JCDC Partners, LLC

1220 Washington Street Kansas City, Missouri 64105 816.512.1003

July 6, 2022

Memo

To: Jackson County Legislature

From: Babette Macy

Re: Jackson County Detention Center Update

In preparation for our monthly report to the Legislature, we have prepared four documents for your review.

The first document (pages 2-8) is the **program summary** we pulled from the document that was submitted to the Legislature in September of 2020. (We delivered a hard copy of the program to you during the September 2020 meeting. A pdf is also available on the project website, <u>www.jcdetentioncenter.com.</u>) The attached program summary addresses some of the questions raised by the Legislature when we last presented. Other questions will be answered by the design builder as they begin the process of incorporating the program into the design for the new facility.

The second document (pages 9-11) is a **summary of the site** as requested by Legislator Finely.

The third document (pages 12-16) is the **project report** for our presentation to you on Monday, July 11th.

And finally, the fourth document indicates the **stakeholders** (highlighted in orange) who will be contacted in July.

Please feel free to reach out to any of the JCDC team members with any questions. We look forward to seeing you all on Monday.

PROGRAM SUMMARY

EXECUTIVE SUMMARY INTRODUCTION

Jackson County (County) is in the early stages of a multi-phase plan to develop a new correctional facility to replace the Jackson County Detention Center (JCDC). In January 2020, the County contracted with JCDC Partners, LLC, to serve as the Owner's Representative in providing professional services to support the development of new jail facilities. JCDC Partners works directly for the Jackson County Legislature, guided by the County-established JCDC Steering Committee, to manage this project. The first Component Service focused on validation of the needs and issues identified in past studies of the County detention system. This second Component Service focuses on defining the operational and architectural program needs for a new facility, based on the results of the needs analysis, current issues in the County's justice system, and forecast of future detention capacity needs.

The purpose of the facility program is to:

- Build on the Steering Committee's Mission Statement and develop a facility vision
- Define the management concept and operational basis for the new detention facility
- Incorporate the results from the validation of needs
- Translate the operational basis into a spatial description
- Identify the functional adjacency relationships
- Provide the basis for a staffing plan and initial project cost considerations

METHODOLOGY

JCDC Partners developed a virtual strategy to review the main facility components of a new detention center and to discuss the current facility and operating state, trends and benchmarks, and desired future operational state and associated space needs. Twenty bi-weekly virtual program sessions were conducted between April and June 2000 with stakeholders to include the Steering Committee, County representatives, and Sheriff staff on the following topics:

- Facility Vision
- · Public Lobby and Visiting
- · Facility Administration
- Staff Support
- Master Control
- Housing
- Inmate Programs
- Support Services
- Healthcare
- Intake/Transportation/Release

Also, three case studies were presented to the stakeholders between March and June 2000:

- Maricopa County, AZ, Intake/Transfer/Release Facility (in-person)
- San Mateo County, CA, Maple Street Correctional Center (virtual)
- Medical and Mental Health Best Practices (virtual)

An initial draft program document was prepared in July 2000. Four virtual review sessions were conducted with stakeholders in July and August 2000. An updated draft program document was submitted to the Steering Committee in August 2000. The document was then finalized and ratified by the Steering Committee in September 2020.

MISSION STATEMENT AND GUIDING PRINCIPLES

The Steering Committee developed a mission statement that defines its goals and provides a vision of the future detention facility. Key phrases in the statement include:

- · State-of-the-art detention center
- Professional and constitutional standards
- Equitable criminal justice system
- Evidence-based treatment and training opportunities
- Safe, secure, efficient to operate
- Long-term solutions

The kick-off programming session included a presentation and group discussion on the physical elements of a humane environment. The stakeholders identified the following four guiding principles or touchstones in addition to the Mission Statement for the facility program process:

- Wholeness develop an environment that makes a person successful
- Nature create a healing environment and understanding the Golden Rule (treat others how you want to be treated)
- **Training** Provide means for a person to be productive
- Something New Create the next generation of detention operation and design

Note that any reference to a "person" is meant to encompass everyone at the facility - in-custody, staff, and visitors.

KEY OPERATIONAL ELEMENTS

The program includes a description of the function, operational assumptions, special considerations, and a space listing for each facility component. Key operational elements included as part of the programming process are highlighted in this section.

