

INTERIM EMERGENCY BOARD

Thursday, January 16, 2025

8:30 AM

Senate Committee Room E

Louisiana State Capitol

MEETING MINUTES

A public meeting of the Interim Emergency Board was held at the State Capitol in Senate Committee Room E on January 16th 2025 at 8:30 a.m.

ITEM NO. 1

Senate President Cameron Henry called the meeting to order at 8:39 AM and asked the secretary to call roll.

Present:

- Senate President Cameron Henry
- Speaker of the House of Representatives Phillip Devillier
- Mr. Burris for Lt. Governor Nungesser
- Ms. Schexnayder for Treasurer Fleming

ITEM NO. 2

Speaker Devillier motioned to approve the meeting minutes of the October 17th 2024 meeting as presented to the board. The motion passed without objection

ITEM NO. 3

Project alteration in Act 5 of 2024. President Henry asked Mr. Roger Husser from the Office of Facility Planning and Control to present information regarding a request by the Town of Maurice that the scope for its project "City Park Draining Improvements, Planning, and Construction" (Vermillion, 50/MI8-572875 on page 94 [FPC No. 50-MI8-24-01]) with an appropriation in the amount of \$450,000 payable from the Capital Outlay Savings Fund, be revised to include land acquisition for improved drainage. Commissioner Barras motioned for approval, without objection, the motion passed.

ITEM NO. 4

Project alteration in Act 5 of 2024. President Henry asked Mr. Roger Husser from the Office of Facility Planning and Control to present information regarding a request by The St. James Parish Hospital that

the scope for its project, “West Bank Health Clinic, Planning and Construction” (St. James, 50/NHE-572617 on page 122 [FPC No. 50-NHE-20-01]) with an appropriation in the amount of \$1,789,295 payable from Priority 1 General Obligation Bonds and \$1,500,000 payable from Priority 5 General Obligation Bonds, be revised to include a bid alternate that includes 10,00 square feet of medical office space. No additional state funds are being requested. Commissioner Barras motioned for approval, without objection, the motion passed.

ITEM NO. 5

Project alteration in Act 5 of 2024. President Henry asked Mr. Roger Husser from the Office of Facility Planning and Control to present information regarding a request by the Louisiana Correctional Institute for Women for an entity and scope change for its project, “Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction” East Baton Rouge, 08/406 – 571633 on page 30 with an appropriation in the amount of \$19,500,000 payable from the Criminal Justice and First Responder Fund to be administered by the Office of Juvenile Justice (OJJ) (08-403) with an expanded scope for facility security. Commissioner Barras motioned for approval, without objection, the motion passed.

ITEM NO. 6

Ms. Schexnayder explained the request from Liberty Bank and Trust company to receive designation as a state depository/fiscal agent for the period July 1, 2023 – June 30, 2027. She stated the Department of the Treasury had performed an analysis of key financial ratios for the institution and was recommending designation. Commissioner Barras motioned for approval, without objection, the motion passed.

ITEM NO. 7

Ms. Schexnayder explained the request from Catalyst Bank to receive designation as a state depository/fiscal agent for the period July 1, 2023 – June 30, 2027. She stated the Department of the Treasury had performed an analysis of key financial ratios for the institution and was recommending designation. Commissioner Barras motioned for approval, without objection, the motion passed.

With no further business to discuss, Speaker Devillier moved to adjourn. The motion passed without objection, and the meeting was adjourned at 8:47 a.m.

Respectfully submitted,

William G. Frentz, Board Secretary

Office of the Commissioner
State of Louisiana
Division of Administration

JEFF LANDRY
GOVERNOR



TAYLOR F. BARRAS
COMMISSIONER OF ADMINISTRATION

December 17, 2024

William Frentz, Board Secretary
Interim Emergency Board
Post Office Box 94095
Baton Rouge, Louisiana 70804-9095

Re: Capital Outlay Scope Change Request
Town of Maurice
City Park Drainage Improvements, Planning and Construction
FPC Project Number 50-MI8-24-01

Dear Mr. Frentz:

As provided for in R.S. 39:461.9, the attached request is for the Interim Emergency Board (IEB) consideration of a scope change for the capital outlay project in Act 5 of 2024 for the Town of Maurice, "City Park Drainage Improvements, Planning and Construction" (Vermilion Parish, FPC Project Number 50-MI8-24-01).

The user has requested that the scope be revised to include land acquisition. The change in scope will allow the town to acquire adjacent property to the park for a detention pond, which will improve the drainage for the existing park and surrounding areas.

I am submitting to you the enclosed request for scope change for IEB consideration. Please advise if you need further information.

Sincerely,

Taylor Barras
Commissioner of Administration

TB/mah

This form must be downloaded in order to utilize digital signatures and the Submit function.

**APPLICATION FOR CAPITAL OUTLAY SCOPE CHANGE
FOR CONSIDERATION BY THE INTERIM EMERGENCY BOARD**

Department or Agency: Town of Maurice

Section or Division: _____

Current Project Description:

Act No. 5 of 2024

Page No. 94

Act Project No. 572875

FPC Project No. 50-MI8-24-01

Wording: City Park Drainage Improvements,
Planning and Construction

Revised Project Description Requested:

Act No. 5 of 2024

Page No. 94

Act Project No. 572875

FPC Project No. 50-MI8-24-01

Wording: City Park Drainage Improvements,
Planning, Acquisition and Construction

Local Cash: \$0

State Cash/Source: \$450,000

Bonds/Priority: \$0

Local Cash: \$0

State Cash/Source: \$450,000

Bonds/Priority: \$0

Descriptive Change(s) Requested: The Town of Maurice proposes to amend the scope of its project to include land acquisition. In 2023, the Town acquired and hauled in fill material to elevate portions of the park property. Due to the poor off-site downstream drainage, the Town is proposing to acquire additional property adjacent to the existing park for the purpose of constructing a detention pond to improve drainage in the park and surrounding area. The excavated material will be used on-site to elevate and grade the park and provide adequate drainage. Remaining funds will be used for site improvements as originally proposed.

We, the undersigned, agree that we concur with this project description change according to the provisions of Act 766 of 2001 and are enclosing a **revised capital outlay request** to reflect the above requested change(s).

Neil Arsement Digitally signed by Neil Arsement
Date: 2024.12.09 12:54:56 -06'00'

Signature of Current Agency Head

P.O. Box 126, Maurice, LA 70555

Mail Address

Neil Arsement, Mayor

Typed Name and Title

337-893-6406

Telephone Number

Signature of New Agency Head (If applicable)

Typed Name and Title

Mail Address

Bob Hensgens Digitally signed by Bob Hensgens
Date: 2024.12.05 11:42:33 -06'00'

Signature of Senator & District No.

Telephone Number

Troy Hebert Digitally signed by Troy Hebert
Date: 2024.12.03 13:44:33 -06'00'

Signature of Representative & District No.

