



BOARD OF DIRECTORS' MEETING
AGENDA
THURSDAY, FEBRUARY 15, 2018
SPECIAL SESSION 5:00 P.M.

SCHANTZ CONFERENCE ROOM
SONOMA VALLEY HOSPITAL
347 Andrieux Street, Sonoma, CA

<p>In compliance with the Americans Disabilities Act, if you require special accommodations to participate in a District meeting, please contact Interim District Clerk Vivian Woodall at (707) 935.5005 at least 48 hours prior to the meeting.</p>		
AGENDA ITEM	RECOMMENDATION	
<p>MISSION STATEMENT The mission of SVHCD is to maintain, improve, and restore the health of everyone in our community.</p>		
<p>1. CALL TO ORDER</p>	<p><i>Rymer</i></p>	
<p>2. PUBLIC COMMENT SECTION <i>At this time, members of the public may comment on any item not appearing on the agenda. It is recommended that you keep your comments to three minutes or less. Under State Law, matters presented under this item cannot be discussed or acted upon by the Board at this time. For items appearing on the agenda, the public will be invited to make comments at the time the item comes up for Board consideration.</i></p>	<p><i>Rymer</i></p>	
<p>3. SELECTION OF DESIGN-BUILD TEAM AND FUNDING FOR SCHEMATIC DESIGN PHASE OF OUTPATIENT DIAGNOSTIC CENTER</p>	<p><i>Peluso Hohorst Mather</i></p>	<p>Inform/Action</p>
<p>4. ADJOURN</p>	<p><i>Rymer</i></p>	



Meeting Date: February 15, 2018

Prepared by: Peter Hohorst

Agenda Item Title: Selection of a Design Build Team and Funding for Schematic Design Phase for an Upgrade to an Outpatient Diagnostic Center

Recommendation:

That the Design Build Team of Dome Construction and Taylor Architects be hired to begin the process of schematic design in order to correct or mitigate the deficiencies of the current outpatient services facilities, both physical and operational, and to implement these solutions as funding becomes available, subject to Board approval of the Outpatient Diagnostic Center project.

Background:

Over the past 10 years the physical plant of the Sonoma Valley Hospital has undergone a significant transformation. Starting with an upgrading of the Birthing Center at the instigation of Suzanne Brangham, the upgrading of the Skilled Nursing Facility instigated by Helen Fernandez, and finishing with the GO Bond project to ensure the earthquake compliance of the Hospital through 2030, the facility now has the look and feel of a state-of-the-art medical facility.

The Hospital has a new Emergency Department, a key requirement of the Valley residents, a new efficient Operating Suite, the source of important revenue, a new power plant, and upgraded patient rooms for Acute Care.

But still to be tackled is the area of the facility that houses Outpatient Diagnostic Services. Outpatient services are an important revenue source for the Hospital and as such the facility and equipment that provides these services must remain competitive with surrounding hospitals.

Currently, the physical and operational deficiencies of this area are in sharp contrast to the newer parts of the facility.

- Outpatient Diagnostic Services in the Hospital utilize four separate waiting rooms.
- Imaging and Cardiopulmonary are at opposite ends of the Hospital, but often are part of the same diagnostic process.
- MRI patients must be transported outside and across the front entrance of the Hospital to the trailer and there is no weather protection.

- The CT has reached the end of its useful life and when replaced will require a larger facility to comply with OSHPD. Any equipment changes will require the room to meet current building code, accessibility standards and health & safety code requirements for the unit.
- Dedicated staff restrooms and locker room are required for each unit. Medical Imaging is currently non-compliant and will need to become compliant during any future projects to replace equipment.
- Medical Imaging dressing rooms do not meet Accessibility standards nor does the waiting room have enough capacity for current patient flow.
- The Central Wing is over 60 years old and this area must be upgraded to make it useful.
- The old ambulance entrance detracts from the appearance of the Hospital.

In addition, the West Wing and any associated structures must be retrofitted to meet the 2030 SPC-4D earthquake code requirements in order to continue providing the required acute care services that support an Emergency Department.

In November the Hospital issued an RFP to solicit proposals for a Design Build Team to address these deficiencies with a project that fully meets the Hospital's needs of program, budget, on-going operations and design standards. The intention of the project is to utilize the unoccupied space formerly housing the Emergency Department and Surgery suites (i.e., partitions, doors/frames, MEP systems, etc.) where code allows.

The Hospital received proposals from three design build teams. With the help of Vertran Associates these proposals have been evaluated and the top two teams have been interviewed. The results of this evaluation have been scored based on seven predetermined criteria. The tabulation of this scoring is attached. The design build team of Dome Construction and Taylor Architectural Design scored significantly higher than either of the other two teams and is the recommended choice for the project.

They had the most experience with Hospital remodeling projects of similar size (see attached team organization information).

Approval of the Dome/Taylor team will commit the Hospital to the cost of preconstruction services to develop the Schematic Design and perform seismic and mechanical/electrical/plumbing studies for the optimal solution for the Hospital's Outpatient Diagnostic Services facility. The construction phase of the project will not start until the Foundation's capital campaign has raised the needed funds.

Consequences of Negative Action/Alternative Actions:

The Hospital's Outpatient Diagnostic Services equipment and facilities will fall behind its competitors, resulting in a potential loss of business.

Financial Impact:

Preliminary Budget of \$605,000 for Schematic Design, Seismic Study & MEP Study

Attachments:

Design Build Team selection score sheet

Dome/Taylor presentation

Outpatient Diagnostic Center

Sonoma Valley Health Care District Board of Directors

February 15, 2018



Agenda

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Process

- Sonoma Valley Health Care District issued a Request for Qualifications in September 2017.
- 4 teams responded: Boldt; Build Group; Dome; GMH.
- 3 teams qualified to respond to the Request for Proposal for Design Build teams: Boldt; Build Group; Dome.
- Request for Proposals for Design Build teams issued in November 2017.
- Each of the 3 Qualified teams responded to the RFP.

Criteria Used for Selection

The design build entities were evaluated on the following items:

- Proposal Determined to be Responsive
- Proposed Staff / Project Team
- Project Approach
- Expected Cost Range for Design, Preconstruction, Construction General Conditions, Construction Project Requirements, Insurance, Bond, and Fee
- Design Build team's evidence of completed or demonstrated experience, competency, capability to complete projects of similar size, scope, and complexity.
- Comments on Design Build Agreement

Selected Design Build Team

Request: Award Preconstruction Services to the Design Build Team of **Dome Construction/Taylor Design**

Scoring (100 points possible)

- **Dome Construction/Taylor Design = 98 points**
- Boldt Company/Boulder Architects = 73 points
- Build Group/Cushieri Horton/Polytech = 63 points

Preliminary Funding Request

The preliminary funding request is for design and preconstruction services for the Outpatient Diagnostic Center through Schematic Design in the amount of \$605,000.

Breakdown of Costs:

- Dome Construction/Taylor Design = \$553,000
- Vertran Associates Project Management = \$52,000

The full project cost will be provided once we have completed the Seismic and MEP studies and the schematic design of the scopes of work listed in Slide 7.