INCORPORATION OF NEEDS ASSESSMENT

- Plan for initial build for the 2035 projection of 1,244 beds with support sized to accommodate the projected 2050 needs
- Utilize offender profile data to determine the appropriate housing classification/allocation and program spaces

IMPLEMENTATION OF FOUR MANAGEMENT TOOLS

- · Classification implement a system checklist to evaluate and manage inmate's risk
- Services target inmate services and programs based on offender profile
- Direct supervision provide more normative housing environment with inmate access to services and programs in/ adjacent to housing unit
- Professional staff ensure number and quality of properly-trained staff

CREATION OF FACILITY TONE

- Balance provide secure/open and restrictive/therapeutic spaces
- Visitors, staff, and in-custody set expectations
- All spaces incorporate from Public Lobby to Staff Areas to Intake to Housing to Release

SEPARATION OF INTAKE/TRANSPORTATION/RELEASE FUNCTIONS

- Pre-Intake/Law Enforcement Lobby separate law enforcement and jail duties and set expected in-custody behavior
- Intake balance open and secure spaces and match spaces to operational flow
- Transportation provide areas for secure staging and transport
- Release separate function and connect persons to other services

PRIORITIZATION OF ADAPTABLE CELLS

- Recognize majority of population with medical/mental health issues
- Recognize current and future public health concerns
- Strive to avoid falls, fights, and failures
- Provide all beds on floor (bunkless) 19,200 department gross square feet (DGSF) impact on footprint
- Provide accessible cells in Healthcare and all four-person occupancy cells

MEANINGFUL INMATE SERVICES AND PROGRAMS

- Continue and expand opportunities of inmate workers
- Ensure access to multi-purpose rooms, classrooms, and program areas

INCORPORATION OF HEALTHCARE BEST PRACTICES

- Include recommended functions and spaces for Central Clinic and Infirmary
- Define Medical Housing as sheltered environment for patients with fragile or complex medical or mental health conditions
- Define Special Needs as services to inmates with acute and severe mental illness separated into stages of care representing level of acuity and treatment needs
 - » Stage 1 Psychiatric Observation
 - » Stage 2 Crisis Management
 - » Stage 3 Inpatient Care
 - » Stage 4 Sheltered Housing

INTEGRATION OF COURT SERVICES

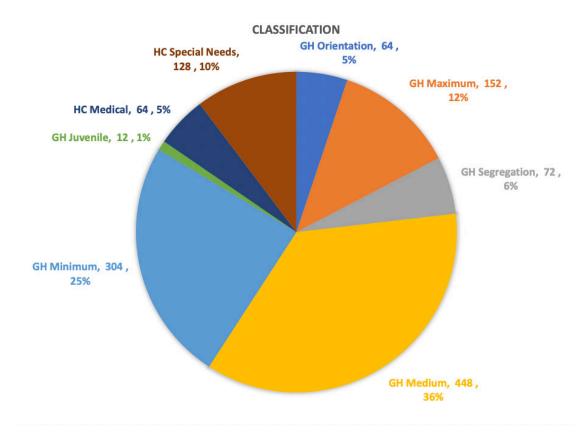
- · Continue and expand use of video with document transfer
- Include Criminal A proceedings
- Provide flexible space for jury proceeding

EXPANSION OF SUPPORT SERVICES

- Plan for Food and Laundry Services based on 2050 needs
- Size Central Plant initially for 2050 needs

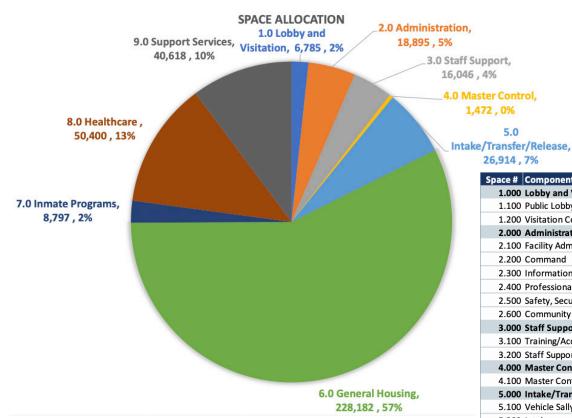
PROGRAM HOUSING SUMMARY

The housing classification, bed allocation, and cell type developed for the program was developed based on the 2035 projected need of 1,244 beds and key operational elements. As illustrated in Figure 1, the largest percentage of housing at 61 percent is for General Housing Medium and Minimum classifications. Healthcare Medical and Special Needs housing accounts for 15 percent of the total beds.