Submit

Project ID 576153
Project Level FPC
MAURICE

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-MI8 - Maurice City Park Drainage Improvements (IEB)

Project

Page 1

Title

Maurice City Park Drainage Improvements (IEB)

Location Town of Maurice

State IDs

☐ Emergency Project
☒ Current Project Requirements
☐ Anticipated Program Needs

Priority

Local/Agency 2 of 4

Department 0 of 0

Management Board 0 of 0

Applicant

Agency MI8 MAURICE

Schedule 50-MI8

Department 50 MISC-NONSTAT

Parish VERMILION

Senate District 26

House District 31

Site Code

Local/Agency

User Town of Maurice
Contact Neil Arsement
Phone Number 337-893-6406
Fax 337-893-3461
E-Mail mayor@townofmaurice.com

Address PO Box 128
City/State/Zip Maurice LA 70555

Department

User
Contact
Phone Number

Management Board

User
Contact
Phone Number

Cost Estimates

	Local/Agency	Department	Management Board	FPC
Land/Building Acq.	300,000	0	0	0
Planning 10%	12,500	0	0	0
Construction	125,000	0	0	0
Hazardous Materials	0	0	0	0
Subtotal	437,500	0	0	0
Misc./Contingency	12,500	0	0	0
Equipment	0	0	0	0
Total	450,000	0	0	0

Time Estimates

Planning (months) 12 0 0 0
Construction (months) 12 0 0 0

If planning has begun, when will it be completed?

Project ID 576153
Project Level FPC
MAURICE

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-MI8 - Maurice City Park Drainage Improvements (IEB)

Prior Funding

Page 2

FPC Project No. Assigned to Prior Funding 50-MI8-24-01

Sub-project No.

Authorized Means of Financing	Amount	Year	Act#	Priority	Bond	Credit
Gen Fund (Direc	450,000	2024	5	0	☐	☐
	0	0		0	☐	☐
	0	0		0	☐	☐
	0	0		0	☐	☐
	0	0		0	☐	☐
Total	\$450,000					

Proposed New Funding

☐ This project does not require funding in Year 1

	Year 1	Year 2	Year 3	Year 4	Year 5	Total
State Funds	450,000	0	0	0	0	\$450,000
IAT	0	0	0	0	0	\$0
*Local Funds	0	0	0	0	0	\$0
*Reimbursement Bonds	0	0	0	0	0	\$0
*Fees/Self-Gen. Rev.	0	0	0	0	0	\$0
*Revenue Bonds	0	0	0	0	0	\$0
**Statutory Dedications	0	0	0	0	0	\$0
Federal Funds	0	0	0	0	0	\$0
Total	\$450,000	\$0	\$0	\$0	\$0	\$450,000

Capital Outlay

*Describe specific source of funds

**Type of Statutory Dedication

What fiscal year (FY) was the project or program first submitted for consideration?

2023

Agency Impact Statement

I hereby certify that this project has been reviewed, approved, and integrated into our department's long range strategic plan and five year budget. The Impact of this project's operating budget has been approved.

Name Neil Arsement

Title Mayor

Date 10/23/2024

Comments

The Maurice City Park property is located along a drainage ditch in a low-lying area that is poorly drained. Due to poor drainage conditions, a large majority of the park property is flooded during rain events and remains unusable and inaccessible for extended periods of time. This prohibits use and maintenance of the park property. This project proposes to raise and grade the property to prevent flooding and improve maintenance and use of the property and its facilities. The Town is proposing to amend the previous scope of work to include land acquisition. In 2023, the Town acquired and hauled in fill material to elevate portions of the park property. Due to the poor off-site drainage, the Town is proposing to acquire additional property adjacent to the existing park for the purpose of constructing a detention pond to improve drainage in the park and surrounding area. The excavated material will be used on-site to elevate and grade the park and provide adequate drainage. The park also lacks adequate drives and parking for users of the facility, so remaining funds will be used to improve the drives and parking.

Project ID 576153
Project Level FPC
MAURICE

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-MI8 - Maurice City Park Drainage Improvements (IEB)

Demonstration of Need

Page 4

Title	Maurice City Park Drainage Improvements (IEB)		
Description	Improve drainage at the Maurice City Park to prevent flooding and increase use.		
Location	Town of Maurice	Present Empl.	0
Project Type	Drainage	Future Empl.	0
Facility Type	Misc.	Citizens Served	2,118
Program / Service Desc.	Improve drainage to prevent flooding	Daily Users	2,118
Describe the long range strategic plan (5-Yr) for the program	The completion of this project would improve the public facility to meet the needs of the public. No additional funds will be necessary for future improvements.		

Purpose (Check all that apply)

- | | | |
|---|--|--|
| ☒ Expand Existing Pgm | ☐ Changes in Mission | ☐ Address Actual |
| ☐ Relocate Existing Pgm | ☐ Changes in Existing | ☐ Changes in Standards |
| ☐ Add New Pgm | ☐ Changes in Population | ☐ Promote Economic Dev |
| ☐ Attract Business | ☐ Generate Employment | ☐ Address Code Violations |
| ☐ Other | | |

Applicable Guidelines / Standards

Publications, regulatory agencies' guidelines for the program	LA DOTD Hydraulics Manual
---	---------------------------

Minimum or mandatory requirements for above-listed program	Americans with Disabilities Act
--	---------------------------------

What alternatives were considered? (check all that apply)

- | | | |
|--|-------------------------------------|--|
| ☒ Maintaining Status Quo | ☐ New Space | ☐ Renovations of Existing Space |
| ☐ Use Existing Space | ☐ Less Space | ☐ Expansions of Similar Program Elsewhere |

How was the best option determined (Studies, Etc.)? Existing Site Conditions are Inadequate

Were feasibility studies or needs assessment reports prepared other than this application? ☐ Yes

Preparer's Name _____ Phone _____

List socioeconomic and environmental affects of project

None

Identify and describe other similar facilities in your area and evaluate their capabilities to meet needs

There are no existing sites owned by the Town of Maurice that could function as this facility.
--

Request Endorsed By: Senator ☒ Rep. ☒ Endorser's Name: Hensgens / Hebert

50-M18 - Maurice City Park Drainage Improvements (IEB)

Facility Requirements

- Page 5

Prepared By Sellers & Associates

Date Prepared 10/23/2024

Space Requirements: ☐ New Space ☐ Existing Space ☒ No Space

Type of Space	Number of Occupants	Type of Occupants	NA/Per	Net Area
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
Total Net Area	Burden Factor	Total Gross Area	Total Net Area Burden Area	
0	1.00	0		0

Employees	0
Visitors / Clients	0

Contract Employees	0
Students / Assistants	0

Temporary Employees	0
Others	0

Describe additional program requirements (parking, Utilities Tie-In, Location, Shipping / Receiving, Public Access, Site Amenities).

