July 22, 2026

RE: Oregon Health Authority - Oregon State Hospital 2027-29 Biennial CPAB Memo

Board Chair Johnson:

The Oregon State Hospital (OSH) is pleased to present to you its proposed facilities plan for the 2027-2029 biennium. This plan supports the facilities in Salem, Junction City, and Pendleton; with a combined area of 1.2M ft^2, and a combined estimated current replacement value (CRV) of $885M.

The Peter Courtney Salem Campus consists of 960K ft^2 of buildings and interior secure perimeter courtyards, and 23 cottages with a CRV of $712M. The Junction City campus is 230K ft^2 with a CRV of $163M. Finally, the Pendleton facility consists of several older buildings with a total combined area of 39K ft^2, and a current replacement value of $8M.

OSH strives to achieve the highest standards and outcomes in all aspects of its work. Engaged stewardship of the public trust and public resources includes maintaining OSH's facilities portfolio to the highest standards and investing in regulatory and infrastructure improvements to meet the constantly evolving needs of patients and staff. OSH serves one of the most marginalized populations, Oregonians experiencing mental illness. Maintaining well-kept, safe, and functional treatment environments for Oregonians in need supports OHA's strategic plan to eliminate health inequities by ensuring that all people and communities can achieve optimum physical, mental, and social well-being through partnerships, prevention, and access to quality health care.

Since 2024 OSH has embarked on a long-term investment strategy to ensure its facilities effectively support the agency's mission, operational needs, and future service delivery. As a foundational step, OSH has completed an initial Facilities Strategic Capital Plan that identifies key infrastructure priorities and establishes a framework for future facility investments. Building on this work, OSH plans to complete a comprehensive agency wide master plan and conduct detailed facility building assessments during the 2027-29 biennium. Together, these planning efforts will provide the data and strategic direction needed to identify future capital needs, prioritize investments, and guide informed decision-making to maintain safe, efficient, and resilient facilities that support the agency's long-term objectives.

With their heavy use as a 24/7 secure mental health services operation, many building systems are nearing the end of their useful life, making capital improvement and capital construction investments an increasing priority while deferred maintenance continues to pose an ongoing challenge. The remaining structures, including the 23 cottages in Salem and the facilities in Pendleton, are much older and more maintenance intensive.

OSH utilizes a computerized maintenance management system to manage all facilities work order requests at its Salem and Junction campuses. OSH has a dedicated team of maintenance staff, varying across many different trades, with most asset PMs routinely performed by in-house trades staff or contractors. This team is also responsible for the management and maintenance of medical equipment.

OSH plans to partner with DAS to adopt a new building management software platform (TRIRIGA, equivalent, or combination of) to support its long-range strategic capital planning objective. OSH also plans to complete the assessments of all its facilities to establish a baseline building condition dataset to support this plan. Upon the successful completion of this project OSH will be better positioned to provide leadership with the data needed to make informed decisions in support of daily maintenance and long-term capital improvement and capital construction investment needs.

The Oregon State Hospital appreciates the Board's time, review, and guidance on this submitted plan.

Respectfully,



D. Chris Stewart, P.E.
Director of Facilities and Support Operations

Encl:
OSH 2026 CPAB Report
OSH 2026 Agency Plan
OSH 2026 CPAB Presentation

2027-29 FACILITY PLAN

Plan Cost Summary by Type and Priority	Total
Deferred Maintenance and Life Safety – Priority 1	**$12.1M**
Capital Renewal – Priority 2 + 3	**$15.9M**
Seismic and Risk – Priority 4	**$140,000**
Modernization (Net) – Priority 5	**$2.5M**
Total	**$30.7M**

The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care (PEC) for the 27/29 biennium, the coming decade, and beyond.

While the comprehensive implementation strategy is ongoing and still being refined through the planning process; the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of current and future strategic initiatives.

Advancing these priority investments now ensures the agency can maintain operational readiness and build the capacity required to effectively implement the long-term vision and recommendations.

The two submitted policy option packages (POPs) provide the support OSH needs to ensure business continuity with investments to reduce long-term escalation in needed capital outlay as building systems are added to the deferred maintenance backlog, and the need to modernize outdated building systems, infrastructure, and related equipment while also legislatively required, per ORS 291.215. This investment also supports evolving clinical programming changes and facility/infrastructure modernization needs. They also address the need for additional staffing capacity to ensure effective building portfolio asset management, contract administration, and project management.

The funding requested through these POPs also supports the completion of a master planning effort and comprehensive agency facilities assessments. Together, these initiatives will provide the data, analysis, and strategic framework needed to prioritize future capital investments,

optimize the management of OSH's facility portfolio, and ensure that future facility needs are planned efficiently and aligned with the agency's strategic objectives.

Collectively, these investments position the Oregon State Hospital to maintain safe, reliable, and sustainable operations while advancing a long-term, fiscally responsible approach to stewardship of its facilities and infrastructure.

By investing now, the agency will be better prepared to meet evolving clinical, operational, and legislative requirements while ensuring its physical environment of care (PEC) continues to support the delivery of high-quality inpatient care for years to come.

2027-2029 Agency Facility Plan

OREGON STATE HOSPITAL

D. Chris Stewart, P.E.
Director of Facilities and Support Operations

Seth Reed
Facilities Strategic Planning Analyst

Agency Overview

MISSION

- The Oregon State Hospital serves one of the most marginalized populations in Oregon, individuals experiencing mental illness. Maintaining well-kept, safe and functional treatment environments for Oregonians in need supports the Oregon Health Authority's strategic plan to eliminate health inequities by ensuring that all people and communities can achieve optimum physical, mental, and social well-being through partnerships, prevention, and access to quality health care.
- Its mission is to provide therapeutic, evidence-based, patient-centered treatment focusing on recovery and community reintegration in a safe environment.
- It serves more than 1,800 people per year and employs more than 2,900 staff.

PORTFOLIO

- The Oregon State Hospital (OSH) operates under the direction of the Oregon Health Authority (OHA) . The Peter Courtney Salem Campus has the capacity to serve up to 559 people at a time, and the Junction Campus can serve up to 145.
- The Pendleton campus is a residential care facility and has 16 beds.