PROGRAM SPACE SUMMARY

The DGSF for all the facility components is 398,107. Note, a building grossing factor must be added to the DGSF to account for exterior walls, common public spaces, and building mechanical spaces to calculate the building gross square feet (BGSF). The building grossing factor will be refined during the building design and site development phases. Figure 2 illustrates the allocation of DGSF space in the facility program by main component. As shown, General Housing comprises 58 percent of the total followed by Healthcare at 13 percent.



20,914 , 77	8	
Space # Co	<u> </u>	DGSF
	bby and Visitation	6,785
	blic Lobby	3,018
	sitation Center	3,767
	Iministration	18,895
2.100 Fa	cility Administration	3,750
2.200 Co	ommand	2,746
2.300 Inf	formation Management	1,617
2.400 Pro	ofessional Standards	3,672
2.500 Sa	fety, Security, and Technology	2,781
2.600 Co	ommunity Corrections	4,328
3.000 Sta	aff Support	16,046
3.100 Tra	aining/Accreditation/Analyst	6,259
3.200 Sta	aff Support	9,788
4.000 M	aster Control	1,472
4.100 Ma	aster Control	1,472
5.000 Int	take/Transfer/Release	26,914
5.100 Ve	hicle Sallyports & Armory	3,680
5.200 Int	take	4,514
5.300 Co	ourt	9,038
5.400 Re	cords	4,193
5.500 Tra	ansportation	4,077
5.600 Re	lease	1,412
6.000 Ge	eneral Housing	228,588
6.100 Or	ientation Housing	13,179
6.200 Ma	aximum Housing Male	26,634
6.300 Se	gregation Housing Male	13,317
6.400 Ma	aximum and Segregation Housing Female	7,763
6.500 Me	edium and Minimum Housing Male	133,748
6.600 Me	edium and Minimum Housing Female	23,705
6.700 Ju	venile Housing	4,515
6.800 Ho	ousing Support Center	5,728
7.000 Ini	mate Programs	8,797
7.100 Pro	ograms Staff and Volunteers	2,147
7.200 Inr	mate Programs	6,650
8.000 He	ealthcare	50,400
8.100 Ce	entral Clinic	6,304
8.200 Inf	firmary	1,716
8.300 Me	edical Housing	14,425
8.400 Sp	ecial Needs Housing Stage 1 to 3	15,248
8.500 Sp	ecial Needs Housing Stage 4	12,708
9.000 Su	pport Services	40,555
9.100 Fo	od Service	12,091
9.200 La	undry Service	3,313
9.300 Re	ceiving and Central Storage	7,556
9.400 Ma	aintenance	3,988
9.500 Cu	stodial	1,388
9.600 Ce	entral Plant	12,221
Su	btotal Department Gross Square Feet	398,450
		355,.30

HEALTHCARE BREAKDOWN

The following is a Space Summary Breakdown of the Healthcare space within the new JCDC facility. 13% of the new facility will be dedicated to healthcare services. Typical county jails will have 10% of the space dedicated to healthcare services. JCDC has additional space dedicated to healthcare to run a proper step-down programming and treatment center for Mental Health within the jail.

8.000 Healthcare	50,400
8.100 Central Clinic	6,304
8.200 Infirmary	1,716
8.300 Medical Housing	14,425
8.400 Special Needs Housing Stage 1 to 3	15,248
8.500 Special Needs Housing Stage 4	12,708

CENTRAL CLINIC

The Central Clinic component includes the healthcare space necessary to support the delivery of the medical, dental, and mental health services to the inmate population housed in the facility. Healthcare includes providing acute (non-life threatening), subacute, chronic care clinics, and health maintenance services.

Services in the Central Clinic include:

- medical screening by the nurse of inmates submitting sick slips (most screening will occur in the housing unit support cluster),
- doctor's exam for inmates the nurses feel need further examination,
- chronic care treatment and follow-up

- · emergency and first aid treatment,
- maintaining electronic medical records,
- · necessary dental treatment,
- available vendor on-site radiology,
- · telemedicine, and
- · dissemination of medications.

INFIRMARY

Infirmary-level care is defined by the National Commission on Correctional Health Care as "care provided to patients with an illness or diagnosis that requires daily monitoring, medication and/or therapy or assistance with activities of daily living at a level needing skilled nursing intervention." Typically, this includes patients who require more intensive care than can be provided in the general population and for a period of 24 hours or greater. Patients who need skilled nursing care but do not need hospitalization and whose care cannot be managed safely in an outpatient setting would qualify for infirmary-level care. Patients with acute or chronic health problems that cannot be efficiently managed within the facility's clinical setting are to be transported to an approved community hospital.