What will happen with the existing facility (demolition, remodeled, other program) and funding if needed?

Renovation-/Addition

Describe the condition of the building and previous renovations

Describe the extent of the proposed renovation / addition

Describe the location of occupants during renovation and required funding

What amount of the construction budget addresses modifications required to meet the "Americans with Disabilities Act Accessibility Guidelines (ADAAG)"?

Hazardous Materials

What hazardous materials are addressed in the construction budget?

☐ Underground Storage Tanks ☐ PCB's ☐ Lead Paint ☐ Asbestos Other _____

Enter the date if site has been surveyed for underground storage tanks.

Provide contact information if the facility's asbestos management plan was consulted for abatement requirements.

Contact Name Phone

Roof

What is the current age, condition, and type of the existing roof and anticipated date of replacements?

Age of Roof (yrs)	0	Condition
-------------------	---	-----------

Age of Floor (yrs)		Concrete
Replacement Date		Type

Describe roof penetrations,
equipment, etc.

50-M18 - Maurice City Park Drainage Improvements (IEB)

Construction Cost (cont.)

Page 6

Source of Data Sellers & Associates, Inc.

Date Prepared 10/23/2024

List special cost affecting factors considered (unfinished warehouse space, extraordinary HVAC, etc.).

N/A

Cost of Construction Calculation (Provide COST/S.F. for Roofing Projects)

Type of Space	Net Area	Cost/S.F.	Area Cost
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
Burden Area	0	0	0
Total / Average / Total	0	0	0

Additional Line Item Expenses (Parking, Utility Tie-In, Security System, etc.)

Item	Quantity	Unit Cost	Total
Earthwork	1	85,000	85,000
Aggregate Surfacing & Drives	1	40,000	40,000
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
Subtotal of Additional Line Item Expenses			125,000

Subtotal of Additional Line Item Expenses	125,000
---	---------

Total Construction Cost	125,000
--------------------------------	---------

Equipment Costs

Item	Item Costs
	0
	0
	0
	0
	0
Total Equipment Costs	0

Total Equipment Costs	0
-----------------------	---

Check this box if this program is for renovation or relocation of an existing program and the use of existing equipment discontinued.

If so, explain?

If this project is a current year request, attach an itemized breakdown with unit costs and an estimated useful life of the equipment with final submission to Facility Planning.

50-MI8 - Maurice City Park Drainage Improvements (IEB)

Operation Budget (Expenditures)

Page 7

	Existing Operating Budget Current Year Budgeted	Annual Projected Increase (Decrease) After Project Completion
Salaries	622,186	0
Other Compensation	0	0
Related Benefits	177,446	0
Travel	1,964	0
Operating Services	223,085	0
Supplies	20,992	0
Professional Services	310,690	0
Other Services	0	0
Debt Services	0	0
Interagency Funds	0	0
Acquisitions	348,600	0
Major Repairs	342,183	0
Unallocated	363,065	0
Total Expenditures	2,410,091	0
Total Positions	- 19	0

Operation Budget (Financing)

State General Fund (Direct)	20,404	0
State General Fund by:		
Interagency Transfer	0	0
Fees and Self-Generated Rev.	2,184,000	0
Statutory Deductions	0	0
Interim Emergency Board	0	0
Federal Funds	0	0
Total Financing	2,204,404	0

-**Balance**

Excess / Deficiency of Expenditures Over Financing (should = 0)	-205,687	0
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Operating Budget (Summary)

	Year 1	Year 2	Year 3	Year 4	Year 5
State Gen. Fund (Direct)	20,404	20,404	20,404	20,404	20,404
Interagency Transfer	0	0	0	0	0
Fees/Self-Gen. Revenue	2,184,000	2,184,000	2,184,000	2,184,000	2,184,000
Statutory Dedications	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0
Federal Funds	0	0	0	0	0
Total Means of Financing	2,204,404	2,204,404	2,204,404	2,204,404	2,204,404

Comments

Project ID 576153
Project Level FPC
MAURICE

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-MI8 - Maurice City Park Drainage Improvements (IEB)

Certification Questionnaire

Page 8

1) What was your budget for capital improvements for the last 3 years?

Current Year Last Year 2 Years Ago

2) What was your undesignated/unreserved general fund balance for the last 3 years?

Current Year Last Year 2 Years Ago

3) What was your designated/reserved general fund balance for the last 3 years?

Current Year Last Year 2 Years Ago

4) What is your ad valorem tax capacity?

Millage Authorized Millage Levied (mills)

When did you last have an election to renew or increase millage?

Did the electors approve or reject the millage renewal or increase? ☐ approve ☒ reject

How much was requested? (mills)

5) What is your local sales tax?

Percent Authorized Percent Levied

When did you last have an election to renew or increase the percent?

Did the electors approve or reject the percent renewal or increase? ☒ approve ☐ reject

How much was requested? (percentage)

6) Have you had an election to obtain voter approval for a bond issue for this or other projects? ☐ yes ☒ no

Did the electors approve or reject the issue? ☐ approve ☒ reject

Do you plan to have an election to obtain voter approval for a bond issue for this or other projects?

☐ yes ☒ no

7) Is this project for which you are requesting state funding the type for which revenue will be generated?

☐ yes ☒ no

(i.e. parking fees; water; sewer or other utility fees; etc.)

If so, please describe the source and projected amount of the revenue.

Source 1		Amount	0
Source 2		Amount	0
Source 3		Amount	0

8) How much do you receive from the Parish Transportation Fund?

Current Year
Last Year
2 Years Ago

9) Have you been approved for or received funding from any other state program for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Project ID 576153
Project Level FPC
MAURICE

CAPITAL OUTLAY REQUEST

<http://www.state.la.us/ecorts/>

FISCAL YEAR 2024 - 2025

50-MI8 - Maurice City Park Drainage Improvements (IEB)

Certification Questionnaire (cont)

Page 9

10) Have you been approved for or received funding from any federal program for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

11) Have you been approved for or received funding from any private source for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

12) If not a local government entity, describe the legal status of your entity.

--

The above information is certified by:

Name: Neil Arsement
Title: Mayor
Contact Person: Neil Arsement, Mayor
Date: 10/23/2024
Phone Number: 337-893-6406

Office of the Commissioner
State of Louisiana
Division of Administration

JEFF LANDRY
GOVERNOR



TAYLOR F. BARRAS
COMMISSIONER OF ADMINISTRATION

January 7, 2025

William Frentz, Board Secretary
Interim Emergency Board
Post Office Box 94095
Baton Rouge, Louisiana 70804-9095

Re: Capital Outlay Scope Change Request
St. James Parish Hospital
West Bank Health Clinic, Planning and Construction
FPC Project Number 50-NHE-20-01

Dear Mr. Frentz:

As provided for in R.S. 39:461.9, the attached request is for the Interim Emergency Board (IEB) consideration of a scope change for the capital outlay project in Act 5 of 2024 for the St. James Parish Hospital, "West Bank Health Clinic, Planning and Construction" (St. James Parish, FPC Project Number 50-NHE-20-01).