SIZE

- Portfolio
  - CRV > 1M | Area → 1.2M ft^2 | CRV → $885M | 18 Count
  - CRV < 1M | Area → 60K ft^2 | CRV → $12.9M | 54 Count

FUNDING

- 95.1% GF | 1.6% OF | 3.3% FEDERAL

PETER COURTNEY SALEM CAMPUS



PETER COURTNEY SALEM CAMPUS



JUNCTION CITY CAMPUS



PENDLETON CAMPUS



Agency Overview

FACILITY SUMMARY

• Total facilities	72
• Total major facilities	18
• Total minor facilities	54
• Total current replacement value (CRV)	$885M
• Total gross square footage (GSF)	1.2M
• Total leased facilities	1
• Total leased square footage (LSF)	4,659
• Total major leases	0

Agency Overview

FACILITY CONDITION

• Current facility condition index (FCI)	5-10%[1]
• Current condition rating	Fair[1]
• Current FCI	TBD
• 10-Year FCI	TBD
• 10-Year condition rating	TBD
• 10-Year FCI	TBD
• Three biennium FCI trend	TBD

[1] Subject to change upon completion of a comprehensive OSH building & structure portfolio condition assessment.

Planning Factors

EMERGENT ISSUES

- Dynamic Programing Changes
- Lengthy Procurement and Capital Planning Timelines
- Operational Complexity in Active Treatment Environments
- Gradual Increase in Deferred Maintenance Backlog
- Aging Infrastructure and End-of-Life Systems
- Increase in the wear and tear of the facilities due to the acuity and severity of symptoms of the patients admitted.

Planning Factors

BUSINESS TREND | PROGRAM DELIVERY CHANGES

- Inpatient care services.
- The occupancy of the hospital is primarily determined by the judicial system.
- Periodic legal decisions will impact the number and commitment type of patients to be admitted to OSH.
- Depending on the changes in law, this can drive an increase or decrease to the facility demand, partially determined by the level of care required for new patient admissions and the associated adaptation of existing hospital space.

STRATEGIC OPPORTUNITIES

- Building condition assessments.

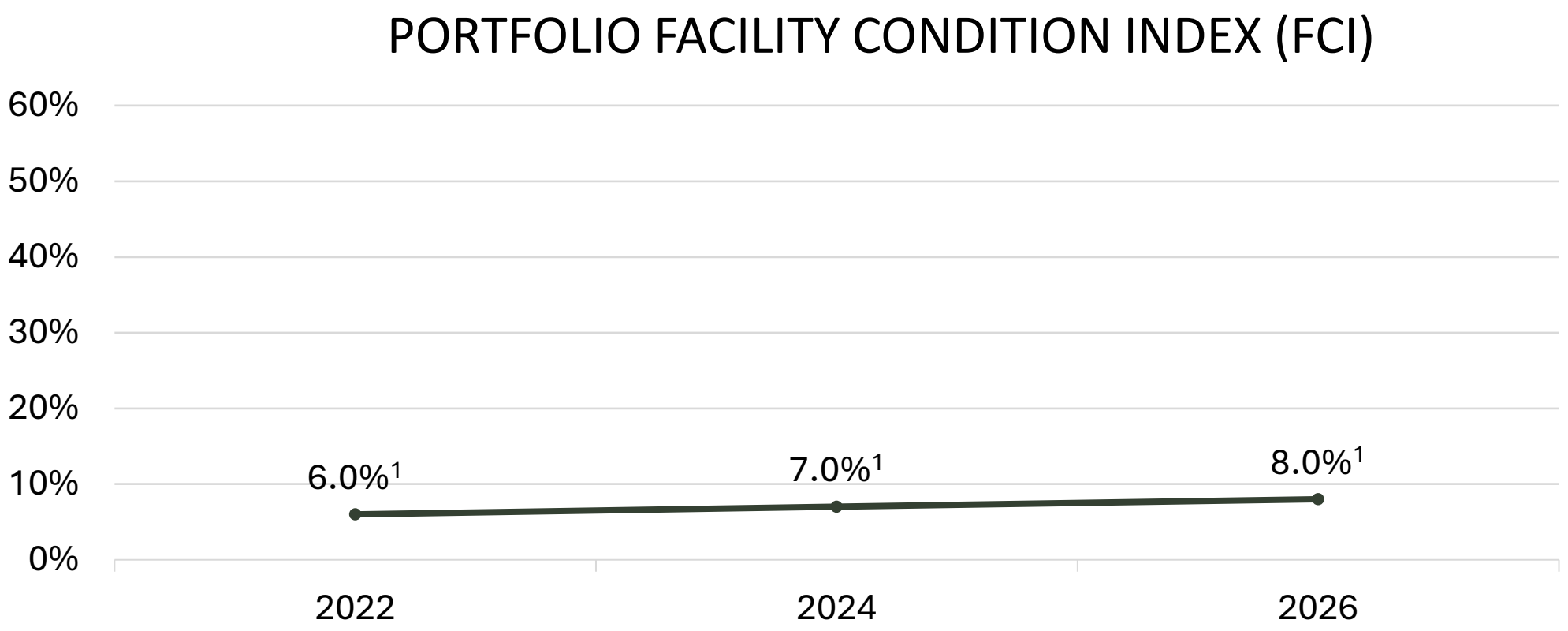
MASTER PLAN CONCEPTS

- Peter Courtney Salem Campus
  - Program Master Planning
  - Area Plan Update
- Junction City Campus
  - Program Master Planning
- Pendleton Campus
  - Program Master Planning

RISK/CLIMATE CHANGE MITIGATION

- Investing in sustainable building system upgrades as replacements come due.
- Emergency management to support resiliency.

Facility Condition



[1] Pending agency facilities portfolio condition assessment, FCI is estimated as a percentage of CRV

Energy

BUILDING ENERGY PERFORMANCE STANDARDS (BPS)

- Special Tier 2 Buildings
  - Peter Courtney Salem Campus Hospital Building
  - Junction City Hospital building
- Portfolio Energy Use Intensity (EUI) → 68.3
- Target EUI vs. actual EUI for covered buildings:

Special Tier II Buildings	Target EUI	Actual EUI
Peter Courtney Salem Campus Hospital	203	68
Junction City Campus Hospital	203	59.4

- Currently Enrolled in Energy Trust of Oregon's Strategic Energy Management Program

Seismic

SEISMIC RISK (EXECUTIVE ORDER 25-22 COMPLIANCE)

- The Peter Courtney Salem Campus Hospital building and Junction City Hospital building meet life safety seismic standards
- Prioritization plan – The Salem campus facilities building (33,000 Square feet) and the secure residential treatment facilities in Pendleton will undergo a seismic risk assessment with funding received through this Policy Option Package.
- Additional studies will be completed on the remaining auxiliary buildings pending completion of OSH's master planning effort.

