

#### Family Maternity Center & Obstetrics Renovation Project

Application for Project Approval GC/CM Contracting Procedure

July 26, 2018







King County Public Hospital District No. 2 Family Maternity Center & Obstetrics Renovation Project



OAC



#### AGENDA

Project Overview
Team
Why GC/CM?









- Description
- Funding
- Schedule























### Project Funding

- Initially fund Pre-Construction & Design through Cash Reserves (+/- \$2m)
- Bond Referendum April 2019 (\$275m)
   GC/CM Needed







### Project Schedule

Complex, Multi-Phase Project

Acute Care Environment

Fully Operational

Interfacing with concurrent projects

Need GC/CM: Key Player to Assist Team in Figuring this out!











GC/CM Procurement Schedule	Start	Finish
PRC Application (Due June 20, 2018 by 4 PM)	30-May-18	19-Jun-18
PRC Presentation; Assumes Application Accepted	26-Jul-18	
1 <sup>st</sup> Advertisement for GC/CM Services; if Approved	30-Jul-18	
2 <sup>st</sup> Advertisement for GC/CM Services	6-Aug-18	
Pre-Proposal Conference	8-Aug-18	
SOQ Submittals Due		24-Aug-18
Owner & Committee/Consultants Reviews/Scores Submittals	24-Aug-18	31-Aug-18
Notification to Highly Qualified Firms	31-Aug-18	
Conduct Interviews (tentative)	10-Sep-18	Sept 14 2018
Notification to Most Highly Qualified Firms + Prep/Submit RFFP	14-Sep-18	28-Sep-18
RFFP Submittal Date and Opening	28-Sep-18	
Owner Committee RFFP Review & Scoring	28-Sep-18	
Notify Firms of Scoring and Intent to Award	28-Sep-18	
EH Board Approve GM/CM Contract Precon Svscs	16-Oct-18	







### Project Design & Construction Schedule

Project Design and Construction Schedule	Start	Finish
Programming	Feb 2018	Aug 2018
Schematic Design	Aug 2018	Oct 2018
Design Development	Oct 2018	Feb 2019
Construction Documents + AHJ Review	Feb 2019	Nov 2019
90% GMP Set Construction Documents	Feb 2019	Jul 2019
Negotiate MACC	July 2019	Dec 2019
100% Construction Documents	Aug 2019	Dec 2019
Construction	Jan 2020	Sep 2022
Substantial Completion		Oct 2022
Commissioning / Owner Occupancy	Oct 2022	Jan 2023
Final Completion		Jan 2023









## Management TeamDesign Team







#### Management Team

EvergreenHealth CM Department

- ✤ 46 years D/B/B experience, \$1B+ Campus
- OAC Services
  - ✤ 35+ GC/CM Projects, \$1.5B
- John Palewicz
  - ✤ 24 GC/CM & DB Projects, \$1.2B
- David Alskog, Esq.
- ✤ GC/CM, EC/CM, MC/CM (TBD)







### Design Team

- EvergreenHealth Medical Planners Owner
- Ankrom Moisan Architects Architect
- Consistent consultants across all projects:
  - CPL Structural Engineer
  - Notkin Mechanical Engineer
  - Stantec Electrical Engineer
- ✤ GC/CM, EC/CM, MC/CM (TBD)









#### Why GC/CM?

- The EvergreenHealth Family Maternity Center & OB Renovation project meets 4 of the 6 statutory criteria (One is required).
- EvergreenHealth feels strongly that GCCM is the most appropriate contracting procedure for this project when each criteria is viewed through the lens of construction work being done in an active Acute Care Hospital where patient, staff and public safety is paramount.
  - Complex scheduling, phasing, and coordination
  - ► Facility must continue to operate during construction
  - Involvement of the GC/CM is critical during design
  - Complex and technical work environment
- ✤ Hand-selected team.







# **EvergreenHealth**

#### Thank You!





# **EvergreenHealth**

#### **Questions & Answers**





Project Design & Construction Schedule (Page 4). The project timelines show Negotiating the MACC between July of 2019 and December of 2019 with Construction starting January 2020. Often times the industry is seeing the start of the MACC negotiations as the end of Preconstruction and the start of the General Contractors Specified General Conditions Cost.

EvergreenHealth/OAC response: With the use GC/CM, in many projects the Preconstruction phase work overlaps with the work performed as Specified General Conditions. In these cases, there is not one point where the contractual switch is made, rather there is an overlapping of contract work that is paid accordingly. The MACC negotiation phase can be time consuming with the GC/CM bidding 90% documents to verify the market and negotiating with the MC/CM and EC/CM (if used on the project). Another advantage of this extended time would be to finalize any subcontract cost increases between 90% and 100% documents.







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With Construction starting in January of 2020 what are the expectations of the Owner/OAC as to those costs during those 6 months of "Negotiate MACC"?

EvergreenHealth/OAC response: We believe our conservative approach to defining this schedule is appropriate as there are many unknowns at this time respective of:

- Scope we intend to research and budget various options.
- Phasing this project will be heavily phased as we must maintain operational labor and delivery units.
- Permitting we have not opened discussions with the City of Kirkland yet surrounding this project, however, we are conservatively estimating permitting will extend into November 2019.
- We have allowed adequate time for MACC negotiation as we want to maintain comprehensive bid packages which may attract more subcontractors in a very heated market. We have concerns competition may be hard to come by with the ongoing work in downtown Bellevue and tech company campuses in Redmond.







Will that be considered a preconstruction effort if the 100% construction documents are being completed, or will the General Contractors Specified GC's start in July of 2019 and finish in January of 2023?

#### EvergreenHealth/OAC response:

The GC/CM Preconstruction effort will begin in August of 2018 and extend through the entirety of 2019. The GC/CM will be engaged in site investigations, document coordination, design coordination related to the Aging Infrastructure and Seismic Improvements GC/CM project, cost/scope/schedule analysis of various options, prefabrication analysis, and equipment/technology infrastructure analysis. We cannot create appropriate documents and bid packages (complete, concise, attractive bid packages) without the aid of a GC/CM partner for these on-site, invasive investigations, planning, and comparision budget analysis.