Outpatient Diagnostic Center Narrative

- Preconstruction Services / Schematic Design to address these scopes:
 - Seismic Study – Study West Wing to determine structural upgrade requirements to meet OSHPD standards for SPC 4D
 - MEP Systems Study – Study the remaining life of the existing Mechanical, Electrical, Plumbing systems that will serve the Outpatient Diagnostic Center
 - CT Room Expansion + Equipment Upgrade
 - MRI Modular Unit or Build MRI in West Wing
 - Outpatient Entrance and Waiting Area, Refurbished Parking Area, Wellness Garden and Donor Wall
 - Cardiopulmonary Clinic
 - IDF Closet
 - Staff Bathrooms/Lockers, Offices & Breakroom; Storage

Typical Project Process



Phase I
Qualified
Idea

Spring 2017
\$15-20M

Phase II
Programming
& Pre-Design

Fall 2017
RFQ/RFP

Phase III
Schematic
Design

Summer 2018
Project Cost
Validated

Phase IV
Design
Development

Phase V
Construction
Documents

Phase VI
Construction
Phase

Phase VII
Project
Close Out

Next Step: Report Back After Schematic Design Complete

- Schematic Design will be a four month process with the goal of presenting a plan, budget and schedule for the Outpatient Diagnostic Center in July 2018
 - Project cost will be by phase and will include a comprehensive schedule

Board Action Required

- Approve Dome Construction and Taylor Architects to be the Design Build Team for the Outpatient Diagnostic Center
- Approve Schematic Design funding request – funds from the SVH Foundation

Note: Prior to Requesting Board Approval for starting construction, SVH Foundation will demonstrate the appropriate funds have been raised.

Questions



**SONOMA VALLEY
HOSPITAL**

OUTPATIENT DIAGNOSTIC CENTER

February 5, 2017



YOUR TEAM



MIKE FIRENZE
DIRECTOR
DOME CONSTRUCTION



MELISSA BERG
PROJECT EXECUTIVE
DOME CONSTRUCTION



MATT JOHNSON
PROJECT DIRECTOR
TAYLOR DESIGN



STEPHANIE L'ESTRANGE
DESIGN DIRECTOR
TAYLOR DESIGN



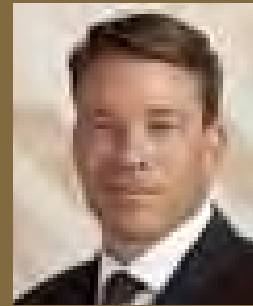
JIM GLEESON
SUPERINTENDENT
DOME CONSTRUCTION



MARLENA BABCOCK
ASST. PROJECT MANAGER
DOME CONSTRUCTION

CONSULTANT TEAM

Structural Engineer



Kevin S. Moore
Senior Principal

MEP | Low Voltage



Jeffrey Blaevoet
Mechanical & Plumbing Principal



Victor G. Steffen
Electrical, Lighting & Low-Voltage Principal

Signage



Andrea Guzman
Principal in Charge



Jamie Beckman
Associate Principal



Matt Kennedy
Civil Engineer

Landscaping



Fire Protection

Civil Engineering

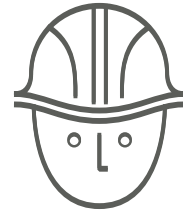
ABOUT US



Pre-Lease



Preconstruction



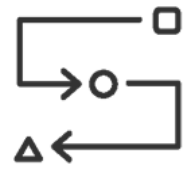
Construction



Architectural Design



Interior Design



Design Strategy

1,000+
Healthcare Projects

OSHPD-1
OSHPD-2
OSHPD-3
CLINICS
LABS

4,950+
Healthcare Projects

OSHPD-1
OSHPD-2
OSHPD-3
CLINICS
LABS

5 Offices

Throughout California

49 


Years Almost 50!!

3 Offices

Throughout California

39 

Years Almost 40!!

240 | Employees 

82 | Employees  100%
Employee Owned

OUR SYNERGY



DESIGN THAT

EMPOWERS

PEOPLE



TO MAINTAIN, IMPROVE

AND RESTORE THE HEALTH

OF EVERYONE

IN OUR COMMUNITY



VALUE OUR PEOPLE

SEEK TO UNDERSTAND

DO IT RIGHT



ABOUT YOU

The "Healing Hospital"

Promoting wellness

Outpatient volumes

Senior & Latino population

A community partner

Staff recruitment/retention



"The atmosphere of our hospital is like the atmosphere of Sonoma. We are a warm, comfortable, familial place of healing. We are known for our compassionate and professional staff and for our dedication to the needs and expectations of our community."

Sonoma Valley Hospital

LIKE COFFEE?



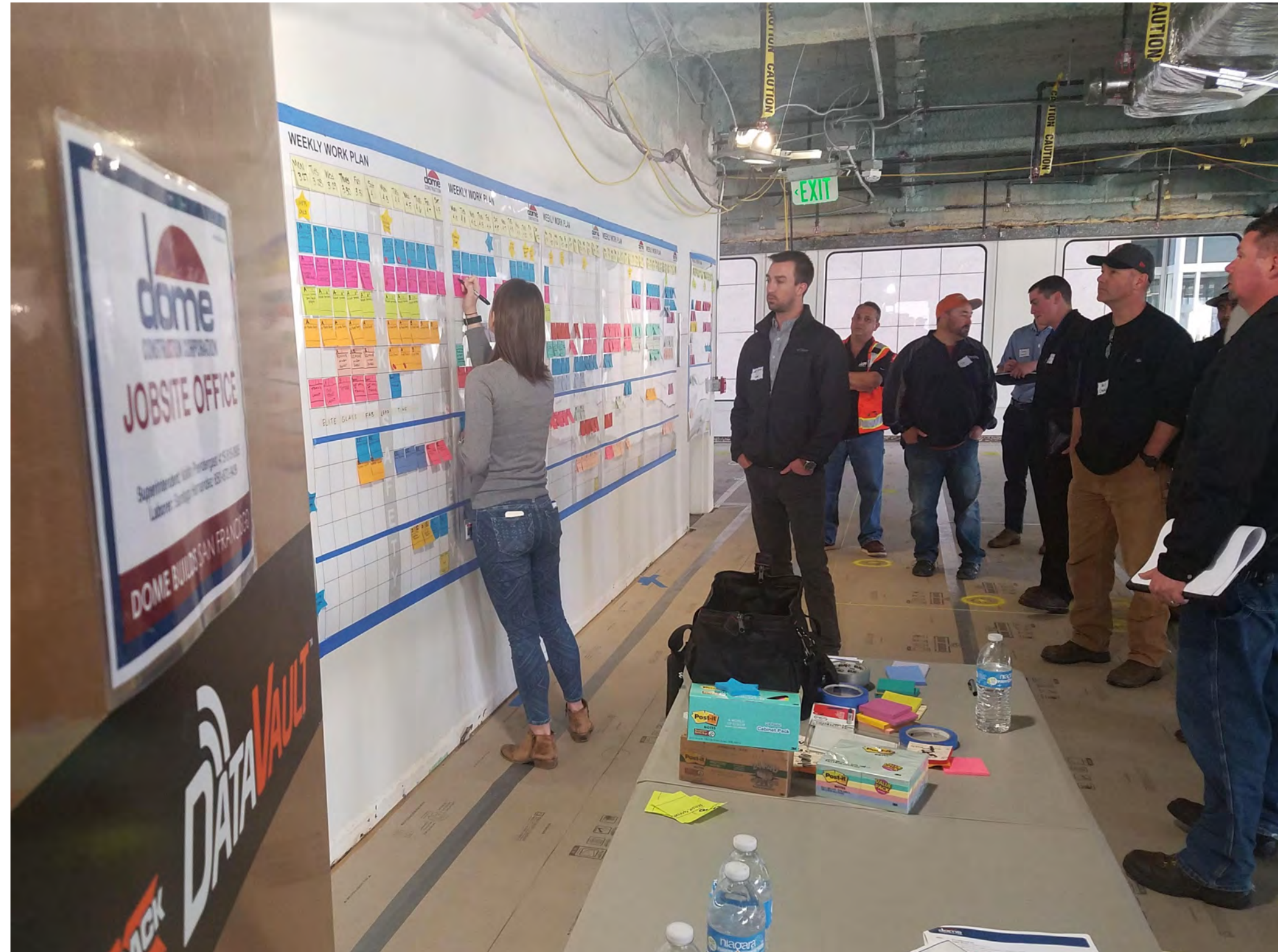
WHAT IS LEAN?