Agency Plan Summary

Plan Cost Summary by Type and Priority	Total[1]
Deferred Maintenance and Life Safety – Priority 1	$12.1M
Capital Renewal – Priority 2 + 3	$15.9M
Seismic and Risk – Priority 4	$100,000
Modernization (Net) – Priority 5	$2.5M
TOTAL	**$30.7M**

[1]Total amounts do not include debt services and additional FTE cost.

Major Projects Summary

Project Name	Priority 1-3	Priority 4	Priority 5	Total	Phase
Salem Facilities Building Safety And Efficiency Renewal	$2.3M	$0	$70,000	$2.3M	I
Agency Wide Pavement renewal & ADA alignment	$4.5M	$0	$0	$4.5M	I
Junction City Dental Office Tenant Improvement	$0	$0	$1.2M	$1.2M	I
Salem Campus Seclusion Room Renewal	$3.7M	$0	$0	$3.2M	I
Building Management System Upgrade (BMS): HVAC | Lighting controls	$2.6M	$0	$0	$2.6M	II
Cooling Tower Drift Eliminator Renewal Project	$1.9M	$0	$0	$1.9M	II
Security Camera Replacement Project	$1.7M	$0	$0	$1.7M	II
Security Door Maglock Replacement Project	$1.2M	$0	$0	$1.2M	II

D. Chris Stewart, P.E.

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Facilities Summary Report
2027-29 Biennium

Facility Plan - Facilities Planning Narrative 107bf02a
2027-29 Biennium

Agency Name **Oregon State Hospital**

1. What are the key drivers for your agency's facility needs, and how do you measure space/facility demand?

The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care (PEC) for the 27/29 biennium, the coming decade, and beyond.

While the comprehensive implementation strategy is ongoing and still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of current and future strategic initiatives.

Advancing these priority investments now ensures the agency can maintain operational readiness and build the capacity required to effectively implement the long-term vision and recommendations.

2. What are the key facility-related challenges over the next 10-years? (Please answer in order of priority)

Lengthy Procurement and Capital Planning Timelines:

OSH's public improvement process, while thorough, is inherently slow. Projects often require multiple layers of approval, environmental and health care-related regulatory reviews. These timelines can stretch over several years, during which maintenance needs continue to grow and costs escalate. The result is a compounding effect where delays in addressing one issue often leads to more extensive and expensive repairs later.

Deferred Maintenance Backlog:

The Oregon State Hospital (OSH) faces a growing and complex backlog of deferred maintenance across its three campuses in Salem, Junction City, and Pendleton. This backlog threatens the long-term sustainability of critical infrastructures, and directly impacts the hospital's ability to provide safe and uninterrupted care to patients.

Aging Infrastructure and End-of-Life Systems:

Many building systems across the OSH portfolio such as HVAC, plumbing, electrical, and security systems, are aging faster than anticipated due to its 24/7 patient care high utilization and evolving regulatory standards; with many systems approaching the 10 and 15-year end of useful life. The Peter Courtney Salem Campus and the Pendleton secured residential treatment facility (SRTF) Campus, both w/older buildings and infrastructure, face even greater challenges; including deteriorating building envelopes, outdated mechanical systems, and the need for seismic and energy/sustainability upgrades.

Operational Complexity in Active Treatment Environments:

Performing maintenance in a secure psychiatric hospital setting adds significant complexity. Work must be carefully scheduled to avoid disrupting patient care, ensure staff and contractor safety, and to maintain compliance with federal and state regulations. Many repairs require temporary relocation of patients or staff, which is logistically challenging and resource intensive. This constraint often leads to deferral of non-critical repairs, further contributing to the backlog.

3. What do you need to meet these challenges?

The completed agency master plan, and its ongoing refinement, establishes a long-term strategic roadmap for campus modernization, infrastructure renewal, and future capital investments. It ensures projects are aligned with operational needs, patient safety requirements, regulatory compliance, and long-term sustainability and resiliency objectives.

A comprehensive building assessments (funding requested for 27/29 within OSH policy packages) will provide OSH with a clear, data-driven understanding of facility conditions, infrastructure risks, and capital priorities. These assessments will allow the agency to prioritize investments, reduce reactive maintenance, and address deficiencies before they become major system failures.

Direct contracting authority would allow OSH to respond more quickly to urgent infrastructure and facility needs. Faster project delivery reduces the impacts of lengthy procurement timelines, limits cost escalation, and helps prevent minor issues from developing into larger, more expensive failures.

Adopting a strategic capital investment account (ORS 276.285) would provide stable, predictable funding to address infrastructure needs proactively rather than reactively, and subsequently preserve state-owned property. Dedicated funding allows OSH to plan and phase projects efficiently, reduce emergency repairs, minimize operational disruptions, and extend the life of critical assets.

Together, these tools position OSH to transition from reactive maintenance to proactive capital management; subsequently improving reliability, protecting state investments, supporting regulatory compliance, and ensuring for safe and uninterrupted patient care across all OSH campuses.

Facilities Summary Report

2027-29 Biennium

Agency Name: **Oregon Health Authority (Agency) | Oregon State Hospital (Division)**

Owned Facilities Over $1 million

	FY 2025 DATA
Number of Facilities	18
Current Replacement Value $ (CRV)	$ 885,186,582
Gross Square Feet (GSF)	1,216,995
Usable Square Feet (USF)	888,406
Occupants Position Count (PC)	2,995

Source: Risk (Risk or FCA)

Estimate/Actual: *73* % USF/GSF

USF/PC: **296.63**

Owned Facilities Under $1 million

Number of Facilities	32
CRV	$ 12,940,896
GSF	75,354

Portfolio Stats:

- Total Structures → 76
- Total Area → 1.2M sq. ft.
  - Salem Campus is 952k sq. ft.
  - Junction City Campus is 226k sq. ft.
  - Pendleton Cottages Campus is 39k sq. ft.
- Total Acreage → 185
- Total Current Replacement Value (CRV) → $885M (S = $713M | JC = $164M | P = $9M)
  - CRV for buildings valued at > $1M → $872M
  - CRV for buildings valued at < $1M → $13M

Leased Facilities

Total Rentable SF	
Biennual Lease Cost	
Additional Costs for Lease Properties (O&M)	
Usable Square Feet (USF)	
Occupants Position Count (PC)	

Estimate/Actual: % RSF/GSF

USF/PC:

Definitions

CRV Current Replacement Value Reported to Risk ***or Calculated Replacment Value Reported from Facility Conditions Assessment (FCA)***

RSF Rentable SF per BOMA definition. The total usable area plus a pro-rated allocation of the floor and building common areas within a building.