The user has requested that the scope be revised to include the design and construction of a 10,000 square foot medical office space as an alternate. No additional State funds are being requested.

I am submitting to you the enclosed request for scope change for IEB consideration. Please advise if you need further information.

Sincerely,

Taylor Barras
Commissioner of Administration

TB/mah

This form must be downloaded in order to utilize digital signatures and the Submit function.

**APPLICATION FOR CAPITAL OUTLAY SCOPE CHANGE
FOR CONSIDERATION BY THE INTERIM EMERGENCY BOARD**

Department or Agency: St. James Parish Hospital West Bank Clinic Planning and Construction

Section or Division: _____

Current Project Description:

Act No. 5 of 2024

Page No. 122

Act Project No. 572671

FPC Project No. 50-NHE-20-01

Wording: Plan and construct a clinic,
therapy center, cardiopulmonary rehab, and
diagnostic testing lab for a total of 12,980 sq ft.
Total cost to plan and construct is estimated to be
\$11,168,400

Local Cash: \$2,792,100

State Cash/Source: _____

Bonds/Priority: \$1,789,295/Priority 1
\$1,500,000/Priority 5

Revised Project Description Requested:

Act No. 5 of 2024

Page No. 122

Act Project No. 572671

FPC Project No. 50-NHE-20-01

Wording: Plan and construct a hospital based clinic,
therapy center, and diagnostic testing lab for a
total of 12,980 sq ft and to design a 10,000 sq ft
medical office space to be bld as an alternate.
Total cost to plan and construct is estimated to
be \$18,168,400

Local Cash: \$2,792,100

State Cash/Source: _____

Bonds/Priority: \$1,789,295/Priority 1;
\$1,500,000/Priority 5

Descriptive Change(s) Requested: Expand the scope of the project to include the possibility of accepting
a bid alternate of a 10,000 sq ft medical office space. No additional State funds are being requested for this
change.

We, the undersigned, agree that we concur with this project description change according to the provisions of Act 766 of 2001 and are enclosing a revised capital outlay request to reflect the above requested change(s).



Signature of Current Agency Head

1645 Lutchter Avenue, Lutchter, LA 70071

Mail Address

Mary Ellen Pratt, CEO

Typed Name and Title

225-746-2990

Telephone Number

Signature of New Agency Head (if applicable)

Typed Name and Title

Mail Address

Telephone Number

Edward Price
Signature of Senator & District No.

Kenneth B. ...
Signature of Representative & District No.

.Submit

Project ID 576157
Project Level FPC
ST JAMES HOS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Project

Page 1

Title

St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Location LA 3127 and Champion Drive, Vacherie, LA 70090

Priority

- ☐ Emergency Project
☒ Current Project Requirements
☐ Anticipated Program Needs

State IDs

Local/Agency 1 of 1

Department 0 of 0

Management Board 0 of 0

Applicant

Agency NHE ST JAMES HOS

Schedule 50-NHE

Department 50 MISC-NONSTAT

Parish ST. JAMES

Senate District 2

House District 58

Site Code

Local/Agency

User CO
Contact MP
Phone Number 225-342-0823
Fax 225-342-0820
E-Mail marc.parenti@la.gov

Address 120 N 3rd
City/State/Zip Baton Rouge LA 70810

Department

User
Contact
Phone Number

Management Board

User
Contact
Phone Number

Cost Estimates

	Local/Agency	Department	Management Board	FPC
Land/Building Acq.	250,000	0	0	0
Planning 10%	1,816,840	0	0	0
Construction	18,168,400	0	0	0
Hazardous Materials	0	0	0	0
Subtotal	20,235,240	0	0	0
Misc./Contingency	1,816,840	0	0	0
Equipment	1,156,400	0	0	0
Total	23,208,480	0	0	0

Time Estimates

Planning (months) 1 0 0 0
Construction (months) 18 0 0 0

If planning has begun, when will it be completed? 12/31/2024

Project ID 576157
Project Level FPC
ST JAMES HOS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Prior Funding

Page 2

FPC Project No. Assigned to Prior Funding 568427

Sub-project No.

Authorized Means of Financing	Amount	Year	Act#	Priority	Bond	Credit
GO Bonds	1,800,000	2023	465	1	☐	☒
GO Bonds	1,500,000	2023	465	5	☐	☒
	0	0		0	☐	☐
	0	0		0	☐	☐
	0	0		0	☐	☐
Total	\$3,300,000					

Proposed New Funding

☐ This project does not require funding in Year 1

	Year 1	Year 2	Year 3	Year 4	Year 5	Total
State Funds	3,300,000	7,618,400	0	0	0	\$10,918,400
IAT	0	0	0	0	0	\$0
*Local Funds	6,000,000	1,250,000	0	0	0	\$7,250,000
*Reimbursement Bonds	0	0	0	0	0	\$0
*Fees/Self-Gen. Rev.	0	0	0	0	0	\$0
*Revenue Bonds	0	0	0	0	0	\$0
**Statutory Dedications	0	0	0	0	0	\$0
Federal Funds	0	0	0	0	0	\$0
Total	\$9,300,000	\$8,868,400	\$0	\$0	\$0	\$18,168,400

Tax Certificate Bonds & Cash

*Describe specific source of funds

**Type of Statutory Dedication

What fiscal year (FY) was the project or program first submitted for consideration?

2019

Agency Impact Statement

I hereby certify that this project has been reviewed, approved, and integrated into our department's long range strategic plan and five year budget. The impact of this project's operating budget has been approved.

Name Mary Ellen Pratt

Title CEO

Date 1/6/2025

Comments

To Address the needs of residents on the west bank of St. James Parish, St. James Parish Hospital desires to plan and construct a health clinic in Vacherie.

Project ID 576157
Project Level FPC
ST JAMES HOS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Demonstration of Need

Page 4

Title	St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)		
Description	Construction of a primary care clinic, diagnostic testing and therapy services to serve the residents of the west bank of St. James Parish. Additionally, medical office building space providing for specialty services is being planned.		
Location	LA 3127 and Champion Drive, Vacherie, LA 70090	Present Empl.	5
Project Type	Health Infrastructure	Future Empl.	12
Facility Type	Health/Medical	Citizens Served	9,600
Program / Service Desc.	Primary Care, Diagnostics, Therapy, Med Office	Daily Users	80
Describe the long range strategic plan (5-Yr) for the program	The need for additional primary care, specialty care, diagnostics and therapy services to serve the west bank, where access to care is vital for the one-third of the population living below poverty level.		