Patients and health conditions that require Infirmary Housing include:

- Post-operative care and physical therapy.
- Intravenous fluid and antibiotic administration (dehydration and cellulitis).
- Wound care.
- Oncology care.

- Cardiac rehabilitation and stroke care.
- High-risk pregnancy.
- Neurocognitive impairment.
- · Complex medical and mental comorbidities.
- Hospice services.

MEDICAL HOUSING

The need for Medical Housing in jails has grown over the last two decades due to the rising number of elderly (greater than 55 years old) being incarcerated and the increasing prevalence of chronic medical conditions. Medical housing is typically a multiple occupancy cell housing unit that provides a sheltered environment for patients with fragile or complex medical and mental health conditions. They often have minor limitations in their activities of daily living and require a higher degree of clinical oversight than would be available in the general population.

Health conditions that may be appropriate for Medical Housing include:

- Brittle diabetes.
- Chronic obstructive pulmonary disease or asthma.
- HIV
- · Morbid obesity.
- Mobility impairments (requiring a wheelchair or walker).
- · Renal dialvsis.
- Neurocognitive disease (Alzheimer's, dementia).
- Multiple comorbidities.

SPECIAL NEEDS HOUSING STAGE 1 TO 3

Special Needs Housing will provide services to inmates with acute and severe mental illness. The housing will be separated into three stages of care representing the level of acuity and treatment needs of the inmate: Stage 1 psychiatric observation; Stage 2 crisis management; and Stage 3 inpatient care. Healthcare and security staff are trained in recognizing, triaging, and mobilizing healthcare resources when encountering jail detainees with mental health issues.

At Intake, healthcare staff screen new jail inmates, clarify past/recent mental health treatment, current symptoms/ impairment, and triage those with current mental health issues, recent or current psychotropic medication treatment, recent mental health treatment, suicide attempts or current suicide risks to mental health depending on the level of acuity.

New inmates presenting with current mental health issues, suicide risks, current or recent psychotropic medication treatment are referred for mental health assessment and evaluation by a jail QMHP (in person or via telepsychiatry) for evaluation within 24 hours of intake. In addition, all detainees with mental health issues receive a 14-day mental health evaluation. Mental health and psychiatric staff are available to provide access to mental health care, provide consultation regarding the need for and type and frequency of suicide watch placement, and assess if psychotropic medications should be continued, initiated, or held, respectively.

Special Needs Housing will include three separate areas in a 64-bed housing unit with a total of 48 male and 16 female beds. Stage 1 housing area will include 16 1-person occupancy cells for males and 8 1-person occupancy cells for females. Stage 2 housing will include 16 1-person occupancy cells for males and 4 1-person occupancy cells for females. Stage 3 housing will include 8 1-person and 4 2-person occupancy cells for males and 4 1-person occupancy cells for females.

Stage 1

Stage 1 or psychiatric observation will provide housing for immediate/ready visual observation and nursing assessments and mental health staff access to inmates displaying oddities in speech, behaviors, or thought disorders suggestive of a serious mental illness such as schizophrenia or another psychotic disorder, mania, hypomania, or other disturbances in speech, activities, or behavior. These cells will be similar to suicide watch cells (with enhanced light and visibility, no ligature/tie-off points, and reduced access to surfaces or structural items for potential self-harm), but will be designed to facilitate access to intensive psychotherapeutic and psychiatric interventions for offenders with oddities in behaviors suggestive of psychosis, severe impulse control problems, and/or offenders who engage in severe and frequent acts of life-threatening self-injury with little or no provocation.

Individuals who cannot be clinically stabilized within a few days will be referred/transferred by clinical staff to the jail inpatient (stage 3) psychiatric treatment program.

Stage 2

Stage 2 or crisis management will provide housing for patients experiencing a current mental health crisis such as a significant conflict or situational stressor (e.g., significant difficulty in adjustment to incarceration, conflict with a cellmate, peer, or staff) or displaying impulsive behaviors of harm to self or others and cannot be stabilized via monitoring in Stage 1 and are medically stable (no active medical illness or medical acuity that would require emergency department off-site, medical hospitalization, or infirmary housing setting). Crisis management patients may also be engaging in self-harm or self-mutilation; they may have current suicidal ideation, intent, or plans.