Traditional Production	Lean Production
Focus on results	Focus on customer value
Independent	Interdependent, closely linked
Self-paced work and breaks	Process-paced work, time as a discipline
“Leave me alone”	“I work as part of a team”
Blame	There is a problem that we need to fix
We do whatever it takes to get the job done; I know whom I can rely on at crunch time	There’s a defined process for pretty much everything; follow the process
“I define my own methods”	Methods are standardized
Results are the focus, do whatever it takes	Process focus is the path to consistent results
Improvement is someone else’s job; it’s not my responsibility	Improvement is the job of everybody
Push	Pull

LEAN EXPERIENCE

- Design Phase Pull Plan
- Target Value Design
- Value Matrix
- Affinity Diagrams
- Value Stream Mapping
- Set-Based Design
- Choosing by Advantages
- Construction Pull Plan
- Reliable Commitments
- Constraint Board

...right sized for you.

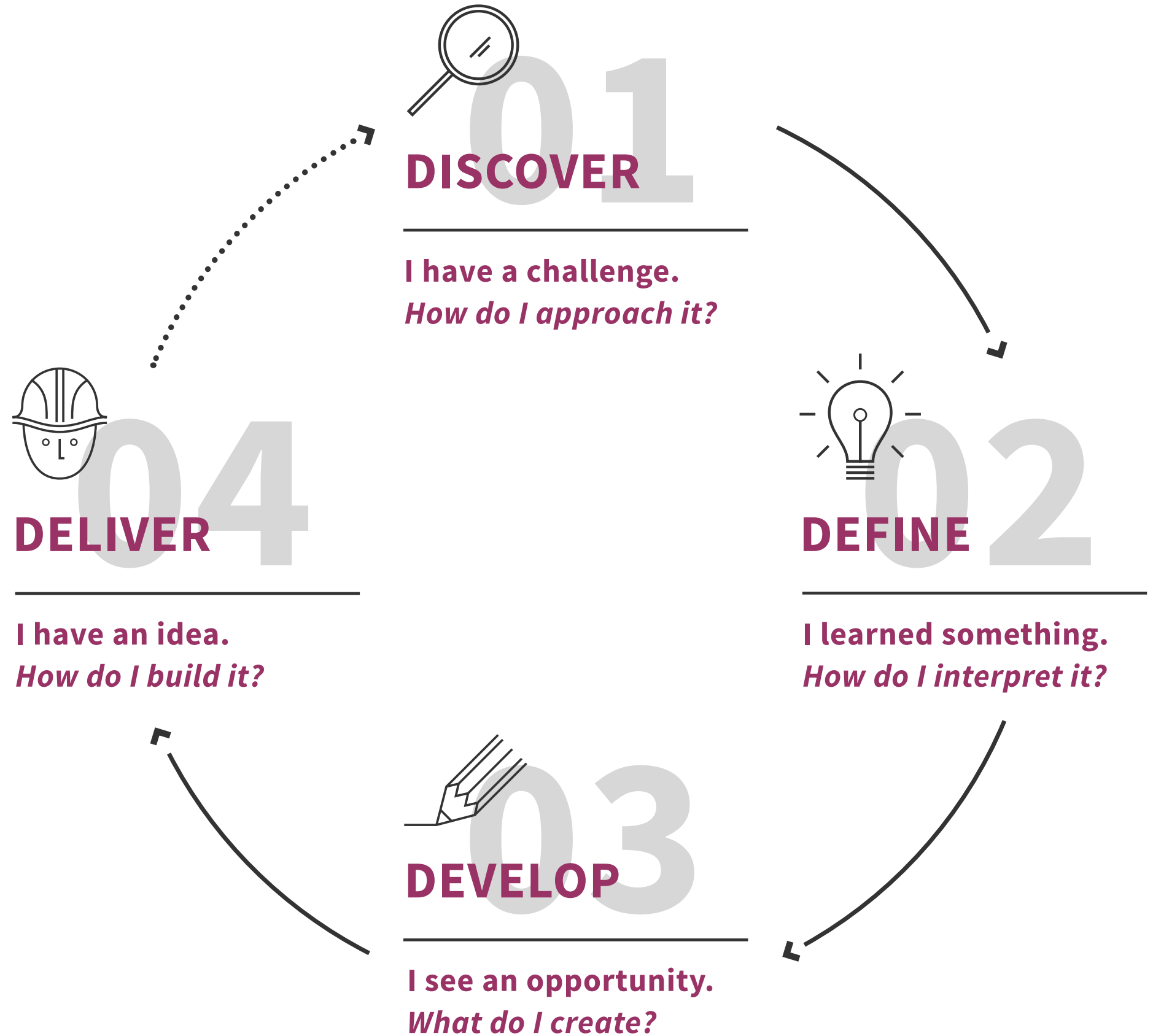


EXPERIENCE DESIGN



OUR PROCESS

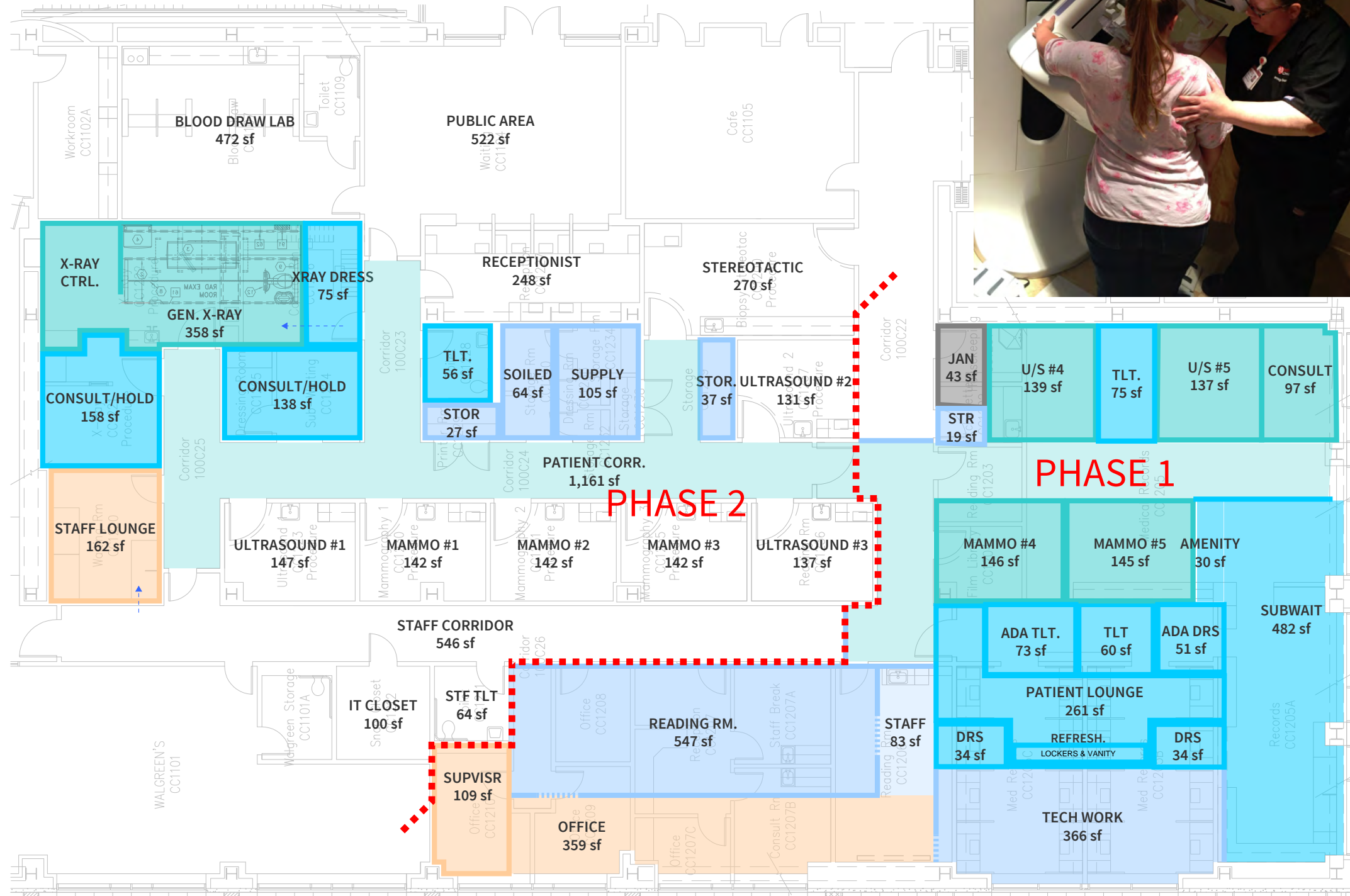
We use strategy-based design to leverage the best of lean methodology, human-centered design, and design thinking.



RELEVANT PROJECT

Stanford Women's Center Imaging Remodel

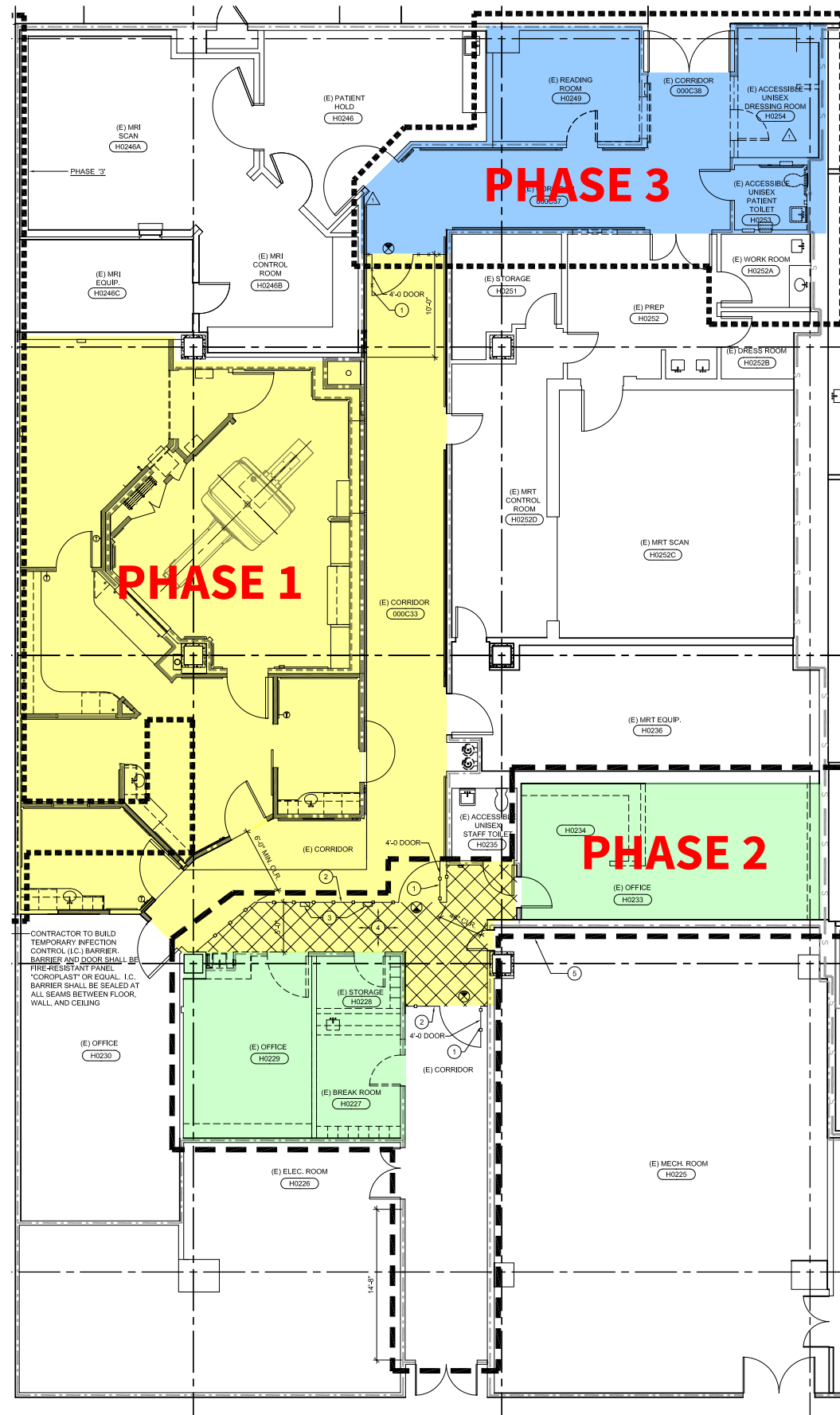
- The "Gurney Journey"
- Stanford template beta-test
- Phased design & construction
- Bid alternates
- Workplace strategy



RELEVANT PROJECT

Stanford Hospital MRI & Radiology Reno.

