its estimated life for proper use. Energy management systems provide the building control, energy management and integrated facility management systems such as air quality control devices, variable air volume systems which enable energy efficient HVAC system distribution by optimizing the amount and temperature of air distributed throughout to building. Appropriate operations and maintenance of HVAC systems is necessary to optimize system performance and achieve high energy efficiency. Project 3: Safety/Security Facility Assessment and Upgrades This list of projects relate to overall facility safety and security systems upgrades. In order to conduct the hospital's mission, facilities must be safe and secure for patients, employees, visitors and students. Projects that support facility safety include but are not limited to: Doors - Patients continuously damage and destroy doors throughout the hospital. Upgrading and reinforcing doors is critical to ensure compliance with hospital's safety and security standards. Fencing – Upgrading the fencing with hardening perimeter security measures to prevent escapes and intrusions to enhance visibility of the facility and adjoining property. Nursing Station - Upgrading the nursing station to provide security to the nursing staff. Safety Suite - Upgrade the safety suite to include padding the walls to prevent patient self-harm. Safety Windows - Upgrading the current windows to prevent patient tampering, escaping and self-harm. Project 4: Hot Water Heaters and Mixing Valves The current hot water heaters (in the kitchen) and mixing valves have reached their estimated useful life of 12 years. It is strongly recommended that the hot water heater and mixing valves be replaced at eight year intervals. Project 5: Replacement of Current Vents in Patient Rooms with Anti-Ligature Vents The years in patient care units have slats that create ligature points from which patients could harm themselves. CMS has incorporated a requirement that psychiatric hospitals become ligature resistant or ligature free, and has incorporated this requirement into the conditions of participation.

Justification:

This project is necessary to maintain the mission of the hospital to serve the community, building upgrades, adequate parking, safety for employees, visitors and employees and CMS requirements

Progress Assessment:

This is an ongoing project

Related Projects:

Milestone Data Environmental Approvals Design Start (FY) Design Complete (FY) Construction Start (FY)

Construction Complete (FY) Closeout (FY)

N/A

(Dollars in Thousands)

(Donais in Thousands)												
	Funding By Phase	e - Prior Fu	nding			Proposed F	unding					
Phase	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Total
(06) IT Requirements Development/Systems Design	8,105	196	3,901	220	3,789	6,900	2,600	0	0	0	0	9,500
TOTALS	8,105	196	3,901	220	3,789	6,900	2,600	0	0	0	0	9,500
	Funding By Source	e - Prior Fu	unding			Proposed F	unding					
Source	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Total
GO Bonds - New (0300)	8,105	196	3,901	220	3,789	6,900	2,600	0	0	0	0	9,500
TOTALS	8,105	196	3,901	220	3,789	6,900	2,600	0	0	0	0	9,500

Additional Appropriation Data	
First Appropriation FY	2019
Original 6-Year Budget Authority	1,185
Budget Authority Through FY 2027	9,255
FY 2022 Budget Authority Changes	0
6-Year Budget Authority Through FY 2027	9,255
Budget Authority Request Through FY 2028	17,605
Increase (Decrease)	8,350

03/30/2023

Estimated Operating Impact Summary Expenditure (+) or Cost Reduction (-) FY 2023 FY 2024 FY 2025 FY 2026 FY 2027 FY 2028 6 Yr Total No estimated operating impact

	Projected	Actual	Full Time Equivalent Data			
S	01/31/2022		Object	FTE	FY 2023 Budget	% of Projec
	01/31/2022		Personal Services	0.0	0	0.0
	05/28/2022		Non Personal Services	0.0	6,900	100.0
	08/31/2022					
FY)	02/28/2023					

RM0-HX999-SERVER ROOM AND DATA WAREHOUSE

Agency:	DEPARTMENT OF BEHAVIORAL HEALTH (RM0)
Implementing Agency:	DEPARTMENT OF BEHAVIORAL HEALTH (RM0)
Project No:	HX999
Ward:	8
Location:	1100 ALABAMA AVE SE
Facility Name or Identifier:	64 NEW YORK AVE NE
Status:	New
Useful Life of the Project:	
Estimated Full Funding Cost:	\$1,000,000



Description:

The server room at 64 New York Avenue does not have sufficient capacity nor ventilation to serve as a server room. 4 of the 6 DBH servers are at the end of their life stage. Will transfer to server room at Saint Elizabeth Hospital. The system transformation of DBH as a State Authority will require that a Data Warehouse be established to support policy decisions and evaluation of whole person care initiatives.

Justification:

The server room at 64 New York Avenue does not have sufficient capacity nor ventilation to serve as a server room. 4 of the 6 DBH servers are at the end of their life stage. Will transfer to server room at Saint Elizabeth Hospital. The system transformation of DBH as a State Authority will require that a Data Warehouse be established to support policy decisions and evaluation of whole person care initiatives.

Progress Assessment:

N/A

Related Projects:

No related projects

(Dollars in Thousands)

(
Funding By Phase - Prior Funding					Proposed Funding							
Phase	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Total
(06) IT Requirements Development/Systems Design	0	0	0	0	0	1,000	0	0	0	0	0	1,000
TOTALS	0	0	0	0	0	1,000	0	0	0	0	0	1,000
Funding By Source - Prior Funding Proposed Funding												
Source	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028	6 Yr Total
Short-Term Bonds – (0304)	0	0	0	0	0	1,000	0	0	0	0	0	1,000
TOTALS	0	0	0	0	0	1,000	0	0	0	0	0	1,000

Additional Appropriation Data				
First Appropriation FY				
Original 6-Year Budget Authority	0			
Budget Authority Through FY 2027	0			
FY 2022 Budget Authority Changes	0			
6-Year Budget Authority Through FY 2027	0			
Budget Authority Request Through FY 2028	1,000			
Increase (Decrease)	1,000			

Estimated Operating Impact Summary Expenditure (+) or Cost Reduction (-) No estimated operating impact FY 2023 FY 2024 FY 2025 FY 2026 FY 2027 FY 2028 6 Yr Tota

Increase (Decrease)	1,000	
Milestone Data	Projected	Actual
Environmental Approvals	10/1/2022	
Design Start (FY)	10/1/2022	
Design Complete (FY)	01/31/2023	
Construction Start (FY)	02/1/2023	
Construction Complete (FY)	05/31/2023	
Closeout (FY)	09/30/2023	

Full Time Equivalent Data							
Object	FTE	FY 2023 Budget	% of Project				
Personal Services	0.0	0	0.0				
Non Personal Services	0.0	1,000	100.0				