OREGON STATE HOSPITAL



Kate Brown, Governor



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TO: The Honorable Fred Girod, Co-Chair

The Honorable Paul Holvey, Co-Chair

Joint Committee On Ways and Means Subcommittee On Capital Construction

FROM: Jerry Frampton, Director of Facility Operations

Oregon State Hospital
Oregon Health Authority

SUBJECT: SB 5506, Capital Improvements

Co-Chair Girod, Co-Chair Holvey, and members of the committee; I am Jerry Frampton, the Director of Facility Operations at the Oregon State Hospital (OSH). I am here today to outline the purposes and benefits of the capital improvements requested by the Oregon Health Authority for the hospital, which are proposed in SB 5506.

OSH has identified three critical capital improvement projects, which would, respectively, provide:

- A safe and secure environment for patient care in the case of loss or contamination of city water, such as in the 2018 cyanotoxin event or from a natural disaster such as an earthquake.
- Expanded clinical staff space.
- Enhanced patient treatment capability by repurposing existing space.

The OSH Salem Campus is the primary state psychiatric facility serving some of Oregon's most vulnerable populations. It has capacity for 592 patients, resulting in a minimum of 725 people on campus during any one shift, with potential for over 1,600 staff, visitors, and/or vendors. As evidenced by the COVID-19 pandemic, we must be prepared to adapt to emergency situations that impact the health and safety of a population that is essentially restricted to the hospital.

OSH is almost an entirely self-contained facility. It has backup generators to provide electricity during

a power outage event, and a backup propane system for heating and cooking in case of loss of natural gas. However, we have only one single point of connection to city water, fed through a 1950s era 10-inch steel underground pipe. This leaves the hospital vulnerable to a complete loss of water for drinking and sanitation, which could result in significant medical and sanitary concerns. Using our existing but unconnected well and constructing a well water treatment facility and



potable water storage tanks would create self-sufficiency and ensure a safe water supply in the event of a disruption in city water for any reason. Estimated cost: \$4,380,000.

The hospital has a shortage of administrative and program staff space within the secure perimeter where treatment staff can be close to patients. Current conditions require the placement of staff and programs in non-ADA compliant cottages. OSH has identified an opportunity within the secure perimeter that would add 2,700 square feet to accommodate 32 staff, by constructing a second floor inside an existing building, which would allow for more convenient and cost effective construction. This space will afford more timely and efficient contact with patients by those staff who must be on property to deliver care. Estimated cost: \$1,643,386.

The hospital also has identified an opportunity to repurpose 24 existing therapy tub rooms on units that are no longer used due to patient safety concerns. OSH proposes to remodel these rooms to create additional treatment space for staff to interact with patients. As with the proposal above, this project would create substantial useable space, and a safe and ADA compliant environment for patients and staff, without the expense of constructing all-new buildings. Estimated cost: \$500,000.

I would be pleased to answer any other questions you may have about these projects. Thank you for the opportunity to share this information.