



DBPM MEMO-MFP 2.0

Sent to:

Talia Baker
CPARB/PRC Program Specialist
(360) 407-8260
PRC@des.wa.gov

Via email PDF File Content

SUBJECT: Summit Pacific Medical Center
PRC Application for GC/CM Contracting Alternative

NOTES: Please find included the completed PRC Application form and request for a confirmed interview date on September 22, 2022.

Thank you,

Dick Bratton

DBPM
425-894-4591
dbrattonpmlc@outlook.com

CC: SPMC

Dick Bratton Project Management

State of Washington
Capital Projects Advisory Review Board (CPARB)
PROJECT REVIEW COMMITTEE (PRC)

GC/CM PROJECT APPLICATION

*To Use the General Contractor/Construction Manager (GC/CM)
Alternative Contracting Procedure*

The PRC will only consider complete applications: Incomplete applications may result in delay of action on your application. Responses to Questions 1-7 and 9 should not exceed 20 pages (*font size 11 or larger*). Provide no more than six sketches, diagrams or drawings under Question 8.

Identification of Applicant

- a) Legal name of Public Body (your organization): **Gray's Harbor County Public Hospital District #1, aka Summit Pacific Medical Center**
- b) Mailing Address: **600 E Main St, Elma, WA 98541**
- c) Contact Person Name: **Dick Bratton**Title: **Owner Rep/PM**
- d) Phone Number: **425-894-4591** E-mail: **dbrattonpmlc@outlook.com**

1. Brief Description of Proposed Project

- a) Name of Project: **Hospital Expansion Project-SPMC**
- b) County of Project Location: **Gray's Harbor**
- c) Please describe the project in no more than two short paragraphs. (*See Example on Project Description*)
Expansion to the existing ACH facility in Elma, WA. Project includes Emergency Department Renovation and Expansion, Internal MRI Facility, Added Inpatient Unit comprised of 20 Beds, Increased Employee and Patient Parking in Two Areas, Relocation of Heliport. GSF of Expansion/Renovation 35,000 SF. Connection to the existing hospital will be directed to the SW approaching Main Street.

2. Projected Total Cost for the Project:

A. Project Budget

Costs for Professional Services (A/E, Legal etc.)	\$ 2,400,000
Estimated project construction costs (including construction contingencies):	\$ 28,500,000
Equipment and furnishing costs	\$ 5,050,000
Off-site costs	\$ 300,000
Contract administration costs (owner, cm etc.)	\$ 400,000
Contingencies (design & owner)	\$ 4,000,000
Other related project costs (briefly describe) Legal and Financing	\$ 1,500,000
Sales Tax	\$ 2,500,000
Total	\$ 44,650,000

B. Funding Status

Please describe the funding status for the whole project. *Note: If funding is not available, please explain how and when funding is anticipated*

SPMC has a number of options for financing and will be simultaneously pursuing these options and choose the best plan of finance given rates and terms at the time monies are needed for construction. Specifically, SPMC may utilize the USDA Community Facilities Loan Direct and Guaranteed Loans, General Obligation Bonds and Revenue Bonds or some combination thereof. Discussions are ongoing with a contracted financial consultant to evaluate funding for Q1 2023 confirmation

3. Anticipated Project Design and Construction Schedule

Please provide:

The anticipated project design and construction schedule, including: Procurement

Item	Task	Date
1	GC/CM PCARB Application Submittal	August 22, 2022
2	SH PRC Presentation	September 22, 2022
3	GC/CM Delivery Approval	September 22, 2022
5	GC/CM RFQ Due	October 20, 2022
6	GC/CM Interviews	October 30, 2022
7	GC/CM RFFP-Selection	November 2022
8	Schematic Design Complete	Q1 2023
9	Baseline Estimate	Q1 2023
10	GC/CM Budget - 70% DD	Q2 2023
11	VE/Constructability	Ongoing thru Design
12	Design Development Complete	Q2 2023
13	Baseline MACC 90% Construct Docs	Q3 2023
14	Construction Docs 100%	Q4 2023
15	Permitting-Site/Building	Q4 2023
16	Final MACC	Q4 2023
17	Site Mobilization	Q1 2024
18	Construction Completion	Q2 2025

- a) Hiring consultants if not already hired; and
Prime consultants have been selected and procured for the project including Environmental, GeoTech, Survey, Heliport. As design progresses toward construction additional consultants will be engaged to provide Commissioning, Special Inspections, FFE.
- b) Employing staff or hiring consultants to manage the project if not already employed or hired.
The project is in early program design. The Owner Rep/Project Manager, Contracts Counsel and the Architect of Record and prime design team of engineers have been contracted. The Owner has on staff project management personnel and support. The GC/CM will be selected prior to the completion of schematic design allowing sufficient time to review the GC/CM contract and preconstruction agreement before Design Development commences and to provide an initial baseline estimate to which design phasing forward may be monitored against budget advice.