This will ideally be a 3-working-day treatment program but may be extended with clinical justification. The treatment mission will be to provide protective housing, intensive behavioral observation, brief crisis intervention counseling, psychoeducation, and supportive skills and therapeutic programming to offenders at imminent risk of suicide or serious self-injury.

Stage 3

Stage 3 or inpatient care will provide comprehensive psychiatric, mental health, and psychosocial evaluations and intensive behavioral health care to jail inmates with acute and severe mental illness who are clinically determined to require acute care level of mental health services. The goal will be for short-term behavioral health care treatment with rapid mental health stabilization. The area will be a dedicated pod/housing area with assigned custody and health care staff who share a mission to provide inpatient psychiatric/structured intensive behavioral health level of care. This housing setting will include the most serious mentally ill population but may also contain individuals with personality disorders or those engaging in potentially lethal and severe self-harm.

Inpatient psychiatric services will vary from short-term to longer-term care. Lengths of stays will generally range from 2 weeks to 6 weeks, with an average of 4 to 6 weeks. The target population will be jail detainees with serious mental illnesses (SMI) who present with acute psychosis, substance-induced psychotic disorders, other clinical deterioration or decompensation, impairments in their functioning and activities of daily living (ADLs), present with risks of harm to self or others, and who cannot be clinically stabilized in other jail settings such as while on suicide watch, crisis management, general population or sheltered housing settings.

SPECIAL NEEDS HOUSING STAGE 4

Special Needs Housing is provided to segregate inmates with acute and severe mental illness into three stages of progressive housing areas. Stage 4 sheltered housing provides less restrictive group housing and focused mental health care to offenders with unstable, severe, and chronic mental illness, severe personality disorders, dementia/neurocognitive disorders, and developmental disabilities such as intellectual impairments and promotes restoration to independent functioning. Healthcare and security staff are trained in recognizing, triaging, and mobilizing healthcare resources when encountering jail detainees with mental health issues.

Special Needs Housing Stage 4 will include a 64-bed housing unit with a total of 48 male and 16 female beds. The housing area will include 12 4-person occupancy cells for males and 4 4-person occupancy cells for females.

Stage 4

Stage 4 housing will target jail offenders with a history of serious mental illness (examples include a past/recent diagnosis of a psychotic disorder or bipolar manic/mixed episode in partial remission) who are now clinically stable (status post recent inpatient admission/housing) but have continued/residual negative symptomatology (negative signs of schizophrenia such as apathy, reduced social drive, social withdrawal, poor hygiene and grooming) and associated social impairments; but who no longer require the acute inpatient level of care and rapid stabilization program. These patients will still require frequent prompting by custody, nursing, and health care staff to maintain successful ongoing psychotropic medication compliance, basic hygiene, and ADLs. They will be encouraged to spend time out of their cell in structured or unstructured group activities. The overarching goal will be to promote independent activities and reduce isolation/restriction; prevent risk of decompensation due to medication non-compliance; and promote less restrictive housing.

Other non-psychotic patients who would benefit from sheltered housing may include mood/affective disorders with or without psychosis and individuals with personality disorders, developmental disabilities/intellectual impairments, and dementias/neurocognitive disorders.

The duration of this program will be 7 to 21 days or as directed by clinical staff. If needed, long term treatment goals will be focused on helping the patient transition into a community based residential/group home program.



7000 E US HIGHWAY 40, KANSAS CITY (site location in red outline)



PROPERTY DETAILS

Site criteria established by the Steering Committee

- ▶ 102 acres
- ► KCATA Bus Stop on property location
- ► Site allows for future growth

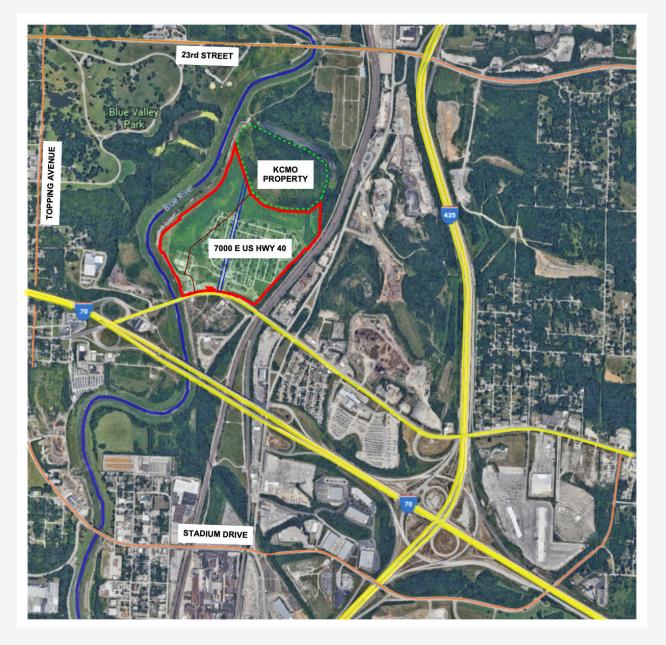
▶ Drive time:

11 minutes from downtown Courthouse

14 minutes from Eastern Jackson County Courthouse



7000 E US HIGHWAY 40, KANSAS CITY (site location in red outline)



BENEFITS

- ► Location meets site criteria established by the Steering Committee
- ► City of Kansas City owns property north of the site, allowing for the possibility of a shared campus
- ► Utilities are existing and accessible for future development

ADDITIONAL FACTORS

- ► Seller will facilitate tenant change of location with assistance from Newmark Zimmer
- ► An easement, Ewing Ave., runs through the middle of the site
- ► Dirt fill will occur to raise the site above the flood plain



PROJECT TIMELINE



SITE CRITERIA DEVELOPMENT

The detention center's location will be based on the long-term needs of the Jackson County Justice System as informed by the Validation of Need and Programming Phases of the project.

A formalized process based on the following criteria has been implemented to best determine the site's location:

- At least 50 acres without underlying concerns (poor soil, wetland, or environmental issues) that may increase the cost of site development.
- A travel-time distance of 20-30 minutes between the site and the downtown and Independence courthouses, and Truman Medical Center.
- Ease of highway or arterial access and other forms of transportation, including the bus line and transit opportunities.
- A surrounding area deemed safe and visible, with limited adjacent residential areas or other sensitive land use.
- Availability to adjacent public and private utilities (sewer, power, gas, telephone/data).
- Preferable unincorporated property in Jackson County that is convenient for commuters, staff and the public.
- The site must allow for efficient and cost-effective facility operations.

Quantitative and qualitative data determined by an independent agent was used to objectively evaluate and short list the potential sites using the criteria above. Based upon availability, evaluation of developability, and appropriate economic value, a single site recommendation will be made to the Legislature for approval.



COUNTY LEGISLATURE MONTHLY REPORT JULY 2022

DESIGN STATUS

Project design has begun in earnest to support the fast-paced nature of the Design-Build delivery method. The county's Design-Build partner JE Dunn – Axiom met with JCDC Partners and county representatives for a two-day workshop June 21st and 22nd. During these two 8-hour sessions JCDC Partners provided an overview of the county's Criteria Package to ensure compliance and understanding. The design team leadership then reviewed with us the program requirements and presented adjacency diagrams which provide a rough understanding of the building layout. Additionally, the collective team met and discussed potential housing design issues, preliminary site concepts, civil engineering design, security, mechanical, electrical, and plumbing design, and LEED.

The result of these meetings was the advancement of a medium/minimum housing concept that is ready for review by the Sheriff's Office and Detention Transition Team. This concept includes the sizing of the standard 4-person holding cell which is a fundamental repetitive building block for the design. A proposed reduction of its size from 290 square feet to 252 eliminates 10,600 gross square feet from the building while still meeting the county's criteria and accessibility needs. This decrease in size has a potential cost savings of \$2-3 million.

As the team advances the design concept other areas of cost savings will continue to be identified. Conceptually the team believes there may be more savings in the development of the site with a reduction in the amount of fill required west of Ewing Avenue. Additionally, opportunities for savings related to the timing of rough grading the building site above the 500-year flood elevation are being explored.

CONSTRUCTION STATUS

Construction activities are limited during the Pre-Construction phase and will not commence beyond exploratory work without County Legislature approval of the Guaranteed Maximum Price component packages. Cook, Flatt & Strobel Engineers (CFS) has been on site under the guidance and direction of the Design-Builder to perform geotechnical borings. They dug 35 borings to various depths which will be laboratory tested. This information gathering helps inform the recommended structural footing sizes, expectations for soil settlement, and compaction requirements which all guide design development.







COST/BUDGET REPORT

Further advancement of the specifics that constitute the budget of \$256,500,000 will be coming as conceptual design advances and Guaranteed Maximum Price component packages are developed.

