

logo not found or type unknown

Territory's Hospital Projects Shift to Design Phase as Officials Stress Budget Caps and Efficiency

With contracts awarded for all major healthcare facilities, Exec. Dir. Daryl Smalls said the focus is on defining programs within capped budgets, ensuring efficiency through shared systems, and advancing work on the Charlotte Kimmelman Cancer Institute.

Disaster Recovery / **Published On September 19, 2025 05:13 AM /**

Janeke Simon **September 19, 2025**

Image not found or type unknown



The old Juan F. Luis Hospital on St. Croix, slated for demolition, will be replaced by a new facility planned under the territory's hospital redevelopment program. By. ERNICE GILBERT, V.I. CONSORTIUM.

With contracts now awarded for all major healthcare facilities in the territory, the focus shifts to defining what the new hospitals will look like and the services they will provide. Daryl Smalls,

Executive Director of the Territorial Hospitals Redevelopment Team, outlined the scope of this next phase.

The Myra Keating Smith Community Health Center on St. John, for example, “was originally designed as an emergency room,” Mr. Smalls said, but “didn't function in that capacity.” With a rebuild on the horizon and [a contractor on board](#), “we're going to come up with the overall program and work with the contractor based on the budget that we have available to see what we can get constructed for the island of St. John.”

Currently, authorities are “in the negotiation phase” with the [contractor selected to tackle the rebuild](#) of both the Juan F. Luis Hospital on St. Croix and the Schneider Regional Medical Center on St. Thomas. Once that phase has been settled, a similar process will take place. “Specifically with Roy L. Schneider Hospital, we're going to go through the entire programming of what we want in the facility,” Mr. Smalls said. The Office of Disaster Recovery has been the lead co-ordinating agency in this process, he noted.

The intense focus on programming exactly what the facilities need beforehand is because “we have a set budget,” Mr. Smalls explained. “It's not as though we can go back to the federal government and say we need another \$10 million or \$100 million, our budget is already capped and we have to construct within our available means,” he noted.

As noted by disaster recovery officials before, having the same contractor responsible for both major hospitals brings efficiency due to “standardization and optimization across the facilities,” as Mr. Smalls put it. “We're talking about the same elevators, the same generators, the same air conditioners, mechanical systems, sterilization,” he said, noting that common procurement would extend even to “some of the medical equipment that we're going to be purchasing.”

Meanwhile, Mr. Smalls highlighted the progress being made on the construction of the Charlotte Kimmelman Cancer Institute. Eight additional days have been added to the construction schedule, which is now set to end on November 19. Alongside the final stages of construction, the next step is to ensure that the facility is energized, following which the linear accelerator, a key piece of equipment that generates radiation beams for the treatment of cancer, will be installed. “Everything is coordinated to commence October 1,” Mr. Smalls said, thrilled to disclose that the accelerator was already on island. The installation of other essential equipment will follow later in the month.