4. Why the GC/CM Contracting Procedure is Appropriate for this Project

Please provide a detailed explanation of why use of the contracting procedure is appropriate for the proposed project. Please address the following, as appropriate:

- If implementation of the project involves complex scheduling, phasing, or coordination, what are the complexities?
 - **The campus operates as an ACH in Elma, WA. Ongoing hospital operations are essential during the course of the expansion project**
 - **The current Emergency Department must be maintained for continued functionality through the course of construction and expansion to the ED area**
 - **Phasing the ED remodel and ED expansion is critical for both public safety as well as hospital operations**
 - **Relocation of the existing heliport will require diligent phasing of the schedule during construction**
 - **The coordination and solicitation of key material suppliers and subcontractors interested and qualified in working in the remote Elma area will provide SPMC confidence of receiving broad input from all trades during the establishment of the MACC.**

- The GC/CM will be integral in developing the Subcontractor bid package plan during the design phase and working with both SPMC and the design team. Select bid packages will require pre-bid determination for subcontractor eligibility and material availability.
 - SPMC will work with the GC/CM during the preconstruction phase to determine the benefit of using the MCCM/ECCM process under the RCW 39.10.385 guideline for these significant portions of the scope of work. Having MC/EC on board during design will enable critical BIM evaluation and clash detection early in the detail design phase.
- If the project involves construction at an existing facility that must continue to operate during construction, what are the operational impacts on occupants that must be addressed?
 - Continued operations of the Emergency Department must be maintained during the project construction
 - The heliport must be moved, and a temporary location established, evaluation of a permanent location will be confirmed during the DD phase with GC/CM review as required for scheduling and constructability analysis
 - Public and staff access to the existing hospital will be managed with a safe and user-friendly practice
 - If involvement of the GC/CM is critical during the design phase, why is this involvement critical?
 - Early construction cost budgeting during SD phased of design will assist in confirmation of costs essential in procuring financing for the project
 - Phasing plans will enhance design parameters critical for soliciting costs for the final MACC
 - Value Engineering during design for material availability and BIM coordination during design will provide final design scope necessary for a cogent MACC
 - If the project encompasses a complex or technical work environment, what is this environment?
 - Connecting the expansion of the building footprint to existing structure will require strict coordination with operations as well as providing constructability analysis for structural integrity and building envelop compatibility.
 - If the project requires specialized work on a building that has historical significance, why is the building of historical significance and what is the specialized work that must be done? **NA**
 - If the project is declared heavy civil and the public body elects to procure the project as heavy civil, why is the GC/CM heavy civil contracting procedure appropriate for the proposed project? **NA**

5. Public Benefit

In addition to the above information, please provide information on how use of the GC/CM contracting procedure will serve the public interest (*For Public Benefit related only to Alternative Subcontractor Selection, use Supplement A or Supplement B, if your organization decides to use this selection process. Refer to Question No. 11 of this application for guidance*). For example, your description must address, but is not limited to:

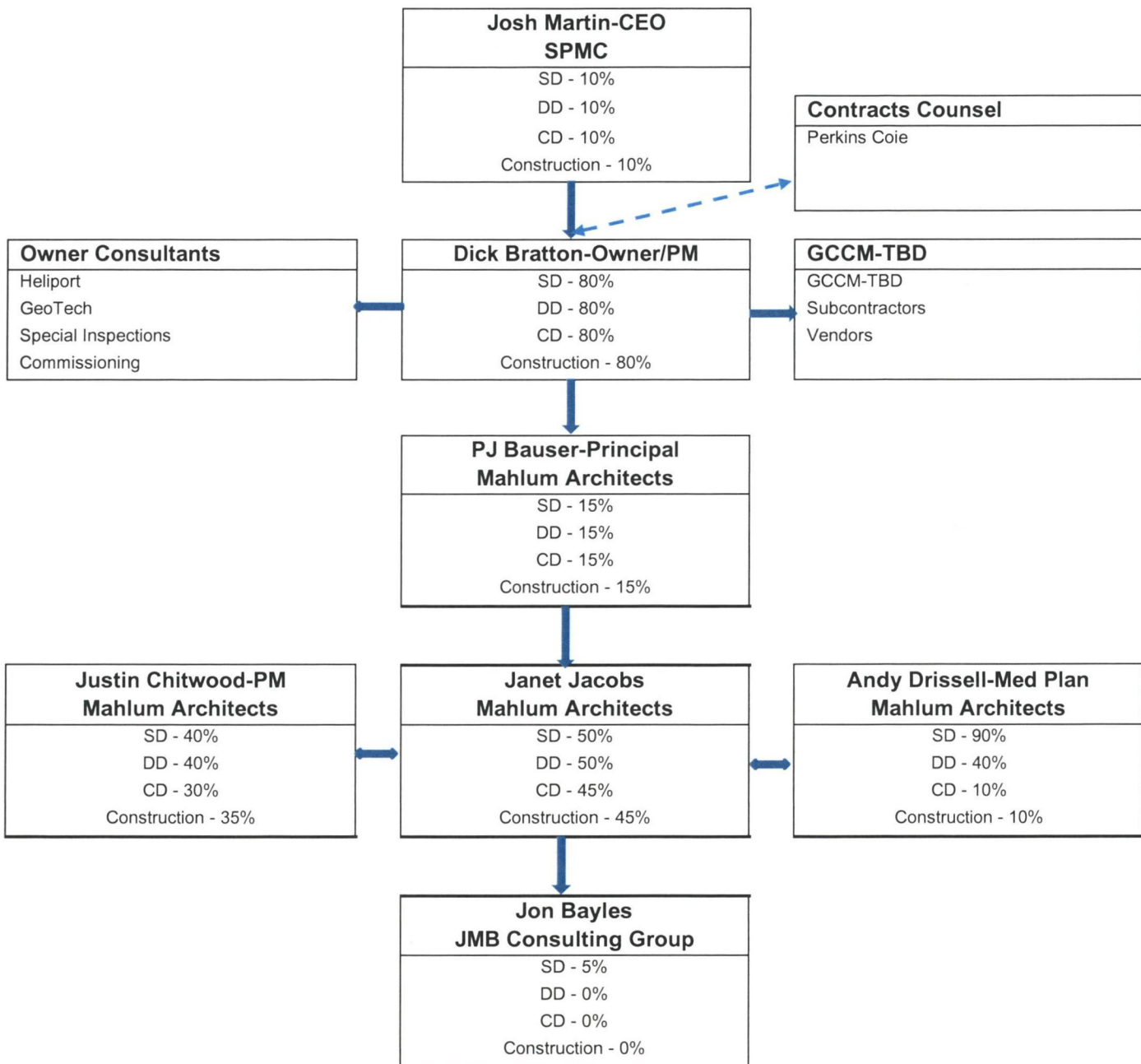
- How this contracting method provides a substantial fiscal benefit
 - The GC/CM alternative contractive method provides a significant benefit to the public entity in the surrounding geographic area in terms of delivering an essential, modern, and accessible hospital expansion with additional services facility in a schedule representative for public uses at the earliest possible time. This enhanced delivery schedule is supplemented by the team of Project Manager, AOR and GC/CM to completely define the project scope and costs of construction early in the design phase and the ability to select subcontractors based on competitive and qualified bid responses. The construction industry is currently at a peak load throughout the western US, and it is very difficult to find available and competent sub trades in many contract categories of construction expertise in the near term. The SPMC expansion facility will benefit from the ability to select the contracting entities based on a qualified and competitive selection criterion.

6. Public Body Qualifications

Please provide:

- A description of your organization's qualifications to use the GC/CM contracting procedure.
- A **Project** organizational chart, showing all existing or planned staff and consultant roles.
Note: The organizational chart must show the level of involvement and main responsibilities anticipated for each position throughout the project (for example, full-time project manager). If acronyms are used, a key should be provided. (See Example on Project Organizational Chart)

Project Organization Chart SPMC Expansion Project



- Staff and consultant short biographies

Dick Bratton Project Management [DBPM]

SPMC-Owner Rep/PM

DBPM was established in 2003 for the expressed purpose of providing building Owners specific Owner Representation and Construction Management for the successful development and completion of projects in the construction community throughout the western US. Mr. Bratton's past experience includes a combination of General Contracting, Construction Management and Project Management, with experience in the health care, commercial, retail, industrial and institutional sectors of the building industry over the past 40+ years. Notable projects include commercial headquarters, large stand-alone health care MOBs, and developments, green field hospitals and hotels, retail malls and centers, multifamily new and renovation developments. The majority of Mr. Bratton's project management has been for Design Build and Construction Management at Risk project delivery methods over the past twenty years. Mr. Bratton completed the June 2016 GC/CM workshop conducted by the AGC Education Foundation and has provided this expertise in managing the selection of the GC/CM firm, directorial of the integrated design process and supervising the construction for recently completed healthcare facilities utilizing the GC/CM alternative delivery under the guidelines of RCW 39.10.