RISK ASSESSMENT & MITIGATION

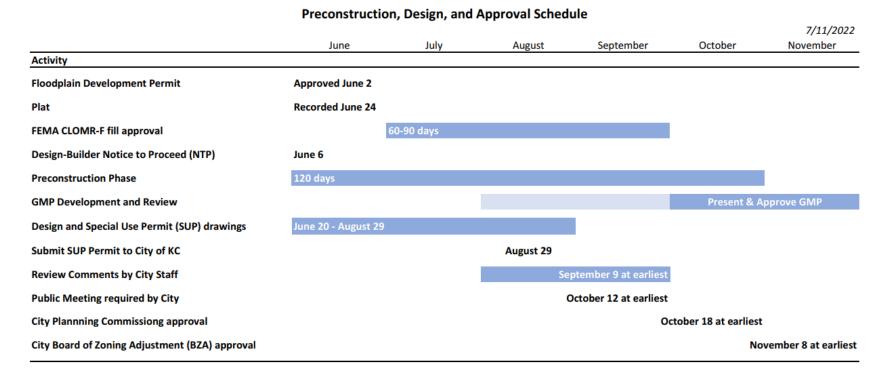
Rising costs and material availability remain the largest risks to the project. The team will continue to identify strategies to ensure that the county is being provided the most value for their budget like the proposed savings under the Design Update category. Material availability will continue to be monitored in tandem with the refinement of the construction activities schedule to ensure the avoidance of delays or inefficient sequencing.

The Special Use Permit issued by the City of Kansas City is required for the construction of the detention facility. Applications will be submitted in late August with approvals required by the Planning Commission and Board of Zoning Adjustments. The collective team has held multiple meetings with the city to ensure an understanding of the requirements to facilitate a smooth approval process in concert with our schedule below.

SCHEDULE UPDATE

Below is a schedule focused on the necessary approvals being sought during the Preconstruction Phase of the project. Over the next several months JCDC Partners and the Design-Builder will continue to communicate with the City of Kansas City and meet the requirements of the permitting and approval process. The Floodplain Development Permit has been conditionally approved pending the submission of the Conditional Letter of Map Revision (CLOMR-F) which is in progress. The Plat has been recorded and the team's focus has shifted towards the approval of the Special Use Permit (SUP). The date for submission is August 29th. With approvals from the City Planning Commission and Board of Zoning Adjustments anticipated this coming fall.

Per the Design-Build Agreement upon completion of the Preconstruction Phase, the Design-Builder will present a Guaranteed Maximum Price proposal for County Legislature approval which is within the project budget. The county will have up to sixty days to accept or reject the proposal.



UPCOMING WORK

We have a planned Steering Committee meeting on Wednesday, July 13th and a second design workshop with the Design-Builder scheduled for the week of July 25th. The team's focus will be on the other types of housing within the detention center and the development of a final site concept. Both design components will be shared for review and advisement by the Detention Transition Team and Steering Committee.

The JE Dunn – Axiom team will be hosting an M/WBE trade partner meeting on Thursday, July 14th. The meeting will provide a general introduction of the project and include information on how to pre-qualify as a trade partner on the project.

The project website will be updated by the end of the month and will include information regarding the project delivery, M/WBE participation opportunities, and a new section for project updates.

An updated fact sheet and talking points are also being created to keep community stakeholders apprised of the project's progress.

Public outreach will begin this month. We will begin by connecting with the key stakeholders involved during the validation of need phase of the project. Our outreach will include an introduction to the Design-Build team, an updated schedule, and opportunities for engagement throughout the process.

