

# 2011-2017 Six-Year Facilities Plan: Agency Facilities Needs Survey Instructions



Office of Financial Management  
Department of General Administration  
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## CONTENTS

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Contents .....	1
Introduction.....	2
Agency Strategic Business Needs Statement Instructions.....	3
Overview .....	3
Agency Business Needs Statement Template .....	4
Agency Facilities Needs Report Instructions.....	5
Overview .....	5
Name (Leased, Tenant, Owned).....	6
Location (Leased, Tenant, Owned).....	6
Size (Leased, Tenant, Owned) .....	6
Condition (Leased, Tenant, Owned) .....	7
Lease Information (Leased, Tenant) .....	7
Tenant (Leased, Owned) .....	7
Parking (Leased, Tenant) .....	8
Standard Service Paid (Leased, Tenant) .....	8
Agency Request (Leased, Tenant, Owned).....	8
Occupancy (Leased, Tenant, Owned) .....	9
Space Type (Leased, Tenant, Owned) .....	10
Comments (Leased, Tenant, Owned).....	11
Agency Facilities Need Survey Submission.....	12
How to Submit your agency facilities needs survey .....	12
Due Date.....	12
Appendix A: Sample Strategic Business Needs Statement .....	13

## INTRODUCTION

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The 2011-2017 Six-Year Facilities Plan will be published January 1, 2011. Completion of the Agency Facilities Needs Survey is the first major phase in the development of the Six-Year Facilities Plan. This survey will provide critical information for discussions, coordination, and decision-making for the planning process between the agency, Office of Financial Management (OFM), Department of General Administration (GA), and outside parties as appropriate.

The Agency Facilities Needs Survey includes two components: (1) an Agency Strategic Business Needs Statement and (2) an Agency Facilities Needs Report.

These instructions guide the agency through the completion of both components of the Agency Facility Needs Survey and provide instructions for the submission of this survey.

The submission date for the Agency Facilities Needs Survey is as follows:

For agencies with less than 25 facilities:      March 31, 2010

For agencies with 25 facilities or more:      April 21, 2010



Throughout these instructions links to resources, hints, and tools are provided that may help you complete the Agency Facilities Needs Survey. These items are indicated with the icon located at the left.

More information on the requirements and process for six-year facilities planning is available by viewing the [Implementation Plan for the 2011-2017 Six-Year Facilities Plan](#).

# AGENCY STRATEGIC BUSINESS NEEDS STATEMENT INSTRUCTIONS

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## OVERVIEW

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The first component of the Agency Facilities Need Survey for 2011-2017 Six-Year Facilities Plan is the completion of an Agency Strategic Business Needs Statement. The Agency Strategic Business Needs Statement serves two purposes: (1) summarize your agency's strategic facilities needs and (2) highlight initiatives and strategies for meeting those needs over the course of the next six years. The focus is on the strategic needs of the agency for facilities and not the needs for individual facilities.

Consider drafting the Agency Strategic Business Needs Statement in the context of the four facilities planning goals. These goals include leasing and owning facilities that:

- Meet the business needs of state agencies.
- Provide space that is healthy, safe, accessible, and sustainable.
- Use the state's facilities efficiently.
- Use the state's funds effectively.

The Agency Strategic Business Needs Statement should define how your agency interprets these goals to meet business needs.



The agency is strongly encouraged to consider their Agency's Strategic Plan and coordinate with executive management to complete the Agency Strategic Business Needs Statement.

Below is a template for the development of the Agency Strategic Business Needs Statement. This template provides leading questions meant to guide you in the completion of this statement.

The template is available in Microsoft Word at: <http://www.ofm.wa.gov/budget/sixyearplan.asp>.

In addition, [Appendix A](#) contains a sample Agency Strategic Business Needs Statement to assist your agency in developing its statement.

## AGENCY BUSINESS NEEDS STATEMENT TEMPLATE

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### **AGENCY STRATEGIC BUSINESS NEEDS STATEMENT FROM [agency name]**

*Date*

The following statement detailing the strategic facilities needs of the [enter department name here] is submitted for consideration in the development of the 2011-2017 Six-Year Facilities Plan. This statement considers the operational needs of the [Agency] in conjunction with four goals for the state's Six-Year Facilities Plan.