USF Usable Square Feet per BOMA definition. Area of a floor occupiable by a tenant where personnel or furniture are normally housed plus building amenity areas that are convertible to occupant area and not required by code or for the operations of a building. If not known, estimate precentage.

PC Legislatively Approved Budget (LAB) Position Count

O&M Total Operations and Maintenance Costs for facilities including all maintenence, utilities and janatorial.

Facilities Operations and Maintenance and Deferred Maintenance Report

2027-29 Biennium

Agency Name: **Oregon State Hospital**

Facilities Operations and Maintenance (O&M) Budget	**2023-25 Actual**	**2025-27 LAB**	**2027-29 Budgeted**	**2029-31 Projected**
Personal Service (Maintenance)	$ 16,167,428	$ 18,334,265	$ 19,434,321	$ 20,386,603
Services & Supplies (Maintenance)	$ 5,549,958	$ 6,183,710	$ 6,629,779	$ 6,954,638
O&M $/GSF (Maintenance)			$ 26,064,100	
Personal Service (Utilties & Janitorial)	$ 15,225,660	$ 14,670,502	$ 15,550,732	$ 16,312,718
Services & Supplies (Utilties & Janitorial)	$ 4,124,604	$ 5,002,844	$ 5,247,983	$ 5,505,134
O&M $/GSF (Utilities & Janitorial)			$ 20,798,715	

	General Fund	**Lottery Fund**	**Other Funds**	**Federal Funds**
O&M Estimated Fund Split %	100%	0%	0%	0%

Short and Long Term Deferred Maintenance Plan for Facilities Value Over $1M	**Current Value (2025)**	**Ten Year Projection**	**2025-27 Budgeted**	**2027-29 Projected**
Priorities 1-3 - Currently, Potentially and Not Yet Critical	See tables below		$ 1,609,732	$ 2,137,800
priority 4 - Seismic & Natural Hazard	See tables below		$ -	$ -
Priority 5 - Moderization	See tables below		$ -	$ 105,000
Total Priority Need	$ 8,722,456	$ 87,224,568	$ 1,609,732	$ 2,242,800
Facility Condition Index (Need/CRV)	5 - 10%[1,2]	5 - 10%[1,2]	5 - 10%[1,2]	5 - 10%[1,2]

Assets Over $1M CRV	$ 872,245,686

Process/Software for routine maintenance (O&M)	z-Link | Faciliites Management, Inspection, & Asset Managment Software
Process/Software for deferred maintenance/renewal	TRIRIGA (DAS managed/supported)
Process for funding facilities maintenance	Known requests budgeted internally at OSH at LAB, adjustments as needs arise.

[1]Estimated - subject to change upon completion of a comprehensive building/structures portfolio assesment.

[2]The comprehensive building/structure portfolio assessment is in partnership w/DAS, who is currently developing a statewide master contract/agreement.

Capital Improvement Plan for Facilities Value Over $1M (POP1)

	2027-29 Projected
Priorities 1-3 - Currently, Potentially and Not Yet Critical	$ 16,832,151
priority 4 - Seismic & Natural Hazard	$ 70,000.00
Priority 5 - Moderization	$ 381,500.00
Total Priority Need	$ 17,283,651.00

Capital Improvement Plan for Safety, Security, Infrastructure, and Equipment (POP2)

	2027-29 Projected
Priorities 1-3 - Currently, Potentially and Not Yet Critical	$ 11,380,040.00
priority 4 - Seismic & Natural Hazard	$ 30,000.00
Priority 5 - Moderization	$ 2,189,755.00
Total Priority Need	$ 13,599,795.00

Capital Management Summary

Campus	Square feet	Current Replacement Value	Known Existing DM+CI	FCI
Salem Campus Total	951,987	$ 712,792,902.00	$ 52,144,835.12	7.21%
Junction City Campus Total	226,499	$ 163,764,010.00	$ 3,158,030.46	1.96%
Pendleton Campus Total	38,501	$ 8,629,670.00	$ 3,472,823.78	23.35%
OSH Total	1,216,987	$ 885,186,582.00	$ 58,775,689.36	6.64%
Buildings Valued > $1M	1,145,522	$ 872,245,686.00	$ 56,079,374.78	6.43%
Buildings Valued < $1M	75,346	$ 12,940,896.00	$ 2,768,325.92	21.39%

2027-29 Policy Package Deferred Maintenance

Deferred Maintenance	Estimated Cost	DAS Priority
Heat wheel Replacement (x1) High need (Not functioning)	$ 147,000.00	1
Heat wheel Replacement (x1) High need (Not functioning)	$ 147,000.00	1
Heat wheel replacement (x1) (failure predicted soon)	$ 147,000.00	2
Heat wheel replacement (x3)	$ 441,000.00	3
Heat wheel replacement (x2)	$ 294,000.00	3
Fire sprinkler head testing	$ 105,000.00	1
Rehang doors within Harbors Psychiatric Care Unit (x10)	$ 133,000.00	1

Chiller Repair #2	$ 51,100.00	1
Chiller Repair #3	$ 51,100.00	1
Cooling tower I-beams blasting and repaint	$ 35,000.00	1
Cup water treatment system	$ 70,000.00	1
Backup power transfer switch maintenance	$ 35,000.00	2
Paint/stain exterior (high facia and exposed wood only)	$ 166,600.00	2
Repoint masonry at Kirkbride and Harbors Quad 4	$ 21,000.00	2
Clean exterior surfaces	$ 105,000.00	2
Replace battery bank for medium voltage breakers	$ 49,000.00	3
Relocate plumbing & electrical utilities at tunnel to Dome building (A&E)	$ 70,000.00	3
Tennis court renewal concrete/fencing replacement	$ 35,000.00	3
Breaker testing/Hi Pot (requires shutdown)	$ 35,000.00	3
Park bathroom renewal or razing	$ 105,000.00	5
Deferred Maintenance Total	**$ 2,242,800.00**	