Purpose (Check all that apply)

☐ Expand Existing Pgm	☐ Changes in Mission	☒ Address Actual
☒ Relocate Existing Pgm	☐ Changes in Existing	☐ Changes in Standards
☒ Add New Pgm	☒ Changes in Population	☒ Promote Economic Dev
☒ Attract Business	☒ Generate Employment	☐ Address Code Violations
☐ Other		

Applicable Guidelines / Standards

Publications, regulatory agencies' guidelines for the program	LA Dept of Health Standards (LDH), Center for Medicare and Medicaid Services (CMS) conditions of participation, The Joint Commission (TJC), Clinical Improvement Act (CLIA) and NFPA
Minimum or mandatory requirements for above-listed program	Services provided in this facility will be in compliance with all state and federal laws governing its operations and consistent with the highest standards of healthcare accreditation and professional ethics.

What alternatives were considered? (check all that apply)

☒ Maintaining Status Quo	☐ New Space	☐ Renovations of Existing Space
☐ Use Existing Space	☐ Less Space	☒ Expansions of Similar Program Elsewhere

How was the best option determined (Studies, Etc.)? Analysis by Hospital Governing Board, Medical Staff and

Were feasibility studies or needs assessment reports prepared other than this application? ☒ Yes

Preparer's Name Mary Ellen Pratt Phone 225-746-2990

List socioeconomic and environmental affects of project

The need for primary care, diagnostics/wellness and therapy services for 40%+ of the Parish living on the west bank of the Mississippi Rivers.

Identify and describe other similar facilities in your area and evaluate their capabilities to meet needs

Two family practice physicians in the area that currently do not provide after hours services

Request Endorsed By: Senator ☒ Rep. ☒ Endorser's Name: Price/Brass

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Facility Requirements

Page 5

Prepared By Architect

Date Prepared 10/18/2018

Space Requirements: ☒ New Space ☐ Existing Space ☐ No Space

Type of Space	Number of Occupants	Type of Occupants	NA/Per	Net Area
Therapy	12	{Patients and Therapists	300	3,600
Primary Care	20	Patients, MA, Providers	394	7,880
Diagnostics	5	Patients and Technologist	300	1,500
Medical Offices	25	Patients and Providers	400	10,000
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
	0		0	0
Total Net Area	Burden Factor	Total Gross Area	Total Net Area Burden Area	22,980
22,980	X 1.00	= 22,980		0

Employees	12
Visitors / Clients	80

Contract Employees	0
Students / Assistants	0

Temporary Employees	0
Others	0

Describe additional program requirements (parking, Utilities Tie-In, Location, Shipping / Receiving, Public Access, Site Amenities).

Site Work, Parking, Lighting Drainage /Detention, Utilities

What will happen with the existing facility (demolition, remodeled, other program) and funding if needed?

N/A

Renovation / Addition

Describe the condition of the building and previous renovations

NA

Describe the extent of the proposed renovation / addition

N/A

Describe the location of occupants during renovation and required funding

N/A

What amount of the construction budget addresses modifications required to meet the "Americans with Disabilities Act Accessibility Guidelines (ADAAG)"?

TBA

Hazardous Materials

What hazardous materials are addressed in the construction budget?

☐ Underground Storage Tanks ☐ PCB's ☐ Lead Paint ☐ Asbestos Other None

Enter the date if site has been surveyed for underground storage tanks.

Provide contact information if the facility's asbestos management plan was consulted for abatement requirements.

Contact Name

Phone

Roof

What is the current age, condition, and type of the existing roof and anticipated date of replacements?

Age of Roof (yrs)

0

Condition

Replacement Date

Type

Describe roof penetrations,
equipment, etc.

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Construction Cost (cont.)

Page 6

Source of Data Architect Estimates

Date Prepared 1/6/2025

List special cost affecting factors considered (unfinished warehouse space, extraordinary HVAC, etc.).

Cost of Construction Calculation (Provide COST/S.F. for Roofing Projects)

Type of Space	Net Area	Cost/S.F.	Area Cost
Therapy	3,600	650	2,340,000
Primary Care	7,880	650	5,122,000
Diagnostics	1,500	650	975,000
Medical Offices	10,000	650	6,500,000
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
Burden Area	0	0	0
Total / Average / Total	22,980	650	14,937,000

Additional Line Item Expenses—(Parking, Utility Tie-In, Security System, etc.)

Item	Quantity	Unit Cost	Total
Sitework	1	2,000,000	2,000,000
Landscaping	1	75,000	75,000
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
Subtotal of Additional Line Item Expenses			2,075,000

Subtotal of Additional Line Item Expenses	2,075,000
---	-----------

Total Construction Cost	17,012,000
--------------------------------	-------------------

Equipment Costs

Item	Item Costs
Furnishing and Appliances	580,400
It Equipment	133,000
Medical Diagnostic Equipment	443,000
	0
	0
Total Equipment Costs	1,156,400

Check this box if this program is for renovation or relocation of an existing program and the use of existing equipment discontinued.

If so, explain?

If this project is a current year request, attach an itemized breakdown with unit costs and an estimated useful life of the equipment with final submission to Facility Planning.

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

- Page 7

Operation Budget (Expenditures)

	Existing Operating Budget Current Year Budgeted	Annual Projected Increase (Decrease) After Project Completion
Salaries	115,050	333,814
Other Compensation	0	0
Related Benefits	34,515	121,000
Travel	200	200
Operating Services	55	7,625
Supplies	37,917	57,813
Professional Services	522,707	61,427
Other Services	12,656	192,665
Debt Services	0	0
Interagency Funds	0	0
Acquisitions	0	0
Major Repairs	0	0
Unallocated	0	0
Total Expenditures	723,100	774,544
Total Positions	0	0

Operation Budget (Financing)

State General Fund (Direct)	0	0
State General Fund by:		
Interagency Transfer	0	0
Fees and Self-Generated Rev.	723,100	774,544
Statutory Dedications	0	0
Interim Emergency Board	0	0
Federal Funds	0	0
Total Financing	723,100	774,544

Balance

Excess / Deficiency of Expenditures Over Financing (should = 0)	0	0
---	---	---

Operating Budget (Summary)

	Year 1	Year 2	Year 3	Year 4	Year 5
State Gen. Fund (Direct)	0	0	0	0	0
Interagency Transfer	0	0	0	0	0
Fees/Self-Gen. Revenue	1,288,827	1,466,026	1,601,627	1,649,676	1,699,166
Statutory Deductions	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0
Federal Funds	0	0	0	0	0
Total Means of Financing	1,288,827	1,466,026	1,601,627	1,649,676	1,699,166

Comments

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Project ID 576157
Project Level FPC
ST JAMES HOS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Certification Questionnaire

Page 8

1) What was your budget for capital improvements for the last 3 years?