#### **Meet the Business Needs of State Agencies**

*[Describe business needs of your agency that may influence your facilities needs. Where possible, tie these needs to state law or your agency strategic plan. Are there program changes or agency realignment initiatives occurring that may affect your space need? Does your agency have unique projects that may need to be temporarily housed? Are there changes in service delivery areas that may require relocations?]*

#### **Provide Space that is Healthy, Safe, Accessible, and Sustainable**

*[Describe the strategies and specific facilities needs that will allow your agency to provide space that meets this goal. Does your agency have any facilities that may not be healthy and safe based on a documented history of building concerns? Does your agency have unique accessibility challenges? Does your agency have unique sustainability/energy management goals?]*

#### **Use the State's Facilities Efficiently**

*[Describe the policies/practices your agency currently uses to manage your state facilities and space. How does this align with the state's space allocation policy? Does your agency have any downsizing or consolidation efforts occurring? Are there specific initiatives for inter-agency colocation? Is there excess space that we could consider for other agencies within your agency? Is your agency exploring alternative space usage?]*

#### **Use the State's Funds Effectively**

*[Describe the anticipated impact of this budget on your agency and describe what impact that will have your facilities needs. What strategies are you employing to mitigate the budget impacts related to facilities? What additional strategies would you like to consider?]*

*[Closing remarks-Include any other comments that you wish to be considered in the six-year facilities planning process.]*

*[Point of Contact] will serve as the point of contact for [agency] for this six-year facility planning process. If you have any questions, please contact [him/her] at [phone number] or [email address].*

# AGENCY FACILITIES NEEDS REPORT INSTRUCTIONS

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## OVERVIEW

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The second component of the Agency Facilities Need Survey for 2011-2017 Six-Year Facilities Plan is the completion of an Agency Facilities Needs Report. This report serves three purposes: (1) provides an opportunity to correct facilities data previously submitted, (2) provides additional data on specific facilities, and (3) documents the agency's requested actions by location over the course of the next six years. The focus is on the agency's needs related to individual facilities.

The Agency Facilities Need Report is pre-populated with information reported by state agencies in the Facilities Inventory System report (FIS) in the fall of 2009. The Agency Facilities Needs Report includes all facilities with a space type of office (all of the 300 series) and leased storage/warehouse space (730). This report needs to be updated to reflect all current facilities.

The format for the Agency Facilities Needs Report is an Excel workbook that includes three individual worksheets. Worksheets are provided for leased, tenants, and owned. The leased worksheet should be reserved for master leases only. The tenants' worksheet is provided for locations where an agency has a formal agreement (lease, sublease, interagency agreements, etc.) with another state agency to be housed in the space.

In your agency submission, clearly identify if you have a new facility, have relocated a facility, or have recently closed a facility. Below are the possible changes with a clarification on how these records should be reported.

## CLOSED FACILITIES

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If an agency has **closed or is in the process of closing a facility**, do not delete the row. Instead, leave this row, add "Close" in the Agency Request Section-Action Type, and insert the date the closure occurred in the Date of Action column.

## RELOCATED AND NEW FACILITIES

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If an agency has **relocated or a new facility has been established**, do not delete the row.

If the facility is a replacement of another facility listed in the report, follow the instructions above for the facility from which the agency relocated. Next, add a new row and select the appropriate category in the Agency Request Section, Action Type, either "New" or "Relocate Existing", and insert the date the relocation occurred or the new facility was opened in the Date of Action column.

The instructions below are provided in the order of the fields in the Excel workbook. One set of instructions is provided for all three worksheets. Each heading indicates if the instructions apply to the worksheet.

It is strongly recommended that the agency read these instructions prior to filling out the report.

NAME (LEASED, TENANT, OWNED)

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These fields are pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary.

Name	
Agency SAAM Acronym	Agency SAAM Number



The State Administrative and Accounting Manual (SAAM) is the resource used to complete these items. If you are unclear about this information, see the SAAM [Section 75.20 Agency Codes and Authorized Abbreviations](#).

LOCATION (LEASED, TENANT, OWNED)

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These fields are pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary.

Location			
Address	City Name	County Name	Zip Code



A typical address recorded with the county assessor and that follows standard USPS format should be used to ensure a standard address is included in the report. For more information on standard addressing, see pages 2 and 3 of the [FIS instructions](#).

SIZE (LEASED, TENANT, OWNED)

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These fields are pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary.

Size	
Square Feet Type	Square Feet



If you are unsure about the square feet type for a leased facility, check your lease. This information is commonly included in the legal description.

If you do not have a copy, GA can provide a copy if GA is your leasing authority.

## CONDITION (LEASED, TENANT, OWNED)

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This field is pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary.

<b>Condition</b>
Condition Matrix

This field should provide the condition of the building on a scale of 1 (superior) to 5 (needs improvement: marginal functionality).

When providing this condition information, the agency should use the Facility Inventory System's condition matrix located in [Appendix C of the 2009 FIS instructions](#), which considers areas such as:

- Exterior and interior building condition
- Building systems (heating, cooling, electrical, lighting, etc.)
- Maintenance and building maintenance response

## LEASE INFORMATION (LEASED, TENANT)

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These fields are pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary.

