

## State Of Maryland 2021 Bond Initiative Fact Sheet

<b>1. Name Of Project</b>		
Fort Washington Medical Center		
<b>2. Senate Sponsor</b>	<b>3. House Sponsor</b>	
Patterson		
<b>4. Jurisdiction</b> (County or Baltimore City)	<b>5. Requested Amount</b>	
Prince George's County	\$2,242,000	
<b>6. Purpose of Bond Initiative</b>		
the acquisition, planning, design, construction, repair, renovation, reconstruction, site improvement, and capital equipping of medical equipment for the Fort Washington Medical Center		
<b>7. Matching Fund</b>		
Requirements:	Type:	
Grant		
<b>8. Special Provisions</b>		
<input type="checkbox"/> Historical Easement	<input checked="" type="checkbox"/> Non-Sectarian	
<b>9. Contact Name and Title</b>	<b>Contact Ph#</b>	<b>Email Address</b>
Senator Patterson		obie.patterson@senate.state.md.us
<b>10. Description and Purpose of Organization</b> (Limit length to visible area)		
<p>Adventist HealthCare Fort Washington Medical Center is a 37-bed hospital located just south of National Harbor in a growing section of the region. It cares for over 35,00 patients annually in its Emergency department and, like Adventist healthcare, has a strong commitment to serving the needs of their community. Adventist Healthcare Fort Washington Medical Center serves patients in Fort Washington, Oxon Hill, Temple Hills area as well as parts of Southeast Washington, DC. The hospital provides general inpatient services and operates one of the busiest emergency rooms in the metropolitan area.</p>		

**11. Description and Purpose of Project (Limit length to visible area)**

The purpose of this project is to purchase and replace medical equipment that will considerably enhance our ability to serve our patients better as well as expanding the scope of services we can provide. We have a few pieces of equipment in the Operating Room that are close to end-of life and need replacement. We also need to purchase Bariatric equipment to serve the needs of community members that we have been unable to serve in the past due to lack of equitable equipment. We also have a CT scanner that is near end like that we would like to replace. When we are unable to provide these services in a timely manner our patients are forced to travel out of the area instead of having the convenience of being in their own community.

*Round all amounts to the nearest \$1,000. The totals in Items 12 (Estimated Capital Costs) and 13 (Proposed Funding Sources) must match. The proposed funding sources must not include the value of real property unless an equivalent value is shown under Estimated Capital Costs.*

**12. Estimated Capital Costs**

<b>Acquisition</b>	
<b>Design</b>	
<b>Construction</b>	
<b>Equipment</b>	\$2,242,000
<b>Total</b>	\$2,242,000

**13. Proposed Funding Sources - (List all funding sources and amounts.)**

State Funds	\$2,242,000
<b>Total</b>	\$2,242,000

<b>14. Project Schedule (Enter a date or one of the following in each box. N/A, TBD or Complete)</b>			
<b>Begin Design</b>	<b>Complete Design</b>	<b>Begin Construction</b>	<b>Complete Construction</b>
N/A	N/A	N/A	N/A
<b>15. Total Private Funds and Pledges Raised</b>	<b>16. Current Number of People Served Annually at Project Site</b>	<b>17. Number of People to be Served Annually After the Project is Complete</b>	
0	35,000 ED visits in 2019;	44,000 in Ed and 2,300 Inpatient	
<b>18. Other State Capital Grants to Recipients in the Past 15 Years</b>			
<b>Legislative Session</b>	<b>Amount</b>	<b>Purpose</b>	
2020 Legislative Sess	\$500,000	For the acquisition of Medical Equipment	
<b>19. Legal Name and Address of Grantee</b>		<b>Project Address (If Different)</b>	
Adventist Healthcare Fort Washington Medical Center 11711 Livingston Road, Fort Washington MD 20744			
<b>20. Legislative District in Which Project is Located</b>	26 - Prince George's County		
<b>21. Legal Status of Grantee (Please Check One)</b>			
<b>Local Govt.</b>	<b>For Profit</b>	<b>Non Profit</b>	<b>Federal</b>
[ ]	[ ]	[ X ]	[ ]
<b>22. Grantee Legal Representative</b>		<b>23. If Match Includes Real Property:</b>	
<b>Name:</b>	Kenneth DeStefano	<b>Has An Appraisal Been Done?</b>	Yes/No
<b>Phone:</b>	301-315-3699		No
<b>Address:</b>		<b>If Yes, List Appraisal Dates and Value</b>	
Adventist Healthcare 820 West Diamond Avenue Gaithersburg, MD 20878			

<b>24. Impact of Project on Staffing and Operating Cost at Project Site</b>			
<b>Current # of Employees</b>	<b>Projected # of Employees</b>	<b>Current Operating Budget</b>	<b>Projected Operating Budget</b>
400	400	46000000	57500000
<b>25. Ownership of Property (Info Requested by Treasurer's Office for bond purposes)</b>			
<b>A. Will the grantee own or lease (pick one) the property to be improved?</b>			Own
<b>B. If owned, does the grantee plan to sell within 15 years?</b>			No
<b>C. Does the grantee intend to lease any portion of the property to others?</b>			No
<b>D. If property is owned by grantee any space is to be leased, provide the following:</b>			
<b>Lessee</b>	<b>Terms of Lease</b>	<b>Cost Covered by Lease</b>	<b>Square Footage Leased</b>
N/A			
<b>E. If property is leased by grantee - Provide the following:</b>			
<b>Name of Leaser</b>	<b>Length of Lease</b>	<b>Options to Renew</b>	
N/A			
<b>26. Building Square Footage:</b>			
<b>Current Space GSF</b>	42380		
<b>Space to be Renovated GSF</b>			
<b>New GSF</b>			

**27. Year of Construction of Any Structures Proposed for Renovation, Restoration or Conversion**

N/A

**28. Comments**