Desired Outcome

Consolidating of FDA’s headquarters a decade’s long effort, was made possible when Congress passed the FDA Revitalization Act (P.L. 101-635) that was enacted on November 28, 1990. In 1994, OMB approved a consolidation plan for laboratory, office and support space to be located in Silver Spring, Maryland.

Program Objective

The consolidation of the remaining FDA headquarters is occurring at the government-owned White Oak site. The design and construction of the new buildings at White Oak are funded through General Services Administration (GSA) appropriations in the same manner as the CFSAN facility with FDA paying for building fit-out and move costs. The White Oak campus will replace all existing fragmented facilities with new laboratories, office buildings and support facilities. The last part of the White Oak consolidation is scheduled to be ready for occupancy in 2010.

Why is FDA’s Contribution so Important?

This project will help provide FDA with the required modern facilities to best perform its mission. The White Oak consolidation will ensure that it has state-of-the-art laboratories and facilities that will enable FDA to better respond to the Nation’s drug review, approval and supply needs.

The new facility is designed to provide an environment that encourages efficiency, creativity and superior performance. This will help attract and retain top quality scientists by enabling them to do top-quality work as part of an effective team. This is even more critical as we face new challenges in ensuring that FDA regulated products are not used as a vehicle for terrorism.

Requested Increases

The FY 2006 total request of $21,974,000 will be used to fund the additional relocation needs that are not covered by the design and construction budget for the CDRH Engineering and Physics Laboratory and the new Central Shared Data Center.

The 128,000 square foot CDRH Engineering and Physics laboratory will house approximately 160 CDRH employees. These high tech laboratories will evaluate electromagnetic and medical devices, and radiological instruments and consumer appliances generating radiological signals. The facility consists of numerous vibration isolation slabs, electromagnet shielding, an anechoic chamber and laser devices especially dedicated to the program science.

Construction of the Central Shared Use Data Center began in October 2004. Consolidating the Data Center will reduce the number of such facilities currently operating within the Agency, thus resulting in cost savings. To implement this data center, FDA has
embarked upon an aggressive IT modernization strategy to enable information sharing and improved IT effectiveness, while reducing redundancy and minimizing costs. The first phase of this building, including the cafeteria, fitness center and security command center is scheduled for completion in spring 2006.

### Requested Increase for FY 2006 (Dollars in $000)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Recurring Budget Authority</td>
<td>$17,846</td>
</tr>
<tr>
<td>FY 2006 BA Increase</td>
<td>$4,128</td>
</tr>
<tr>
<td><strong>Total Increase</strong></td>
<td><strong>$21,974</strong></td>
</tr>
</tbody>
</table>

The request will be used for the CDRH Engineering and Physics laboratory and the Shared Data Center move which include:

- Internal communication needs, including equipment, cabling and audiovisual;
- Security, including infrastructure and equipment;
- Information technology and telecommunications cabling;
- Modular furniture and other equipment to furnish the building for occupancy; and,
- Relocation costs, including records management consolidation, relocation coordination and moving.
Consequences of Not Receiving the Resources to Complete the Move

Without this increase, FDA will be unable to prepare the space for occupancy and could delay the centralization of the new space and associated cost savings. This delay would extend the time that the Agency would be required to pay rent at its existing locations while also paying rent at the new building which will greatly impact the GSA Rent appropriation.

How Are We Doing?

The White Oak consolidation plan, which has received recognition in many different areas, estimates that over 7,700 staff will be housed in 2.3 million square feet of space. By end of 2005, the campus will have almost 700,000 sq. ft. completed with 1,850 staff on-site. The first laboratory building on the campus was dedicated on December 11, 2003.

Improving Management:

One of the first priorities of the President’s Management Agenda is to make government citizen-centered. The White Oak consolidation will do just that by providing a readily identifiable location for citizens to interact with FDA. The project will also allow FDA to standardize and modernize document handling, use shared facilities such as libraries and conference areas, reduce redundancies in a wide range of administrative management tasks, and allow conversion to a single computer network. This will create a strong FDA by reducing operating costs, reducing travel time between organizations and increasing the convenience of access to FDA by the public.

Energy Savings:

As part of this project, in October 2002, GSA awarded a 20-year, $98 million, energy-services contract to Sempra Energy Solutions to construct a central utility plant that will utilize energy-saving cogeneration technology to provide electricity, heat and air conditioning. Sempra is financing the plant and recovering its costs through an energy-savings performance contract. The second phase of this contract will go into effect in 2005. FDA will be able to realize substantial annual operating savings and benefits from this energy-saving program and maintain a safe and healthful work environment for both its employees and the community. The Federal Government can lead the nation in energy efficient building design, construction and operation and can foster energy efficiency, water conservation, and the use of renewable energy products.

Design:

In 2004, FDA and Kling won an Honor Award for Design from the American Institute of Architects for the design of the Central Shared Use Building.

The award was based on project’s architectural design quality, the integration into a pedestrian campus concept, the successful relationship of a new building to a historic structure, and the implementation of numerous sustainable design features into a large, significant federal project. The project received one of only two Honor Awards out of 77 entries. This award was given to the entire FDA and GSA team, plus the local community and stakeholders,
who have been very supportive and involved in the project.

**GSA Funding:**

From FY 2000 through 2004, Congress appropriated a total of $225.8 million to GSA for demolition, design and construction of CDER laboratories, the CDRH Engineering and Physics laboratory and offices for CDER and CDRH.

In FY 2005, the GSA request for White Oak is $88.7 million, for construction of the second CDER Office Building, internal roads and bridges, construction of parking garage, and fit-out of the Central Shared Use building. In FY 2006, GSA has requested a total of $127.8 million to complete the next phases of the consolidation plan.

**FDA Funding:**

In FY 2002, FDA received two-year funding of $4,000,000 to equip and occupy the laboratory for CDER. These funds partially supported actual moving costs, IT design and decommissioning costs and other associated expenses.

In FY 2004, FDA received $5,986,000 ($2,361,000 in budget authority, and $3,625,000 in PDUFA carryover funds) to equip and prepare to occupy the CDER office facility. These funds were used for telecommunication and data cabling requirements and other infrastructure costs and represent the second installment to relocate and consolidate most of CDER’s headquarters activities in one location. The building is expected to be completed in April 2005.

In FY 2005, FDA received $32,937,000 to relocate approximately 1,700 CDER review staff, with increases of $15,503,000 in new budget authority, $2,343,000 in recurring move costs from the FY 2004 enacted level, $3,000,000 from new PDUFA funds and $12,092,000 from PDUFA carryover balances from previous fiscal years.