Lease Information					
Lease Number	Lease Start Date	Lease End Date	Monthly Rent	Cancellation Clause Yes / No	First Date Cancellation Clause Useable



If you are unsure if this information is accurate, check your lease. If you do not have a copy, GA can provide a copy if GA is your leasing authority.

## TENANT (LEASED, OWNED)

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This field is pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary. A subleasing tenant is a tenant who occupies the facility through a formal agreement.

<b>Tenant</b>
Subleasing Tenants Yes / No

**PARKING (LEASED, TENANT)**

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This field is pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary. Yes should only be selected if the agency pays additional lease costs for parking, not if additional parking is paid for by employees.

<b>Parking</b>
Additional Parking Leased Yes / No

**STANDARD SERVICE PAID (LEASED, TENANT)**

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This field is pre-populated. The agency must verify that this information is complete and accurate. The agency shall make corrections as necessary. Select “OWNER”, “LESSEE”, or “N/A”. Not Applicable (N/A) should only be included when the service is not provided to the facility.

<b>Standard Services Paid</b>								
Natural Gas	Electric	Garbage	Insurance	Janitorial	Sewer	Storm Water	Property Tax	Water



If you are unsure if this information is accurate, check your lease. If you do not have a copy, GA can provide a copy if GA is your leasing authority.

**AGENCY REQUEST (LEASED, TENANT, OWNED)**

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These fields must be populated by the agency.

<b>Agency Request</b>		
Action Type (dropdown)	Date of Action	Total Square Feet Requested

**ACTION TYPE**

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This field is a dropdown menu that includes the options listed below. Select which action the agency is planning for this facility in the next six years.

- Close
- Dispose
- New Facility
- No Action
- Relocate Existing
- Renew
- Renew and Expand
- Renew and Downsize

If an action other than Renew or No Action is selected, provide a brief description in the comments box at the end of the row.

#### DATE OF ACTION

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This field provides a space for the agency to report the date of the action. As identified in the [Overview Section](#) above, this date could be the date an action already occurred or a date that it is requested to occur.

#### TOTAL SQUARE FEET REQUESTED

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If an action other than Close, Dispose, No Action, or Renew is selected, the agency should identify the approximate square foot that is being requested.

*Example: If an agency wishes to relocate from the existing office of 5,600 square feet to a new office of 4,200 square feet. The Total Square Feet Requested = "4,200"*



The Department of General Administration published the [State's Space Allocation Standards](#) in 2009. If you are unsure how to estimate square footage, this document may be able to assist in providing this estimate.

Your OFM Facilities Analyst is also able to assist you in addressing this question.

#### PLANNED FACILITIES

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If a new facility is being requested, add a new row to the worksheet for this facility, add any known information, and select the appropriate category in the Agency Request Section "New" and insert the date the anticipated action may occur.

#### OCCUPANCY (LEASED, TENANT, OWNED)

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These fields must be populated by the agency.

All occupancy information should be as of March 1, 2010.

This section reports different categories of occupancy for the facility. Do not include other state agencies who are tenants at this location. All state agencies are expected to report their own agency information separately.

Occupancy			
Total number of people who currently work at this location	Total number of state employees assigned to this location	Total number of dedicated workspace needed	Current number of workspaces

TOTAL NUMBER OF PEOPLE WHO CURRENTLY WORK AT THIS LOCATION

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List the total number of people who work out of this location, including, agency office staff, agency field staff, volunteers, community partners, etc.



It is strongly encouraged that agency review organizational charts and consult with field staff to complete this field.

TOTAL NUMBER OF STATE EMPLOYEES ASSIGNED TO THIS LOCATION

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List the total number of state employees assigned to your agency at this location. Do not include volunteers, community partners, other state agencies, or others.

TOTAL NUMBER OF DEDICATED WORKSPACES NEEDED

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List the total number of dedicated workspaces currently needed in the facility. A workspace is an area allocated for a person to work in, including either an office or workstation.

*Example: A DOT field office may have 30 employees but only need five dedicated workspaces.*

CURRENT NUMBER OF WORKSPACES

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List the total number of offices and workstations, regardless of current use, at this location. As noted above, a workspace is an area allocated for a person to work in, including either an office or workstation.

Examples of space to be included:

- Private offices
- Workstations with employees
- Vacant workstations
- Workstations currently storing paper, coats, computers, etc.

Examples of space that should not be included:

- Lobby kiosks
- Client training stations
- Areas designed for special purposes such as storage rooms, conference rooms, etc.

SPACE TYPE (LEASED, TENANT, OWNED)

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These fields include one field that was pre-populated and two fields that shall be populated by the agency as appropriate.

Space Type		
Primary Space Type (Predominant Use)	Secondary Space Type	Additional Space Type

Verify the primary space type. List any major secondary and additional uses of the facility. These space types should be represented by approximately 20% of the space or more.