Major Construction/Acquisition 10-Year Plan, Lease Plans, Disposals

2027-29 Biennium

Agency Name: OHA - Oregon State Hospital

Proposed New Construction or Acquisition - *Complete for 5 Biennia*

Biennium	Priority	Concept/Project Name	Description	GSF	Position Count (LD)	General Fund (Deferred Maintenance)	Other Funds XI-Q Bonds (Capital)	Lottery Funds	Federal Funds	Estimated Cost/Total Funds
2027-29	1-3	Capital Improvement plan for Salem Campus Facilities (Policy Package 1)	Current identified needs for immediate capital improvement on The Peter Courtney Salem campus of the Oregon State Hospital		3	$ 4,010,260	$ 12,767,551			$ 16,777,811
2027-29	1-3	Capital Improvement plan for Junction City Campus Facilities (Policy Package 1)	Current identified needs for immediate capital improvement on The Peter Courtney Salem campus of the Oregon State Hospital				$ 2,706,515			$ 2,706,515
2027-29	1-3	Capital Improvement plan for Pendleton Campus Facilities (Policy Package 1)	Current identified needs for immediate capital improvement on The Peter Courtney Salem campus of the Oregon State Hospital				$ 870,915			$ 870,915
2027-29	1-3	Capital Improvement Plan for Safety, Security, Infrastructure, and Equipment (Policy Package 2)	Package of Projects Addressing the immediate identified needs for safety, security, infrastructure and equipment including: •Salem Facilities building safety and efficiency renewal •Salem grounds Safety and Environmental modernization •Junction City A&E for Building & Infrastructure improvements •Agency Wide Parking lot Sealing, Restriping, and ADA alignment •Dental Office Tenant Improvement •Salem Seclusion Room Renewal •Salem Med room Safety Improvements (24)		3		$ 15,845,498			$ 15,845,498
2027-29	4-5	Modernization and seismic priorities	Salem campus Facilities building and Pendleton secure residential treatment facilities seismic studies				$ 100,000.00			$ 100,000.00
2029-31	1-3	Facilities investment and deferred maintenance reduction	Known existing facility investment needs deferred to 29-31 biennium				$ 9,665,748.93			$ 9,665,748.93
2029-31	1-3	Projected additional Capital improvements[1]	Estimated additional facility investment needs for Capital improvement and deferred maintenance reduction				$ 7,914,252.00			$ 7,914,252.00
2031-33	1-5	Estimated Facilities Invesments[2]					$ 18,459,000.00			$ 18,459,000.00
2033-35	1-5	Estimated Facilities Invesments[2]					$ 19,381,950.00			$ 19,381,950.00
2035-37	1-5	Estimated Facilities Invesments[2]					$ 20,351,047.00			$ 20,351,047.00

[1] Projection calculated at 2% of CRV then subtracting know existing capital improvement and deferred maintenance needs for the 29-31 biennium. Subject to change upon completion of comprehensive OSH building structures portfolio assessments (27-29 Biennium).

[2] Estimation calculated at 2% of CRV escalated by average predicted annual inflation rate of 2.5%. Subject to change upon completion of comprehensive OSH building structures portfolio assessments (27-29 Biennium).

Proposed Lease Changes over 10,000 RSF - *Complete for 5 Biennia*

Biennium		Location	Description/Use	Term in Years	Total RSF[2] +/- (added or eliminated)	USF[3]	Position Count1	Biennial $ Rent/RSF[2]	Biennial $ O&M[4]/RSF[2] not included in base rent payment	Total Cost / Biennium
					A	B	C	D	E	(D+E)*A
2027-29		NA	NA	NA						-
2029-31		NA	NA	NA						-
2031-33		NA	NA	NA						-
2033-35		NA	NA							-
2035-37		NA	NA							-

Planned Disposal of Owned Facility

Biennium		Facility Name	Description
NA		NA	NA
NA		NA	NA

Definitions:

Position Count: **1** Total Legislatively Approved Budget (LAB) Position Count assigned to (home location) each building or lease as applicable.

RSF **2** Rentable SF per BOMA definition. The total usable area plus a pro-rated allocation of the floor and building common areas within a building.

USF **3** Usable Square Feet per BOMA definition for office/administrative uses. Area of a floor occupiable by a tenant where personnel or furniture are normally housed plus building amenity areas that are convertible to occupant area and not required by code or for the operations of a building. If not known, estimate the percentage.

O&M **4** Total Operations and Maintenance Costs for facilities including all maintenance, utilities and janitorial.

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Salem Facilities Safety and Efficiency Renewal	$ 2,278,008	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	335,925	2	Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care for the 27/29 biennium, the coming decade, and beyond. While the comprehensive implementation strategy is still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of future strategic initiatives. Advancing these priority investments now ensures OSH can maintain operational readiness and patient care business continuity. BUDGETARY REQUEST: This investment will address the immediate needs of the Peter Courtney Salem campus facilities building correcting life safety , code compliance, critical infrastructure, and operational efficiency issues that currently exist.

Project Scope and Alternatives Considered
This project represents a set of capital improvements to the hospital's Facilities Building to ensure continued operational reliability, regulatory compliance, and support for critical healthcare services. These upgrades are driven by five core priorities: seismic resilience, security, life safety, space optimization, and modernization of mechanical, electrical, and plumbing (MEP) systems. **Life Safety and Code Compliance:** • Structural and access improvements including replacement of the northeast entrance stairwell and ADA ramp, south entrance stairway. enhancements to the roof access system will ensure safe, compliant ingress and egress for staff and visitors. • Lead remediation through encapsulation and full interior repainting will mitigate environmental health risks while extending the useful life of the building

• Lead remediation through encapsulation and full interior repainting will mitigate environmental health risks while extending the useful life of the building envelope.

Critical infrastructure modernization:

• Electrical system upgrades and replacement of end-of-life air conditioning equipment will improve reliability, reduce downtime risk, and support hospital operations.
• Energy-efficient window improvements will enhance thermal performance and reduce operating costs, aligning with sustainability goals.
• Security and emergency preparedness enhancements including updated building security systems and installation of an emergency operations satellite will strengthen the hospital's resilience and response capabilities in crisis situations.