Current Year Last Year 2 Years Ago

2) What was your undesignated/unreserved general fund balance for the last 3 years?

Current Year Last Year 2 Years Ago

3) What was your designated/reserved general fund balance for the last 3 years?

Current Year Last Year 2 Years Ago

4) What is your ad valorem tax capacity?

Millage Authorized Millage Levied (mills)
When did you last have an election to renew or increase millage?
Did the electors approve or reject the millage renewal or increase? ☒ approve ☐ reject
How much was requested? (mills)

5) What is your local sales tax?

Percent Authorized Percent Levied
When did you last have an election to renew or increase the percent?
Did the electors approve or reject the percent renewal or increase? ☐ approve ☒ reject
How much was requested? (percentage)

6) Have you had an election to obtain voter approval for a bond issue for this or other projects? ☐ yes ☒ no

Did the electors approve or reject the issue? ☐ approve ☒ reject
Do you plan to have an election to obtain voter approval for a bond issue for this or other projects?
☐ yes ☒ no

7) Is this project for which you are requesting state funding the type for which revenue will be generated?

☒ yes ☐ no

(i.e. parking fees; water; sewer or other utility fees; etc.)

If so, please describe the source and projected amount of the revenue.

Source	Description	Amount
Source 1	Patient Revenue	1,288,827
Source 2		0
Source 3		0

8) How much do you receive from the Parish Transportation Fund?

Current Year
Last Year
2 Years Ago

9) Have you been approved for or received funding from any other state program for this project? ☒ yes ☐ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Project ID 576157
Project Level FPC
ST JAMES HOS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Certification Questionnaire (cont)

Page 9

10) Have you been approved for or received funding from any federal program for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

11) Have you been approved for or received funding from any private source for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

12) If not a local government entity, describe the legal status of your entity.

Hospital Service District

The above information is certified by:

Name: Mary Ellen Pratt

Title: CEO

Contact Person: Mary Ellen Pratt

Date: 1/6/2025

Phone Number: 225-746-2990

Project ID 576157
Project Level FPC
ST JAMES HOS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

50-NHE - St. James Parish West Bank Health Clinic Planning and Construction (I.E.B)

Space Utilization

Page 10

Local User Facility: CO

Prepared By: Johnson, Johnson Crabtree Architects

Detail Space Utilization Plan Here:

The regulations that apply to hospitals come from many sources. The Space Allocation Program (SAP) is based on the most current set of regulations available from the American Institute of Architects guidelines for Healthcare Facilities. The most recently adopted set dates of 2014, but proposed guidelines for 2020 were utilized. In addition, the Americans with Disabilities Act architectural guidelines (ADAAG) published in 2004 were also used. The SAP uses the most stringent spaces from the above national guidelines and any current state-specific guidelines in the development of the space programs.

Office of the Commissioner
State of Louisiana
Division of Administration

JEFF LANDRY
GOVERNOR



TAYLOR F. BARRAS
COMMISSIONER OF ADMINISTRATION

January 8, 2025

William Frentz, Board Secretary
Interim Emergency Board
Post Office Box 94095
Baton Rouge, Louisiana 70804-9095

Re: Capital Outlay Entity and Scope Change Request
Louisiana Correctional Institute for Women
Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction
(East Baton Rouge)
FPC Project Number 08-406-24-01

Dear Mr. Frentz:

As provided for in R.S. 39:461.9, the attached request is for the Interim Emergency Board (IEB) consideration of an entity and scope change for the capital outlay project in Act 5 of 2024 for the Louisiana Correctional Institute for Women, "Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction" (East Baton Rouge Parish, FPC Project Number 08-406-24-01).

Act 5 of 2024 appropriated \$19,500,000 payable from the Criminal Justice and First Responder Fund for the project referenced above, however, the project is to be administered by the Office of Juvenile Justice (OJJ) (08-403). Further, the scope needs to be expanded to include the replacement of site fencing and other elements as needed to secure the facility.

I am submitting to you the enclosed request for an entity and scope change for IEB consideration. Please advise if you need further information.

Sincerely,

Taylor Barras
Commissioner of Administration

TB/mah

This form must be downloaded in order to utilize digital signatures and the Submit function.

**APPLICATION FOR CAPITAL OUTLAY SCOPE CHANGE
FOR CONSIDERATION BY THE INTERIM EMERGENCY BOARD**

Department or Agency: 08

Section or Division: 406 (Louisiana Correctional Institute for Women) to 403 (Office of Juvenile Justice)

Current Project Description:

Act No. 5 of 2024

Page No. 30 of 153

Act Project No. 571633

FPC Project No. 08-406-24-01

Wording: Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

(East Baton Rouge)

Revised Project Description Requested:

Act No. 5 of 2024

Page No. _____

Act Project No. 576152

FPC Project No. 08-403-24-01

Wording: Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

(East Baton Rouge)

Local Cash: _____

State Cash/Source: \$19,500,000 /

Criminal Justice and First Responder Fund

Bonds/Priority: _____

Local Cash: _____

State Cash/Source: \$19,500,000 /

Criminal Justice and First Responder Fund

Bonds/Priority: _____

Descriptive Change(s) Requested: The project consists of the renovation and replacement of facilities, systems, equipment, and infrastructure at the Jetson Center for Youth, as well as the replacement and augmentation of site fencing and other elements as needed to secure the facility.

We, the undersigned, agree that we concur with this project description change according to the provisions of Act 766 of 2001 and are enclosing a revised capital outlay request to reflect the above requested change(s).



Signature of Current Agency Head

Gary Westcott, Secretary, LA DPS&C

Typed Name and Title

504 Mayflower St, BR, LA 70802

225-342-1060

Mail Address

Telephone Number



Signature of New Agency Head (if applicable)

Jason S. Starnes Undersecretary

Typed Name and Title

7901 Independence Blvd. Baton Rouge, LA

225-287-7914

Mail Address

Telephone Number

Senator Regina Barrow District 15

Signature of Senator & District No.

Representative Barbara Carpenter District 63

Signature of Representative & District No.

Submit

Project ID 576152
Project Level FPC
JUVENILE JUS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

08-403 - Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Project

Page 1

Title

Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Location 15200 Old Scenic Hwy, Baker, LA 70714

Priority

- ☒ Emergency Project
☐ Current Project Requirements
☐ Anticipated Program Needs

State IDs

S02325
S02373
S02377
S02378
S13604

Local/Agency 1 of 1

Department 1 of 1

Management Board 0 of 0

Applicant

Agency 403 JUVENILE JUS

Schedule 08-403

Department 08 PUB SAF/CORR

Parish EAST BATON ROUGE

Senate District 15

House District 63

Site Code 2-17-044

Local/Agency

User OJJ Central Office
Contact Curtis R. Badon, P.E.
Phone Number 225-287-7658
Fax 225-287-7992
E-Mail curtis.badon@la.gov

Address 7919 Independence Blvd.