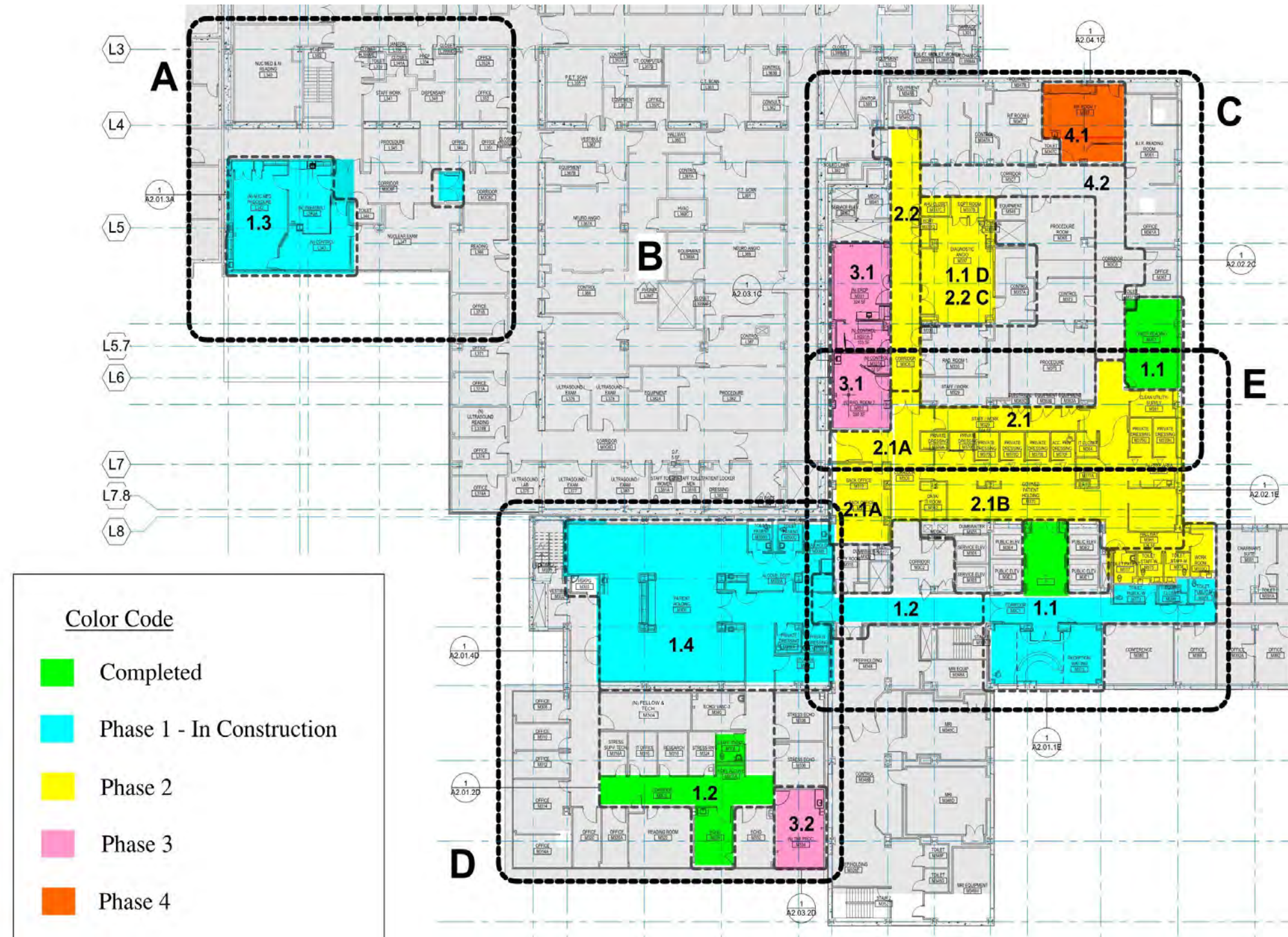
- Multi-phased
- Imaging modalities
- Multiple bid periods
- OSHPD negotiation



RELEVANT PROJECT

UCSF Medical Center Radiology Renovation

- Strong, cooperative relationships with facilities and staff
- Understanding patient safety and comfort is always top priority
- Constant monitoring of infection control barriers and negative air
- Early and detailed planning for shutdowns



Phasing Plan in Occupied Facility

RELEVANT PROJECT

Stanford Hospital Bone Marrow Transplant Lab

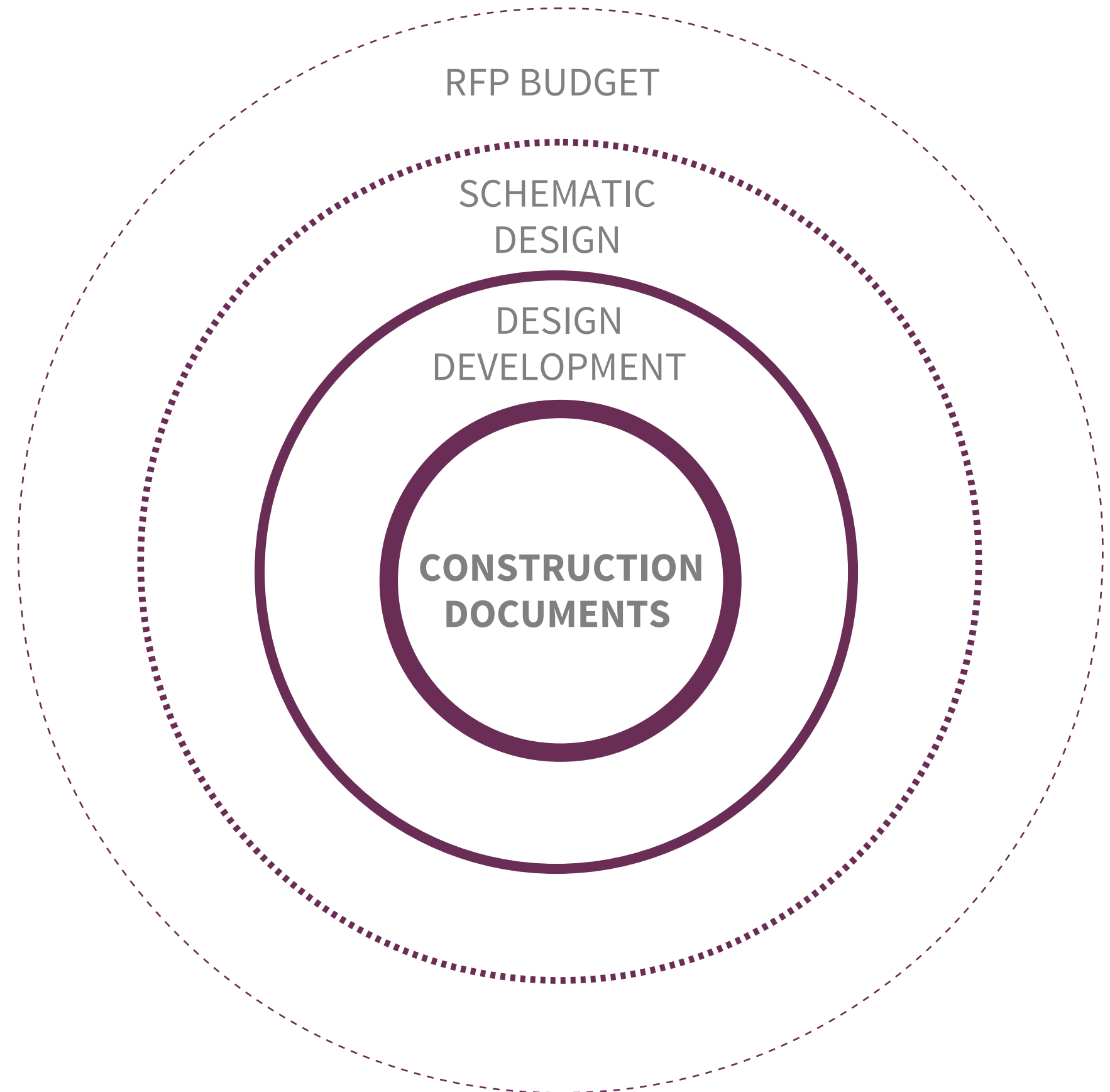
- Communication, communication...
communication
- Constantly anticipating
constraints BEFORE delays
- Staying ahead of procurement
- Cost control & savings assessments



<https://my.matterport.com/show/?m=86GHkcvEBsc&brand=0>

OUR PROCESS

We will utilize target value design to focus on value with in-depth review of phasing impacts, constructability, and cost saving alternatives.