Operational Efficiency and Functionality:

• Replacement of overhead doors
• Renewal of the paint shop spray booth
• Updates to facilities systems furniture (FFE).
• Temporary staffing offices will ensure continuity of operations during the renovation period, minimizing disruption to hospital services.

These investments are essential to maintaining a safe, secure, and efficient facilities environment that underpins the hospital's mission. The proposed

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 1,638,030	73%	$ 49
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems		$ 32,761		
5	Construction Related Permits & Fees		$ 42,227		
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 29,484		
7	Architectural, Engineering Consultants		$ 245,705		
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 350,177	15%	$ 10
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 289,800	12.00%	$ 6
			$	**% Project Cost**	**$/GSF**
	TOTAL PROJECT COST		$ 2,278,008	100%	$ 65

Project Image/Illustration (optional)

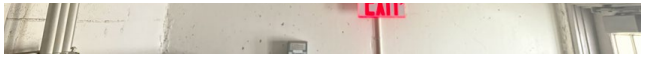








Failing Concrete at south entrance stairwell



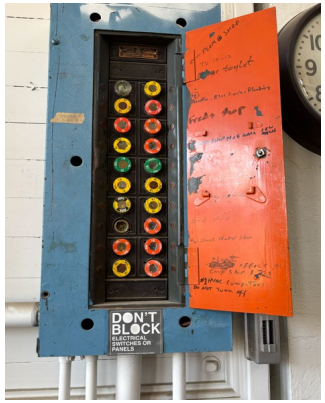
Failing Concrete at north entrance stairwell



Failing Concrete at north entrance stairway



Unsafe roof access



End of life fuse box

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Agency Wide Parking Lot Improvements	$ 4,556,104	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	1,162,560		Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care for the 27/29 biennium, the coming decade, and beyond. While the comprehensive implementation strategy is still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of future strategic initiatives. Advancing these priority investments now ensures OSH can maintain operational readiness and patient care business continuity. BUDGETARY REQUEST: This investment is a multi-phase initiative to improve accessibility, safety, and overall functionality of parking and roadway infrastructure across all three campuses. This effort addresses system deficiencies, regulatory non-compliance, and capacity constraints while

Project Scope and Alternatives Considered
Peter Courtney Salem Campus: **Project cost: $3,790,332** • ADA compliance and expansion study to inform the phased implementation of ADA-compliant improvements, including the installation of compliant curb ramps, accessible route improvements, traffic flow improvements to align with changing programming needs. These upgrades are critical to ensuring equitable access, reducing liability, and aligning all campuses with current accessibility standards. • To preserve and extend the life of existing infrastructure, the program includes resealing and restriping approximately 891,187 square feet of parking lots and roadways **Junction City Campus:**

Junction City Campus:
Project cost: $317,086

• Parking expansion will increase capacity to meet growing demand and reduce congestion. This will include additional surface water runoff mitigation as well as expanded lighting and security camara installations

Pendleton Campus:
Project cost: $448,686

• Repaving the east parking lot and driveway will restore deteriorated pavement, eliminate safety hazards, and improve overall usability.

These improvements will modernize critical access infrastructure across the organization, ensuring compliance, improving safety, and supporting efficient campus operations. This program represents a cost-effective investment in maintaining essential assets while enhancing accessibility and the overall user experience.

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 3,576,592	79%	$ 3
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems				
5	Construction Related Permits & Fees		$ 35,000		
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 113,902		
7	Architectural, Engineering Consultants		$ 375,000		
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 523,902	11%	$ 0
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 455,610	10.00%	$ 0
			$	**% Project Cost**	**$/GSF**
	TOTAL PROJECT COST		$ 4,556,104	100%	$ 4

Project Image/Illustration (optional)



Peter Courtney Salem Campus



Junction City Campus



Pendleton Campus



Non-compliant accessible routes



Proposed additional parking



Deteriorated asphalt at campus entrance

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Dental Office Tenant Improvement	$ 1,249,880	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	240		Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care for the 27/29 biennium, the coming decade, and beyond. While the comprehensive implementation strategy is still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of future strategic initiatives. Advancing these priority investments now ensures OSH can maintain operational readiness and patient care business continuity. BUDGETARY REQUEST: This investment is to expand clinical capabilities and improve access to essential oral health services within the hospital setting. This project will deliver a fully functional and code-compliant dental operatory designed to meet healthcare standards for safety, infection control, and

Project Scope and Alternatives Considered
The Junction City Dental Clinic Construction Project is a targeted investment to expand clinical capabilities and improve access to essential oral health services within the hospital setting. This project will deliver a fully functional, code-compliant dental operatory designed to meet healthcare standards for safety, infection control, and patient care. • The scope includes installation of specialized dental equipment and furnishings (FFE) necessary to support comprehensive clinical services. This includes dental cabinetry, chair and operatory lighting, delivery systems, compressed air, and a dental vacuum system with an amalgam separator to ensure proper handling of waste materials. Imaging capabilities will be incorporated with X-ray equipment designed to meet all Authority Having Jurisdiction (AHJ) and radiation compliance requirements. Sterilization processes will be efficiently integrated by leveraging an existing sterilization room

nearby, optimizing space and operational workflow.
• Mechanical system upgrades are a critical component of the project, aligning with best practices for infection control. Additional filtration and the introduction of negative air pressure will further reduce the risk of airborne contamination and enhance patient and staff safety.
• Interior finishes will be upgraded to meet clinical standards, including installation of continuous, seam-welded flooring to support infection prevention and ease of cleaning. Ceiling systems will be evaluated and potentially converted to a hard-lid design consistent with other clinical operatories, improving durability and hygiene control.
• Electrical and low-voltage systems will be modernized to support specialized dental equipment, including dedicated circuits for the dental chair, operatory lighting, vacuum and air systems, and X-ray equipment. Data infrastructure will include IT and data drops to enable digital imaging, electronic charting, and seamless integration with hospital systems.

Collectively, these improvements will establish a modern, efficient, and compliant dental clinic within the Junction City hospital. The project supports the organization's mission by expanding access to care, improving patient outcomes, and ensuring a safe, high-quality clinical environment for both patients and staff.