City/State/Zip Baton Rouge LA 70806

Department

User OJJ Central Office
Contact Curtis R. Badon, P.E.
Phone Number 225-287-7658

Management Board

User
Contact
Phone Number

Cost Estimates

	Local/Agency	Department	Management Board	FPC
Land/Building Acq.	0	0	0	0
Planning 10%	1,625,000	1,625,000	0	0
Construction	16,250,000	16,250,000	0	0
Hazardous Materials	0	0	0	0
Subtotal	17,875,000	17,875,000	0	0
Misc./Contingency	1,625,000	1,625,000	0	0
Equipment	0	0	0	0
Total	19,500,000	19,500,000	0	0

Time Estimates

Planning (months) 9 9 0 0
Construction (months) 11 11 0 0

If planning has begun, when will it be completed?

Project ID 576152
Project Level FPC
JUVENILE JUS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

08-403 - Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Prior Funding

Page 2

FPC Project No. Assigned to Prior Funding 08-406-24-01

Sub-project No.

Authorized Means of Financing	Amount	Year	Act#	Priority	Bond	Credit
Gen Fund (Direc	19,500,000	2024	5	1		
	0	0		0		
	0	0		0		
	0	0		0		
	0	0		0		
Total	\$19,500,000					

Proposed New Funding

☐ This project does not require funding in Year 1

	Year 1	Year 2	Year 3	Year 4	Year 5	Total
State Funds	1	0	0	0	0	\$1
IAT	0	0	0	0	0	\$0
*Local Funds	0	0	0	0	0	\$0
*Reimbursement Bonds	0	0	0	0	0	\$0
*Fees/Self-Gen. Rev.	0	0	0	0	0	\$0
*Revenue Bonds	0	0	0	0	0	\$0
**Statutory Dedications	0	0	0	0	0	\$0
Federal Funds	0	0	0	0	0	\$0
Total	\$1	\$0	\$0	\$0	\$0	\$1

*Describe specific source of funds

**Type of Statutory Dedication

What fiscal year (FY) was the project or program first submitted for consideration?

0

Agency Impact Statement

I hereby certify that this project has been reviewed, approved, and integrated into our department's long range strategic plan and five year budget. The impact of this project's operating budget has been approved.

Name Jason Starnes

Title Undersecretary

Date 12/12/2024

Comments

The project consists of the renovation and replacement of facilities, systems, equipment, and infrastructure at the Jetson Center for Youth, as well as the replacement and augmentation of site fencing and other elements as needed to secure the facility. Project may also include other state ID's not listed on Page 1 of this COR. Equipment Costs (FF&E) will be needed in this project, but they are NOT indicated separately from Construction costs in this COR. The COR form requires a non-zero value in at least one year of Proposed New Funding.

Project ID 576152
Project Level FPC
JUVENILE JUS

CAPITAL OUTLAY REQUEST

FISCAL YEAR 2024 - 2025

<http://www.state.la.us/ecorts/>

08-403 - Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Demonstration of Need

Page 4

Title	Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction		
Description	Renovation and replacement of facilities, systems, equipment, and infrastructure at the Jetson Center for Youth, as well as the replacement and augmentation of site fencing and other elements as needed to secure the facility.		
Location	15200 Old Scenic Hwy, Baker, LA 70714	Present Empl.	0
Project Type	Land/Buildings	Future Empl.	100
Facility Type	Prison/Correctional	Citizens Served	0
Program / Service Desc.	Youth Development	Daily Users	0
Describe the long range strategic plan (5-Yr) for the program	Newer modern secure care facilities for OJJ's program. Jetson Center for Youth population to be 72 youth (maximum) upon project completion.		

Purpose (Check all that apply)

- | | | |
|---|---|--|
| ☒ Expand Existing Pgm | ☒ Changes in Mission | ☐ Address Actual |
| ☒ Relocate Existing Pgm | ☒ Changes in Existing | ☐ Changes In Standards |
| ☒ Add New Pgm | ☒ Changes in Population | ☐ Promote Economic Dev |
| ☐ Attract Business | ☐ Generate Employment | ☐ Address Code Violations |
| ☐ Other | | |

Applicable Guidelnes / Standards

Publications, regulatory agencies' guidelnes for the program	Life Safety Code, International Building Code, Sanitary Code, American with Disabilities Act.
Minimum or mandatory requirements for above-listed program	Life Safety Code, International Building Code, Sanitary Code, American with Disabilities Act, American Corrections Association Standards for Youth Services

What alternatives were considered? (check all that apply)

- | | | |
|---|---|---|
| ☐ Maintaining Status Quo | ☒ New Space | ☒ Renovations of Existing Space |
| ☐ Use Existing Space | ☐ Less Space | ☐ Expansions of Similar Program Elsewhere |

How was the best option determined (Studies, Etc.)? Evaluation by OJJ and FP&C upper management

Were feasibility studies or needs assessment reports prepared other than this application? ☐ Yes

Preparer's Name _____ Phone _____

List socioeconomic and environmental affects of project

New Community Based Programs will serve both youth and families on a regional basis. Outcome supports youth before, during and after placed in care

Identify and describe other similar facilities in your area and evaluate their capabilities to meet needs

OJJ has no other facilities in the area.

Request Endorsed By: Senator ☐ Rep. ☐ Endorser's Name: _____

08-403 - Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Facility Requirements

Page 5

Prepared By Curtis R. Badon

Date Prepared 12/6/2024

Space Requirements: ☒ New Space ☐ Existing Space ☐ No Space

[illegible]

Total Net Area	Burden Factor	Total Gross Area	Total Net Area	1
1	1.00	1	Burden Area	0

Employees	0
Visitors / Clients	0

Contract Employees	0
Students / Assistants	0

Temporary Employees	0
Others	0

Describe additional program requirements (parking, Utilities Tie-In, Location, Shipping / Receiving, Public Access, Site Amenities).

What will happen with the existing facility (demolition, remodeled, other program) and funding if needed?

Renovation / Addition

Describe the condition of the building and previous renovations

Describe the extent of the proposed renovation / addition

Describe the location of occupants during renovation and required funding

What amount of the construction budget addresses modifications required to meet the "Americans with Disabilities Act Accessibility Guidelines (ADAAG)"?

minimal

Hazardous Materials

What hazardous materials are addressed in the construction budget?

☐ Underground Storage Tanks ☐ PCB's ☐ Lead Paint ☐ Asbestos ☐ Other

Enter the date if site has been surveyed for underground storage tanks.

Provide contact information if the facility's asbestos management plan was consulted for abatement requirements.

Contact Name

Phone

Roof

What is the current age, condition, and type of the existing roof and anticipated date of replacements?

Age of Roof (yrs)	0
-------------------	---

Condition

Replacement Date

Type

Describe roof penetrations, equipment, etc.