Let's define the experience.



PEDESTRIAN EXPERIENCE

West and south perimeter



PEDESTRIAN EXPERIENCE

East and northeast perimeter



COURTYARD EXPERIENCE







PEDESTRIAN EXPERIENCE

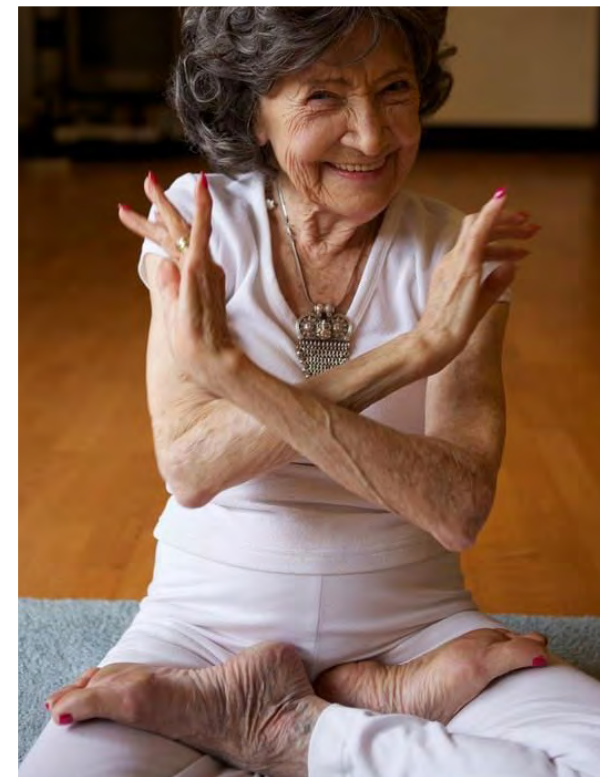
North central perimeter





WHAT IF...

we could promote “self love, breathing, positive choices, balance and trust” through the use of materials, lighting and landscape.



ENTRY, LIKE OPEN ARMS WELCOMING THE COMMUNITY

CREATE A SPA-LIKE INTERIOR USING QUIET COLORS

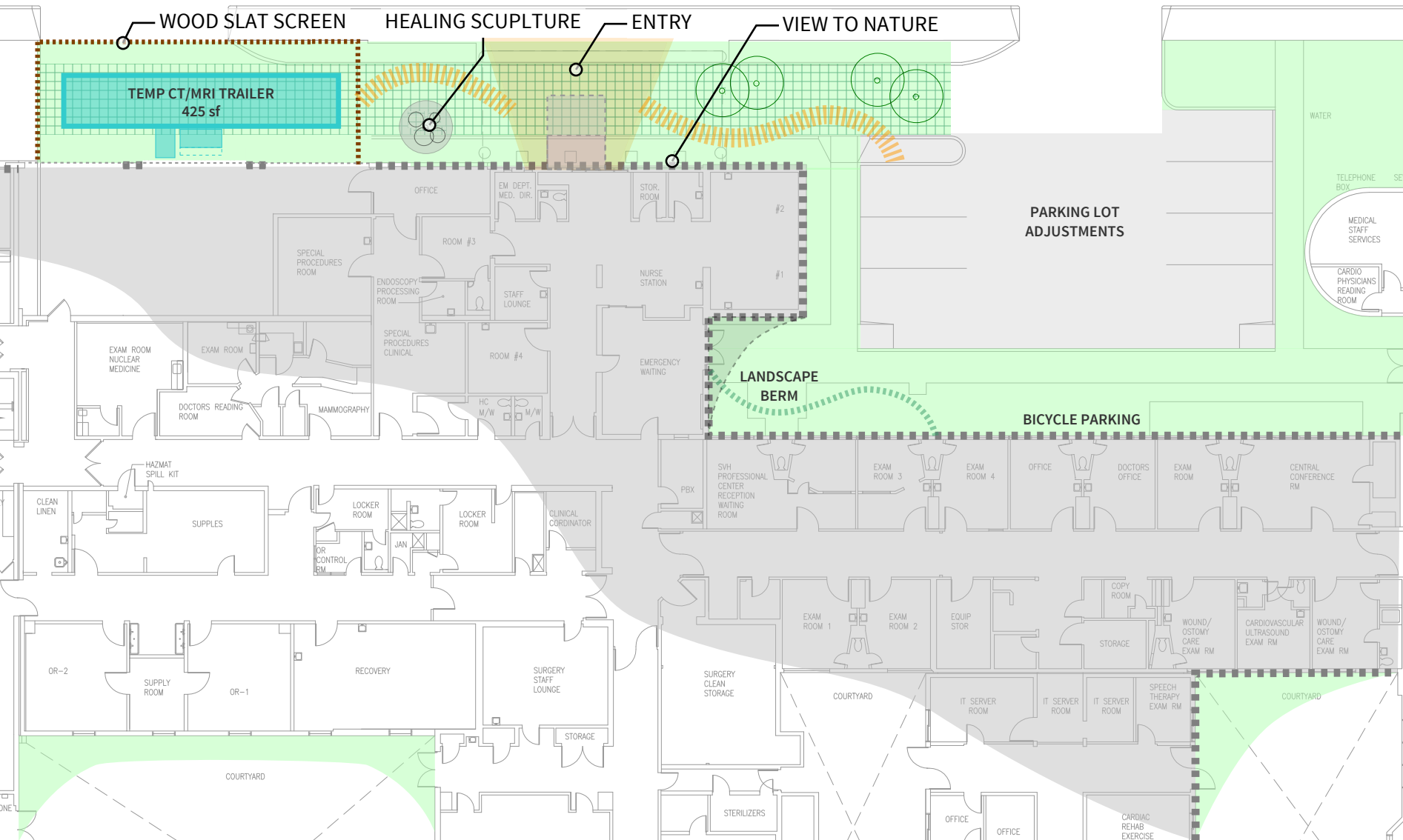
CREATE A CALMING EXPERIENCE USING HONEST MATERIALS

CREATE MINDFULNESS GARDEN / DONOR GARDEN

PROVIDE PLACE TO WALK, TO BREATHE AND TO PROVIDE FOCUS

WHAT IF...

we could promote “self love, breathing, positive choices, balance and trust” through the use of materials, lighting and landscape.