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 725,829	58%	$ 3,091
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems				
5	Construction Related Permits & Fees		$ 39,803		
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 19,050		
7	Architectural, Engineering Consultants		$ 340,200		
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 399,053	32%	$ 1,662
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 124,998	10.00%	
			$	**% Project Cost**	**$/GSF**
	TOTAL PROJECT COST		$ 1,249,880	100%	$ 4,753

Project Image/Illustration (optional)

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Salem Seclusion Room Renewal	$ 3,714,991	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	7140		Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care for the 27/29 biennium, the coming decade, and beyond. While the comprehensive implementation strategy is still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of future strategic initiatives. Advancing these priority investments now ensures OSH can maintain operational readiness and patient care business continuity. BUDGETARY REQUEST: This investment will Implement design changes that have proven to increase safety and the quality of patient care on the Junction City Campus. Recent sentinel events and staff injuries have highlighted the urgent need to implement these modifications.

Project Scope and Alternatives Considered
Salem Seclusion Room Renewal The Seclusion Room Safety Upgrades Project is a critical initiative to enhance patient and staff safety, reduce risk, and ensure compliance with behavioral health and ligature-resistant design standards across the Salem campuses 24 seclusion rooms. These targeted improvements address identified safety gaps in high-risk care environments where patients may be in acute distress. • Replacement of seclusion room doors and bathroom doors with ligature-resistant assemblies equipped with remote locking capability. These improvements will allow staff to maintain control of the environment while minimizing direct physical intervention, reducing the risk of injury to both patients and caregivers.

patients and caregivers.

• The installation of remote water shutoff systems further enhances safety by enabling staff to quickly respond to potential flooding or self-harm risks.

• Installation of impact-resistant padding between the anteroom and seclusion room door, helping to prevent injury during episodes of agitation or distress.

Collectively, these improvements will create safer, more controlled care settings that support de-escalation, protect patient dignity, and reduce staff exposure to risk. This project reflects a proactive commitment to patient-centered care, regulatory compliance, and continuous improvement in high-acuity treatment environments.

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 3,448,959	93%	$ 483
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems		$ 63,467		
5	Construction Related Permits & Fees		$ 3,880		
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 34,906		
7	Architectural, Engineering Consultants				
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 102,253	3.00%	$ 14
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 163,779	4.00%	$ 23
			$	**% Project Cost**	**$/GSF**
	TOTAL PROJECT COST		$ 3,714,991	100%	$ 520

Project Image/Illustration (optional)

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Salem Building Management System Upgrade	$ 2,613,748	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	951,995		Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care for the 27/29 biennium, the coming decade, and beyond. While the comprehensive implementation strategy is still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of future strategic initiatives. Advancing these priority investments now ensures OSH can maintain operational readiness and patient care business continuity. BUDGETARY REQUEST: This investment will effectively integrate lighting control panels with the building management system (BMS) system; a strategic upgrade that delivers energy efficiency, cost savings, improved system reliability, and enhanced occupant satisfaction. It positions the facility for smarter,

Project Scope and Alternatives Considered
This proposal includes the installation of advanced lighting control panels integrated with the existing Building Management System (BMS) to improve operational efficiency and reduce energy consumption at the Salem Campus. Lighting represents a significant portion of overall energy use in commercial and institutional buildings. By implementing centralized lighting control panels connected to the BMS, the organization can gain real-time visibility and control over lighting systems. This integration enables automated scheduling, occupancy-based control, daylight harvesting, and remote system management—leading to measurable reductions in energy waste and utility costs.

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 2,016,779	77%	$ 2.12
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems				
5	Construction Related Permits & Fees		$ 38,495		
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 48,750		
7	Architectural, Engineering Consultants		$ 281,250		
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 368,495	14%	$ 0
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 228,474	9.00%	$ 0
			$	**% Project Cost**	**$/GSF**
	TOTAL PROJECT COST		$ 2,613,748	100%	$ 3

Project Image/Illustration (optional)

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Cooling Tower Drift Eliminator Project	$ 1,973,574	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	951,995		Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
OSH's Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, capital investments, and organizational growth for the coming decade. While the comprehensive implementation strategy is still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed prior to full implementation of the Master Plan. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of future strategic initiatives. Advancing these priority investments now ensures the agency can maintain operational readiness and build the capacity required to effectively implement the long-term vision and recommendations that will emerge from the completed Master Plan. BUDGETARY REQUEST: Replacing the existing drift eliminators with modular media is a cost-effective and practical upgrade that enhances system performance, simplifies maintenance, and supports sustainable and compliant facility operations. This improvement will contribute to greater reliability and long-term efficiency of the cooling tower system.

Project Scope and Alternatives Considered
REQUEST: this investment will modernize the existing HVAC cooling tower system. Over time, the current fixed-style eliminators have become less effective due to wear, scaling, and limited accessibility for cleaning and repair. This degradation contributes to increased water consumption, chemical loss, and the potential for environmental and regulatory concerns. The proposed modular drift eliminator media offers a modern solution with enhanced efficiency in capturing water droplets while allowing for easier inspection, cleaning, and replacement. Unlike traditional fixed assemblies, the modular design enables maintenance teams to remove and service individual sections without requiring extensive disassembly or system downtime. This significantly reduces labor costs and improves maintenance response times.

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 1,656,909	84%	$ 2
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems				
5	Construction Related Permits & Fees		$ 23,250		
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 43,400		
7	Architectural, Engineering Consultants		$ 77,500		
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 144,150	7%	$ 0
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 172,515	9.00%	$ 0
			$	**% Project Cost**	**$/GSF**
	TOTAL PROJECT COST		$ 1,973,574	100%	$ 2

Project Image/Illustration (optional)

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Security Camera Renewal	$ 1,737,492	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	951,995		Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
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Project Scope and Alternatives Considered
Given the sensitive nature of our patient population and the need for continuous, reliable monitoring, maintaining a fully functional and secure surveillance system is essential. The existing cameras are no longer supported by the manufacturer making repairs and replacements increasingly more difficult to procure, also limited in resolution and performance, reducing the effectiveness of incident detection, investigation, and overall situational awareness. This investment will directly support patient and staff safety, reduce institutional risk, and ensure compliance with healthcare security standards and best practices. While the upfront capital cost is significant, the long-term benefits include reduced maintenance expenses, improved operational efficiency,

and mitigation of risks associated with system failure and outage turnaround time.

