



**Treats Falls House • Community Ties • Somerset House**  
*Catherine Robertson, Executive Director*

July 29, 2013

Kenneth Albert III, Director  
Ms. Phyllis Powell, Assistant Director  
Division of Licensing & Regulatory Services  
Certificate Of Need Unit  
Department of Health & Human Services  
State House Station #11  
41 Anthony Avenue  
Augusta, ME 04333

Re: Letter of Intent – Treats Falls House (ICF/IID)  
Remodel and Expansion of current facility

Dear Mr. Albert & Ms. Powell:

This correspondence constitutes a Letter of Intent in accordance with Section 71.05(A) of BEAS Policy Manual, Certificate of Need Regulations for Nursing Facility Level of Care Projects.

**Request for ruling regarding the applicability of CON to the proposal**

We desire to initiate the Certificate of Need (“CON”) review process and request a determination regarding the applicability of CON on this proposal.

**Brief Description, including location.**

Independence Advocates of Maine (IAM) operates Treats Falls House (TFH), an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) located in Orono, Maine. This project would expand the building from 9,800 to 12,800 square feet, addressing several regulatory noncompliance issues and deferred maintenance needs, while maintaining its current bed capacity of 17 residents.

TFH was designed and constructed in 1979 and is licensed for 17 residents, currently operating at nearly 100% utilization. The building, now over 30 years old, is in serious need of upgrading and expansion. We engaged the services of Design Group Collaborative (DGC) of Ellsworth Maine to assess our needs and prepare an Existing Conditions Report and Concept Design Report (attached) that would meet the various facility and programmatic challenges. We met with Peter Alexander, DHHS Team Leader for Region 3B to review these findings and provided his office with a complete packet of information received from DGC. We then received a letter of support from the regional office, recognizing the need for expansion and upgrade.

The key points of the DGC assessment are:

- Overall, the facility size is grossly undersized to accommodate the number of residents and staffing requirements.
- Existing systems and equipment in general for the building have met their life cycle expectations. Much of the equipment is old, out of date, and does not meet current code standards.
- Electrical services in resident rooms are not sufficient for resident equipment.
- The kitchen is grossly undersized for a facility this size.
- Separation of clean/dirty supplies, linens and medical supplies needs to be addressed.
- There is a lack of maneuvering space for adaptive equipment in resident bedrooms.
- The facility has inadequate activity and therapy space.
- The existing med room is too small to store medical/personal hygiene supplies.
- The number of resident and staff toilet facilities is below the minimum amount required for efficient operations.
- Exterior lighting is inadequate to provide security and safety for resident and staff connections to parking areas.
- Various areas are not in compliance with ADA standards, including specific plumbing fixtures, main entrance gate, resident toilet and door swings, resident kitchen in one house, outdoor courtyard, and separate Men’s and Women’s staff toilet.
- We lack of adequate storage for medical and supply areas, equipment and personal medical equipment.

**Estimate of capital expenditures or annual operating cost of the proposed project, and anticipated utilization.**

The following cost estimates were provided by DGC as part of their Concept Design Report. Final bid documents will result in fixed bids through a competitive bid process from reputable contractors. Due to the current construction climate, we anticipate the final bids will result in lower costs than these preliminary estimates.

<u>Description</u>	<u>Cost</u>
Land (current location is adequate for expansion)	\$0
Buildings & Site Improvement (Includes projected soft costs of fees, tests, insurance and permit fees)	\$3,823,336
Contingency (10%) Utilization is anticipated to be 97% for 17 beds (permanent residents)	\$382,334

**Anticipated date on which management services will commence, or an obligation for any proposed capital expenditure is to be incurred, nature of obligation and amount;**

We anticipate the following timeline, per discussions with DGC:

Establish financing	3 – 6 months from state approval to proceed
Final schematic	3 months following funding commitment
Final planning and bid documents	6 months from final schematic
Bid process	1-2 months
Construction process	Phase One Spring/summer 2014
Substantial completion	Summer 2015

**Anticipated date of submission of an application if one is required**

We anticipate submitting an application within 90 days from determination of need. Should a Certificate of Need not be required, we would begin acquiring financing immediately.

**Anticipated date of commencement of the proposed project**

We anticipate the actual construction to begin in Spring 2014.

**Anticipated date of completion of the proposed project or date on which services will first be offered to the public**

Completion of project, based on construction start date of Spring 2014, is anticipated to be no later than November 2015. TFH will continue supporting 17 permanent residents during the constructions phase.

**Next Steps and Assistance Meeting**

We understand that we are required to meet with the department staff within 30 days of filing this letter of intent. We have met with your staff, when a Letter of Intent was first filed on March 15, 2012. Subsequently, we allowed that Letter of Intent to expire, and revisited the scope of this project. We reduced the expansion size considerably, removing the initial addition of 3 beds, brining the project well below the \$5,000,000 threshold. We welcome the opportunity to work with you and look forward to meeting with you should your office deem it necessary.

Please feel free to contact me if you have any questions. My telephone number is 866-3769 and my email is [crobertson@treatsfallshouse.org](mailto:crobertson@treatsfallshouse.org).

Sincerely,



Catherine Robertson  
Executive Director

CC:

Norma Fortin, Resource Coordinator  
Rich Lawrence, Financial Analyst  
Jim Martin, Resource Development Manager