*Example: If the primary use is office, however, 30% of the facility is used for a conference center. Primary Space Type=“310”, Secondary Space Type=“350”*

The space type should be a number from the following chart.

Space Type
<b>110</b> Classroom
<b>120</b> Training room
<b>270</b> Laboratory
<b>310</b> Office General
<b>311</b> Office Administrative
<b>312</b> Office Services
<b>313</b> Office Project
<b>350</b> Conference Room
<b>410</b> Study Space
<b>420</b> Library
<b>502</b> Hearing Room
<b>503</b> Correction
<b>504</b> Military Dept/National Guard
<b>505</b> Fish Hatchery
<b>506</b> Park

Space Type
<b>590</b> Other (purpose defined when used)
<b>650</b> Lounge
<b>680</b> Meeting Room
<b>710</b> IT and Communications
<b>720</b> Shop
<b>730</b> Storage/Warehouses
<b>740</b> Vehicle Storage Facilities
<b>750</b> Central Service
<b>800</b> Includes Patient room, Nurse station, Surgery, Treatment/Examination, Diagnostic, Public waiting
<b>900</b> Includes Sleeping room, apartments, house, etc.
<b>050</b> Inactive Space
<b>060</b> Alteration or Conversion Space
<b>090</b> Vacate Unusable Space

For additional information about space type, refer to the [Facility Inventory System Appendix](#).

#### COMMENTS (LEASED, TENANT, OWNED)

This field is an option field to be populated by the agency.

Comments
Comments relevant to Six Year Plan for this location

This space may also be used by the agency to provide other comments and clarifications as necessary.

## AGENCY FACILITIES NEED SURVEY SUBMISSION

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### HOW TO SUBMIT YOUR AGENCY FACILITIES NEEDS SURVEY

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The components of the Agency Facilities Needs Survey should be completed and submitted by e-mail to [OFM Facilities Oversight](#).

The submittal must include:

1. The Agency Strategic Business Needs Statement
2. The Agency Facilities Needs Report



For any questions about the submission materials or the process, [contact the OFM Facilities Analyst](#) assigned to your agency.

### DUE DATE

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The submission date for the Agency Facilities Needs Survey is as follows:

- |  |                |
|--|----------------|
| For agencies with less than 25 facilities: | March 31, 2010 |
| For agencies with 25 facilities or more:   | April 21, 2010 |

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## APPENDIX A: SAMPLE STRATEGIC BUSINESS NEEDS STATEMENT

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### AGENCY STRATEGIC BUSINESS NEEDS STATEMENT THE CARBON FOOTPRINT AGENCY

*March 15, 2010*

The following statement detailing the strategic needs related to facilities for the Carbon Footprint Agency. This statement is submitted for consideration in the development of the 2011-2017 Six-Year Facilities Plan.

This statement considers the operational needs of the Carbon Footprint Agency in conjunction with four goals for the state's Six-Year Facilities Plan.

#### **Meet the Business Needs of State Agencies**

The Carbon Footprint Agency (CFA) is a new agency created in 2009 as a result of federal mandate. This agency is charged with studying the effects of global warming on the Cascade Mountain Range.

The CFA currently operates in a single headquarters office in Olympia. The agency plans a program expansion to include field staff who will operate with the affected areas. This decision was made to support the CFA's strategic plan, which identifies a strategy to conduct more local community coordination. Three locations will be necessary to complete this work. These locations include sites within 30 miles of Mount Baker, Mount Rainier, and Mount St Helens. The CFA seeks colocation opportunities with other state agencies, especially Natural Resource agencies, to pursue this expansion. This expansion must be completed by October 2013.

In addition, the CFA is expected to begin work (if funding is provided) on a new information technology system in Olympia to support the agency's fieldwork. The system development is expected to take two years and will require a large project office with temporary information technology staff, to include contractors. Additional space is necessary to support this operation.

#### **Provide Space that is Healthy, Safe, Accessible, and Sustainable**

Because of the mission of the CFA, the agency strongly prefers facilities that meet goals for energy management and sustainability. CFA's current headquarters meets these goals.

#### **Use the State's Facilities Efficiently**

The CFA is currently using, and intends to continue to use, the Department of General Administration's Space Allocation Standards to house the agency. The agency does have some unique program needs to support heavy machinery tied to the programmatic expansion; these unique needs must be considered when exploring options for housing the program in current space.

### **Use the State's Funds Effectively**

The CFA has adequate funding to support the programmatic expansion of the field operations. The agency will need additional funding before pursuing the information technology project office, as noted above.

CFA wishes to emphasize our desire to collocate with other Natural Resource Agencies.

Fred Flintstone will serve as the point of contact for the CFA for this six-year facility planning process. If you have any questions please contact him at (360) 555-1212 or [fred.flintstone@cfa.wa.gov](mailto:fred.flintstone@cfa.wa.gov).