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 1,531,369	88%	$ 2
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems				
5	Construction Related Permits & Fees				
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 17,374		
7	Architectural, Engineering Consultants		$ 15,000		
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 32,374	2%	$ 0
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 173,749	10.00%	$ 0
			$	**% Project Cost**	**$/GSF**
	TOTAL PROJECT COST		$ 1,737,492	100%	$ 2

Project Image/Illustration (optional)

Major Construction/Acquisition Project Narrative

Note: *Complete a separate form for each project*

Agency:	Oregon State Hospital	Priority (Agency #):		Schedule:	
		Cost Estimate	Cost Est.Date	Start Date	Est. Completion
Project Name:	Security Doors - Maglock Replacement	$ 1,202,070	5/1/2026		
		GSF	# Stories	Land Use/Zoning Satisfied:	
Address/Location:	2600 Center Street NE Salem, OR 97301	951,995		Y	N

Funding Source(s): Show the distribution of dollars by funding source for the full project cost.	General Fund	Lottery	Other	Federal

Description of Agency Business/Master Plan and Project Purpose/Problem to be Corrected
The Oregon State Hospital's (OSH) Facilities Program has completed the first iteration of its strategic capital plan; providing both a short- and long-term list of facility investment needs. These investments include operational priorities, maintenance needs, and capital investments in support of the patient physical environment of care for the 27/29 biennium, the coming decade, and beyond. While the comprehensive implementation strategy is still being refined through the planning process, the current funding requests have been identified as critical and time-sensitive needs that must be addressed. These requests represent foundational investments necessary to stabilize current operations, maintain continuity of services, address immediate infrastructure and resource gaps, and position the agency for successful execution of future strategic initiatives. Advancing these priority investments now ensures OSH can maintain operational readiness and patient care business continuity. BUDGETARY REQUEST: This investment will support the replacement of all end-of-life maglocks with modern and code-compliant electromagnetic locking systems designed for healthcare and high-security settings.

Project Scope and Alternatives Considered
The facility's current magnetic door locking (maglock) systems are increasingly reaching end-of-life status and are no longer manufactured which carries significant safety and liability implications in a secure behavioral health environment. This will require replacement with modern devices as the existing devices fail. With a goal of campus wide replacement with new standardized devices over the next 5-6 years. Updated systems will offer improved reliability and availability. These upgrades will ensure doors respond appropriately during emergencies (e.g., fire alarm release) while maintaining strict access control under normal operations. This investment is essential to maintaining a safe, compliant, and secure environment. Replacing the obsolete maglock infrastructure will mitigate operational risks, support regulatory compliance, and reinforce our commitment to patient and staff safety.

operational risks, support regulatory compliance, and reinforce our commitment to patient and staff safety.

ESTIMATED PROJECT COST

			$	% Project Cost	$/GSF
DIRECT CONSTRUCTION COSTS					
1	Building Cost Estimate				
2	Site Cost Estimate (20 Ft beyond building footprint)				
3	**TOTAL DIRECT CONSTRUCTION COSTS**		$ 1,055,416	88%	$ 1
INDIRECT CONSTRUCTION COSTS					
4	Owner Equipment / Furnishings / Special Systems				
5	Construction Related Permits & Fees		$ 15,591		
6	Other Indirect Construction Costs Including 1% Art, 1.5% Renewable Energy and other state or unique regulatory requirements not in hard costs		$ 8,662		
7	Architectural, Engineering Consultants		$ 17,325		
8	Other Design and PM Costs				
9	**TOTAL INDIRECT COSTS**		$ 41,578	3%	$ 0
10	**OWNER'S PROJECT CONTINGENCY**	insert %	$ 105,076	9.00%	$ 0

	$	% Project Cost	$/GSF
TOTAL PROJECT COST	$ 1,202,070	100%	$ 1

Project Image/Illustration (optional)

Oregon
Tina Kotek, Governor

Department of Administrative Services
155 Cottage Street NE
Salem, OR 97301

MEMORANDUM

DATE: August 18, 2026

TO: D. Chris Stewart, Director of Facilities and Support Operations, Oregon State Hospital

FROM: Daniel Christensen, Department of Administrative Services

SUBJECT: Agency Facility Plan Acceptance

The Capital Projects Advisory Board (CPAB/Board) has reviewed the Oregon State Hospital's 2027-29 facilities plan in accordance with ORS 276.227. Following your Board presentation on August 14, the Board voted to accept your agency facility plan with the following comments:

- The Board recognizes the agency's ability to serve its patients and maintain compliance requirements.
- The Board appreciates the agency's efforts to further build a team and improve analytics.

DAS DEPARTMENT OF ADMINISTRATIVE SERVICES

Capital Projects Advisory Board

Agency Facility Plan Acceptance

CPAB Meeting Date 08/14/26

Presenting Agency

OSH

Does the board accept the agency facility plan?

Yes

Additional Comments

Being real progressive in building teams
Very compliant - shout out to joint commission and how it relates to improving their analytics
Keeping up with the demands of their patients and the requirements on the building(s).

DAS DEPARTMENT OF ADMINISTRATIVE SERVICES

Capital Projects Advisory Board

Project Proposal Review and Acceptance

CPAB Meeting Date 08/14/26

Presenting Agency

OSH

Presentation

Salem Facilities Building Safety And Efficiency Renewal

Project Proposal Review Questions

1. Is the project supported by the agency's strategic facility and master plan?	Unknown
2. Has the agency identified or secured an appropriate project site?	N/A
3. Is the project a continuation/completion of a project (e.g. additional phase)?	Yes
4. Is the project construction-ready?	No
5. Does the project reduce the agency's deferred maintenance backlog?	Yes
6. Does the project mitigate a risk(s) to the agency's facilities? (e.g. seismic/life safety, EO 25-22 compliance)	Yes
7. Does the project implement climate change adaptation strategies? (e.g. energy efficiency measures, BPS compliance (HB 3409))	Yes
8. Does the agency have sufficient capacity to execute the project? (i.e. staff)	Unknown
9. Does the project result in a net consolidation of space? (i.e. reduce the portfolio)	No
10. Does the project support agency collaboration? (e.g. shared facility)	No
11. Does the project budget seem reasonable for the scope of work?	Unknown