PUBLIC OUTREACH



ADHOC Against Crime

Aim4Peace

Alvin Brooks, Community Activist

American Indian Council

American Indian Enterprise & Business Council

Asian Chamber of Commerce of Kansas City

Baptist Ministers Union

Bishop Tolbert, KCPD Police Board

Black Agenda Group

Black Chamber of Commerce of Greater Kansas City

Blue Valley Homes Association

Blue Valley Industrial Association

Boy Scout Troop 118

Bridging The Gap

Bryan Round, Div 8 Municipal Court Judge

Building Trades Council

Carpenters Regional Council

Carpenters Union

Charles McKenzie, Div 13 Municipal Court Judge

Chief of Police, Blue Springs

Chief of Police, Grain Valley

Chief of Police, Grandview

Chief of Police, Independence

Chief of Police, Kansas City

Chief of Police, Lee's Summit

Chief of Police, Oak Grove

Chief of Police, Raytown

Chief of Police, Sugar Creek

Cilier of Folice, Sugar Cicer

City Administrator, Grandview

City Manager, KCMO

Community Action Agency

Concerned Clergy Coalition

Concord Fortress of Hope Church

Cornerstones of Care

Cory Atkins, Div 17 Municipal Court Judge

Councilman, Lee Barnes, KCMO

Councilwoman Heather Hall, KCMO

Councilwoman Katheryn Sheilds, KCMO

Councilwoman Melissa Robinson, KCMO

Councilwoman, Andrea Bough, KCMO

Data Manager, KC PD

Deputy Chief of Police, Blue Springs

Deputy Chief of Police, Independence

Deputy Chief, Kansas City Police

Design-Build Institute of America

Director, KC Assessment & Triage Center

Director, Legal Aid of Western Missouri

George Wolf, Div 11 Municipal Court Judge

Greater Kansas City Building and Construction Trades Council

Heartland Black Chamber of Commerce

Heartland Conservation Alliance

Heavy Constructors Association

Hispanic Chamber of Commerce

Hispanic Contractors Association of Greater Kansas City, Inc.

Independence Mayor Weir

Iron Workers Union

Ironworkers Local 10

J. Dale Youngs, Div 6 Municipal Court Judge

lackson County Drug Task Force

lackson County Municipal Court Admin

lackson County Municipal Court Admin

Jalilah Otto, Div 15 Family Ct Admin Judge

lames Frank Abbott, Jackson County Resident

James Kanatzar, Div 5 Municipal Court Judge

lanette Rodecap, Div 29 Municipal Court ludge

leffrey Bushur, Div 33 Municipal Court Judge

leffrey Keal, Div 28 Municipal Court Judge

Jennifer Phillips, Div 12 Municipal Court Judge

lobs with Justice

Joel Fahnestock , Div 9 Municipal Court Judge

John Torrence, Div 14 Municipal Court Judge

Justine Del Muro, Div 4 Municipal Court Judge

Kansas City Anti Violence Project

Kansas City Assessment and Triage Center

Kansas City Industrial Association

Kansas City Kansas Women's Chamber of Commerce

Kansas City Society of Black Architects and Engineers

Kansas City Women's Business Center

Kansas City Women's Chamber of Commerce

KC NOVA

KC Public Schools

KCMO City Planning

KCMO Mayor Quinton Lucas

KCMO Muncipal Court Administrator

KCMO Police Board

Ken Garrett, III Div 2 Municipal Court Judge

Kevin Harrell, Div 18 Municipal Court Judge

Key Coalition

Kyndra Stockdale, Div 32 Municipal Court Judge

Legal Aid of Western Missouri

Lone lack Court Administrator

Marco Roldan, Div 16 Municipal Court Judge

Margene Burnett, Div 7 Municipal Court Judge

Mark Styles, Div 19 Municipal Court Judge

Mary Weir, Div 31 Municipal Court Judge

Metropolitan Community Colleges

Minority and Women Subcontractors

Minority Contractors Association of Greater Kansas City

Missouri Department of Mental Health

Missouri State Public Defender, KC Office

More2

Mountain Plains Minority Supplier Development Council

NAACP

National Association of Construction Contractors Cooperative

(NACCC)
National Association of Women Business Owners – Greater KC

Chapter (NAWBO)

National Association of Women in Construction (NAWIC)

Chapter 100
Pastor Lindsay

Patrick Campbell, Div 10 Municipal Court Judge

Police Clerk, Oak Grove

Presiding Judge Municipal Court

Private Defense Bar

Probation and Parole

R. Travis Willingham, Div 26 Municipal Court Judge

Ricardo Lucas, Community Activist

Richard Strandidge, Div 25 Municipal Court Judge

Rodney Bland, Community Activist

Sandra Midkiff, Div I Municipal Court Judge

Souhtern Christian Leadership Conf. (SCLC)

Substance Abuse Services, KCMO

Susan E Long, Div 34 Municipal Court Judge

Truman Medical/Behavioral

Twila Rigby, Div 30 Municipal Court Judge

UMKC Criminal Defense Department

UMKC Women's Center

Urban League

Urban League of Greater Kansas City

Urban Neighborhood Initiative

Urban Summit

US Dept Corp of Engineers

Vander Haag Insustries

West Bottoms Community Organization

Western Missouri Mental Health Center

Women Construction Owners and Executives – KC Chapter (WCOEKC)