08-403 - Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Construction Cost (cont.)

Page 6

Source of Data Curtis R. Badon

Date Prepared 12/6/2024

List special cost affecting factors considered (unfinished warehouse space, extraordinary HVAC, etc.).

The COR form requires the fields that have text in them on this page to be filled in.

Cost of Construction Calculation (Provide COST/S.F. for Roofing Projects)

Type of Space	Net Area	Cost/S.F.	Area Cost
The COR form requires 1 line	1	1	1
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
	0	0	0
Burden Area	0	0	0
Total / Average / Total	1	1	1

Additional Line Item Expenses - (Parking, Utility Tie-In, Security System, etc.)

[illegible]

Subtotal of Additional Line Item Expenses

Total Construction Cost 1

Equipment Costs

Item	Item Costs
	C
	C
	C
	C
	C
Total Equipment Costs	

Check this box if this program is for renovation or relocation of an existing program and the use of existing equipment discontinued.

If so, explain?

If this project is a current year request, attach an itemized breakdown with unit costs and an estimated useful life of the equipment with final submission to Facility Planning.

Project ID 576152
Project Level FPC
JUVENILE JUS

CAPITAL OUTLAY REQUEST

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08-403 - Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Operation Budget (Expenditures)

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	Existing Operating Budget Current Year Budgeted	Annual Projected Increase (Decrease) After Project Completion
Salaries	1	1
Other Compensation	0	0
Related Benefits	0	0
Travel	0	0
Operating Services	0	0
Supplies	0	0
Professional Services	0	0
Other Services	0	0
Debt Services	0	0
Interagency Funds	0	0
Acquisitions	0	0
Major Repairs	0	0
Unallocated	0	0
Total Expenditures	1	1
Total Positions	0	0

Operation Budget (Financing)

State General Fund (Direct)	1	1
State General Fund by:		
Interagency Transfer	0	0
Fees and Self-Generated Rev.	0	0
Statutory Dedications	0	0
Interim Emergency Board	0	0
Federal Funds	0	0
Total Financing	1	1

Balance

Excess / Deficiency of Expenditures Over Financing (should = 0)	0	0
--	---	---

Operating Budget (Summary)

	Year 1	Year 2	Year 3	Year 4	Year 5
State Gen. Fund (Direct)	1	0	0	0	0
Interagency Transfer	0	0	0	0	0
Fees/Self-Gen. Revenue	0	0	0	0	0
Statutory Dedications	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0
Federal Funds	0	0	0	0	0
Total Means of Financing	1	0	0	0	0

Comments

The COR form requires the fields that have text in them on this page to be filled in.

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Certification Questionnaire

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1) What was your budget for capital improvements for the last 3 years?

Current Year Last Year 2 Years Ago

2) What was your undesignated/unreserved general fund balance for the last 3 years?

Current Year Last Year 2 Years Ago

3) What was your designated/reserved general fund balance for the last 3 years?

Current Year Last Year 2 Years Ago

4) What is your ad valorem tax capacity?

Millage Authorized Millage Levied (mills)

When did you last have an election to renew or increase millage?

Did the electors approve or reject the millage renewal or increase? ☐ approve ☒ reject

How much was requested? (mills)

5) What is your local sales tax?

Percent Authorized Percent Levied

When did you last have an election to renew or increase the percent?

Did the electors approve or reject the percent renewal or increase? ☐ approve ☒ reject

How much was requested? (percentage)

6) Have you had an election to obtain voter approval for a bond issue for this or other projects? ☐ yes ☒ no

Did the electors approve or reject the issue? ☐ approve ☒ reject

Do you plan to have an election to obtain voter approval for a bond issue for this or other projects?

☐ yes ☒ no

7) Is this project for which you are requesting state funding the type for which revenue will be generated?

☐ yes ☒ no

(i.e. parking fees; water; sewer or other utility fees; etc.)

If so, please describe the source and projected amount of the revenue.

Source 1		Amount	0
Source 2		Amount	0
Source 3		Amount	0

8) How much do you receive from the Parish Transportation Fund?

Current Year
Last Year
2 Years Ago

9) Have you been approved for or received funding from any other state program for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

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Certification Questionnaire (cont)

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10) Have you been approved for or received funding from any federal program for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

11) Have you been approved for or received funding from any private source for this project? ☐ yes ☒ no

If so, how much and from what source?

Source 1
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 2
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 3
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

Source 4
Agency/Program
Current Year
Last Year
2 Years Ago
Status

0
0
0

12) If not a local government entity, describe the legal status of your entity.

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The above information is certified by:

Name:

Title:

Contact Person:

Date:

Phone Number:

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08-403 - Jetson Center for Youth Site: Repair Equipment and Replacement, Planning and Construction

Space Utilization

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Local User Facility: OJJ Central Office

Prepared By: Curtis R. Badon, P.E.

Detail Space Utilization Plan Here:

In January 2014, the Jetson Center for Youth population was relocated to the Swanson Center for Youth at Monroe and Bridge City Center for Youth near New Orleans (NOT near their homes as they should be), due to the poor overall environment (old, prison like atmosphere) in the old Jetson campus. The existing Jetson Center for Youth buildings are old and were NOT designed for the therapeutic treatment model that OJJ is currently using. Area 3 is the most modern portion of the existing campus, and the majority of Area 3 was constructed in 1969 (55 years old in 2024). The buildings lack: adequate insulation, efficient lighting, efficient HVAC and many code features that are required in new buildings. Architectural, plumbing and other maintenance issues on these old buildings are an excessive drain on resources, both of funds and staff time. The dormitory spaces are much too large for the maximum of 12 youth per group space and would require major renovations to employ OJJ's treatment program. The new Jetson Center for Youth is in the Design Development phase, and in order to meet OJJ's current treatment model and security needs is being designed with individual sleeping rooms and a higher security design than the Acadiana Center for Youth project (08-403-04-02, Pt 7), accepted Apr 2, 2018. The Acadiana project has a total of 65,294 GSF. The New Jetson design, has additional square footage (85,300 GSF for Main Building & Housing) due to additions to meet OJJ's security and medical (including mental health) needs that are not being addressed sufficiently on the Acadiana site. The Jetson (Baker) site has ample available (minimally used) property for construction of a new campus on the existing site at the intersection of Hwy 964 and Groom Road (the SE corner). The current direction for OJJ is to pursue design completion and construction of the new Jetson campus in Baker. But, OJJ must have additional beds and an associated rehabilitation program in place as soon as possible, therefore the plan is to renovate and occupy selected buildings in the existing Jetson Center for Youth, Area 3 as well as S02325 "Dining Room" (includes kitchen) in Area 1 in order to serve that program. NOTES: OJJ's recent experiences of increased vandalism have caused the new campus model to become more hardened in design and materials selections.