ENTRY, LIKE OPEN ARMS WELCOMING THE COMMUNITY

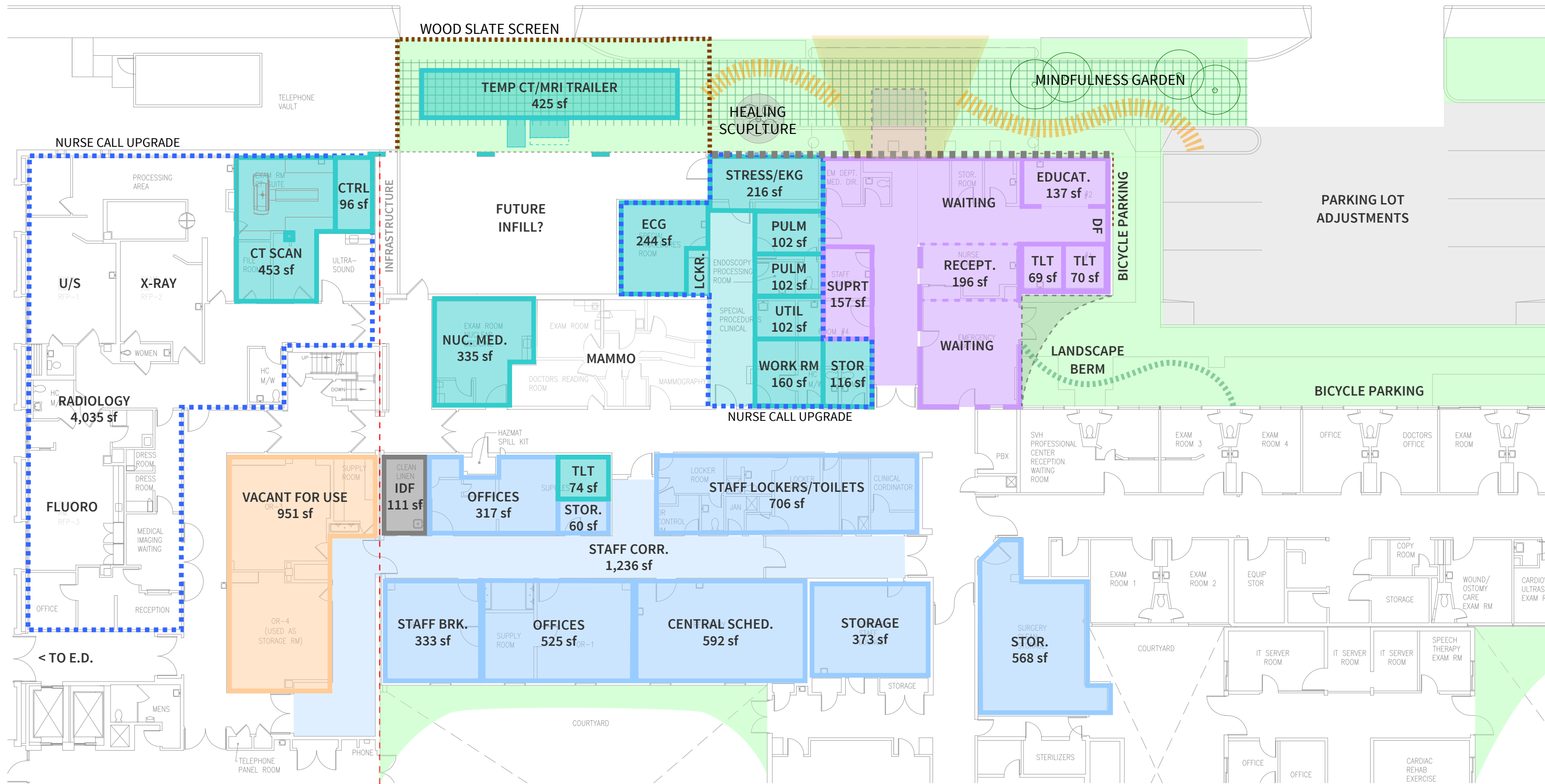
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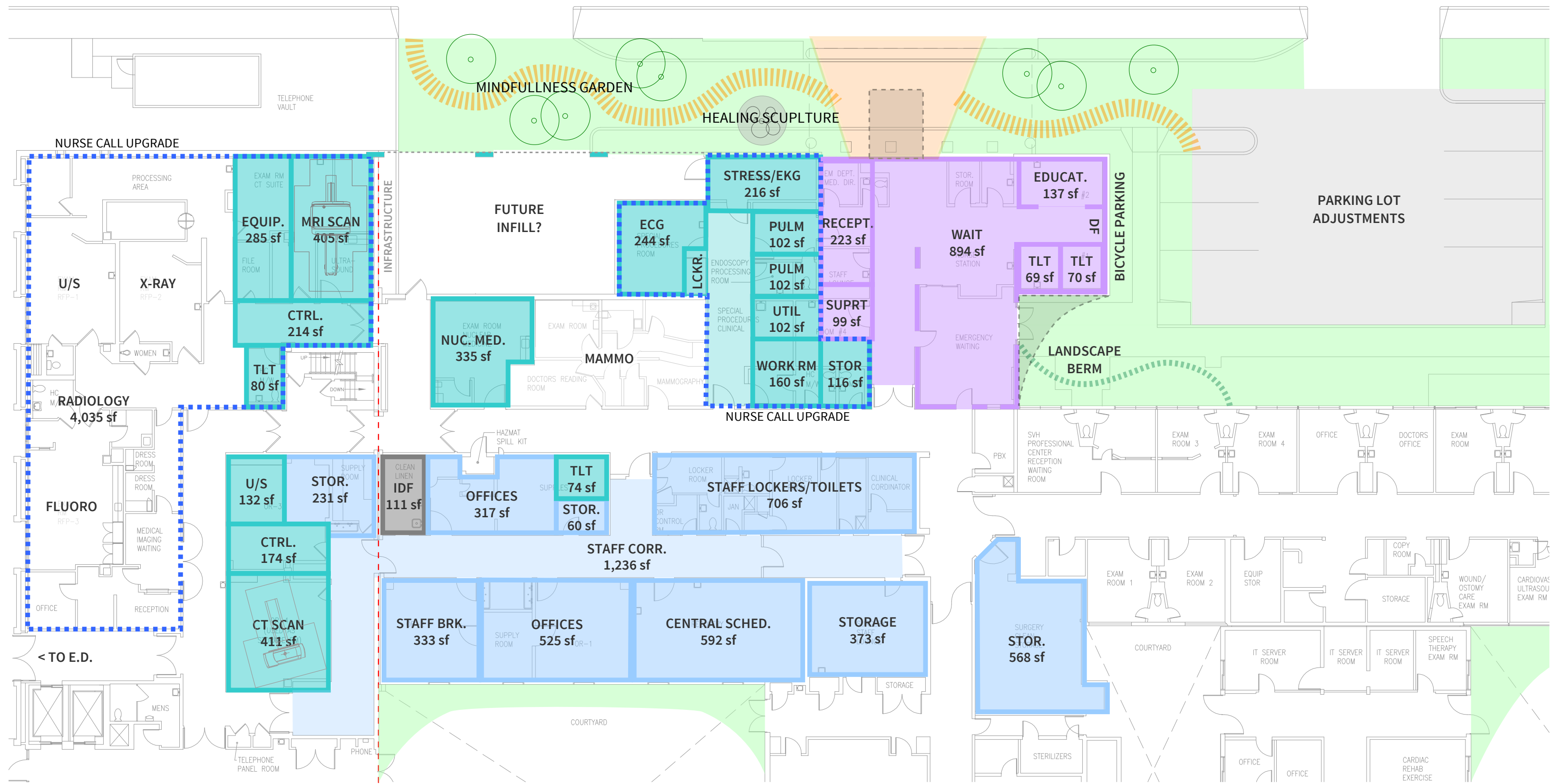
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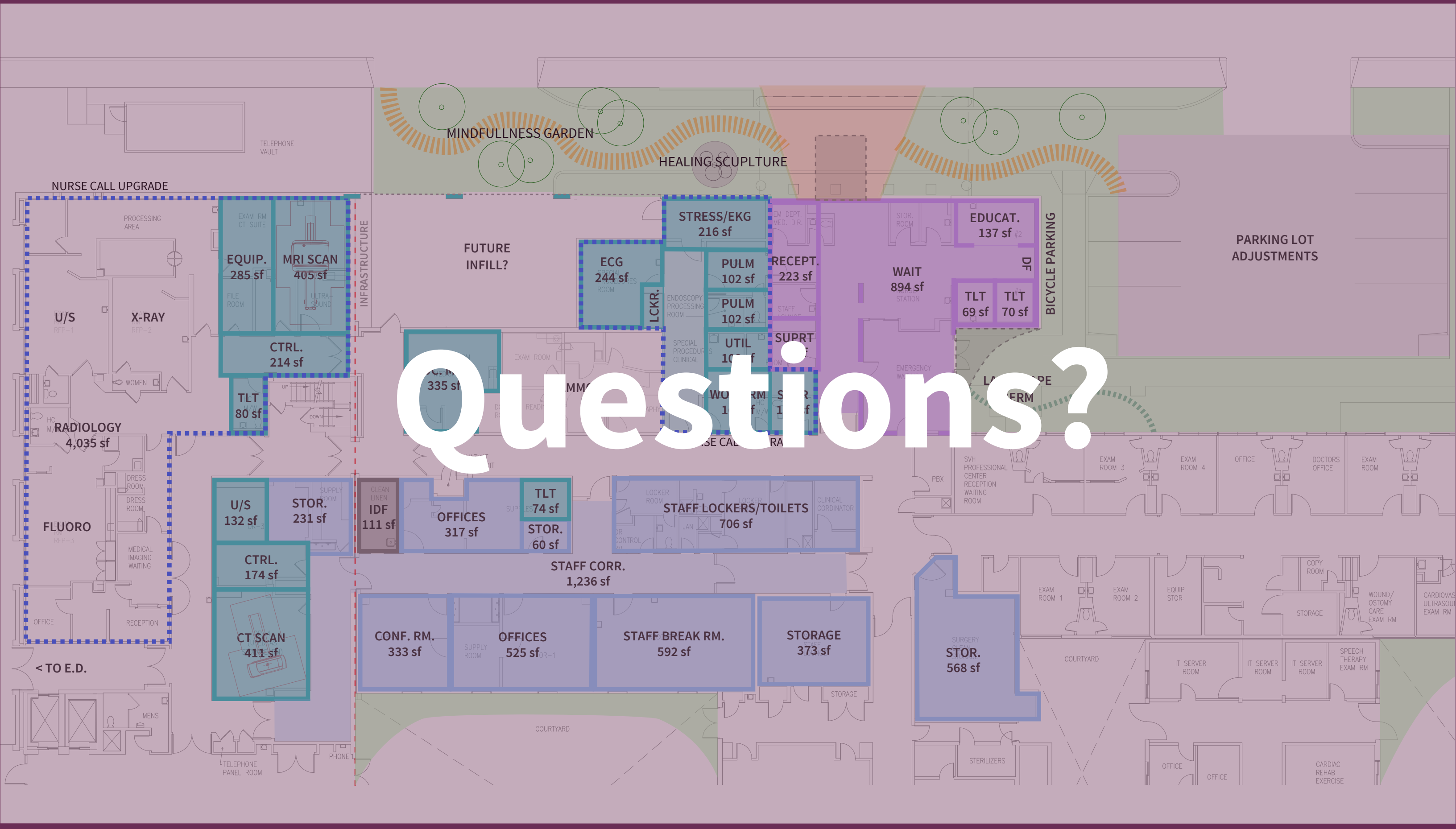
PROVIDE PLACE TO WALK, TO BREATHE AND TO PROVIDE FOCUS











Sonoma Valley Hospital ODC - RFP Responses Scoring Sheet

Items from Tabs 1-4 (Potential Total Points = 100)	Design Build Team 1	Design Build Team 2	Design Build Team 3
	The Boldt Company Boulder Architects	Build Group Cushieri Horton Architects Polytech Architects	Dome Construction Taylor Design
<p>Factor: Design Build Team (35 points)</p> <p><i>Criteria:</i> Significant experience with similar size and scope of projects</p> <p><i>Attribute:</i> Boulder: similar experience, good team members</p> <p><i>Score:</i></p>	<p>Boldt team: field supts don't have relevant project exp; poor feedback; no DB project that match our scope, etc.</p> <p>25</p>	<p>Build Group: some OSHPD exp.; similar DB projects Proposing 2 architect firms across phases</p> <p>20</p>	<p>Dome: strong supt w/ 30 yrs OSHPD; strong PX/PM Taylor: most interactive architect during WT's</p> <p>35</p>
<p>Factor: Project Approach (10 total points)</p> <p><i>Criteria:</i> Preconstruction Phase</p> <p><i>Attribute:</i></p> <p><i>Score:</i></p>	<p>Defining value first (A3); existing conditions (BIM); studies (CBA); design (scrum analysis); TVD; rapid prototyping effort; big room</p> <p>10</p>	<p>Development of project goals first; build it on paper first; process software (Procore, Plan Grid, etc.); communication, QC</p> <p>10</p>	<p>Defining value first; phases - study, SD, DD, CD, bidding</p> <p>10</p>
<p>Factor: Project Approach (10 points)</p> <p><i>Criteria:</i> Construction Phase</p> <p><i>Attribute:</i></p> <p><i>Score:</i></p>	<p>Boldt Planning System; BIQ; field mngt; safety; planning to avoid delays Heavy Lean processes & tools; TVD, LPS, Value Discovery</p> <p>10</p>	<p>Working in occupied spaces; sharing responses (on-site patient advocate); design intent; constructability; schedules No Lean processes or tools</p> <p>3</p>	<p>Schedule, procurement, cost control, submittals, earned value money, QC, safety, closeout Good Lean processes: TVD, LPS, Value Discovery</p> <p>10</p>
<p>Factor: Project Approach (10 points)</p> <p><i>Criteria:</i> Management of Cost</p> <p><i>Attribute:</i></p> <p><i>Score:</i></p>	<p>Set based design validation; design to budget approach TVD approach to design</p> <p>10</p>	<p>Extensive estimating exp; CM & GC exp Very traditional approach to design, bid, value eng.</p> <p>5</p>	<p>Kevin & Mike Firenze, 40 years of field & operations exp. Experienced estimator and builder</p> <p>8</p>
<p>Factor: Project Approach (10 points)</p> <p><i>Criteria:</i> Pricing Examples</p> <p><i>Attribute:</i></p> <p><i>Score:</i></p>	<p>1. Medical equipment planning & coordination 2. Multiple phases planning No relevant examples to our project</p> <p>0</p>	<p>1. Utilized Leica Scan Station technology to identify clashes & BIM modeling No relevant examples to our project</p> <p>0</p>	<p>1. Stanford Hospital SC Clinic 2. Vascular Specialists of SF Examples relevant to our project</p> <p>10</p>
<p>Factor: Fee Proposal (15 points)</p> <p><i>Criteria:</i> Competitive Fee and General Conditions</p> <p><i>Attribute:</i></p> <p><i>Score:</i></p>	<p>5% fee GC/GR \$2,238,997</p> <p>8</p>	<p>5% fee GC/GR \$1,144,687</p> <p>15</p>	<p>4% fee GC/GR \$1,215,652</p> <p>15</p>
<p>Factor: Agreement Comments (10 points)</p> <p><i>Criteria:</i> No deal breakers</p> <p><i>Attribute:</i></p> <p><i>Score:</i></p>	<p>no deal breakers</p> <p>10</p>	<p>no deal breakers</p> <p>10</p>	<p>no deal breakers</p> <p>10</p>
Total Scores	73	63	98