PJ Bauser AIA LEED AP, Mahlum Architects

Principal

PJ is one of Mahlum's healthcare leaders, and brings a deep knowledge of healthcare design principles and a passion for affecting population health through thoughtful design of the built environment. His organizational leadership, facilitation skills and deep understanding of both clinical and construction delivery methods will lead a design team intent on delivering transformational projects to SPMC.

EDUCATION & REGISTRATIONS

PJ holds a Bachelor of Science in Architecture and Master of Architecture from the University of Cincinnati College of Design, Art, Architecture. He is a registered architect in Washington. He is a LEED Accredited Professional.

Justin Chitwood AIA, Mahlum Architects

Project Manager

Justin has 8 years of experience working in healthcare design, including planning, construction documentation, project management, and construction administration. He believes that great projects are the result of great communication and clear goals, and enjoys working closely with his clients, A/E team, and contractors to deliver successful projects.

EDUCATION & REGISTRATIONS

Justin holds a Master of Architecture from the University of Pennsylvania and a Bachelor of Science from the University of Texas at Arlington. He is a registered architect in Washington and California.

Janet Jacobs, AIA, Mahlum Architects

Project Architect

JANET has over 20 years of architectural experience including healthcare, educational, residential, and civic facilities, with planning and programming for educational and medical facilities as a personal focus. She believes in strong documentation and in a team-based approach to create a united common vision.

EDUCATION & REGISTRATIONS

Janet received her Bachelor of Arts in Architecture from University of Washington. She is a registered architect in Washington.

Andy Drissell, AIA LEED AP BD+C, Mahlum Architects

Medical Planner

ANDY brings 12 years of experience across a broad range of medical projects, with particular expertise in design, medical planning and project coordination with all stakeholders, from project initiation through completion. He is passionate about patient-centered design and the unique role architecture plays in creating spaces that promote healing and well-being. Andy has recently been involved with the new Dialysis Clinics for Northwest Kidney Centers and the Klickitat Valley Health Hospital Addition.

EDUCATION & REGISTRATIONS

Andy received his Master of Architecture from the University of Kansas. He is a registered architect in Washington, is EDAC Accredited, and is a LEED Accredited Professional. Andy is currently pursuing WELL Certification.

Jon Bayles JMB Consulting Group LLC [JMBCG]

Cost Estimating

Originally founded in 2009, JMB Consulting Group has provided comprehensive development management, construction management and construction cost planning to owners, architects, government agencies and institutions. Mr. Bayles' experience includes a combination of Mechanical Contracting, General Contracting, Construction Management and Project Management, and Cost Estimating throughout the United States with focused experience in the health care, laboratory and institutional sectors of the building industry over the past 33+ years. His cost planning expertise is applied through various sectors with an emphasis on higher education, healthcare and research facilities. He has worked on projects ranging in scope and size from \$100 thousand to over \$2 billion for private and public sector clients. The majority of Mr. Bayles' experience has been for Alternative Delivery projects including both GC/CM and Design-Build.

- Provide the ***experience and role on previous GC/CM projects delivered*** under RCW 39.10 or equivalent experience for each staff member or consultant in key positions on the proposed project. (See *Example Staff/Contractor Project Experience and Role*. The applicant shall use the abbreviations as identified in the example in the attachment.)

Firm: Dick Bratton Project Management – Owner Rep/PM					Role During Project Phases		
Name	Summary of Experience	Project Names	Project Size	Type	Planning	Design	Construct
1.Dick Bratton	Owner of Dick Bratton Project Management LLC specializing in GC/CM Healthcare Projects	Summit Pacific Medical Center Wellness Center Elma, WA	\$30M	GC/CM RCW 39.10	PM PIC	PM PIC	PM PIC
		Lake Chelan Hospital Chelan, WA	\$45M	GC/CM RCW 39.10	PM PIC	PM PIC	PM PIC
		Klickitat Valley Health Goldendale, WA	\$19M	GC/CM RCW 39.10	PM Lead	PM Lead	Pending
		Skyline Hospital, White Salmon, WA	\$5M	GC/CM RCW 39.10	PM PIC	PM PIC	PM PIC
		Samaritan Hospital, Moses Lake, WA	\$130M	GC/CM RCW 39.10	PM	PM Advisory	
		St Joseph's Hospital, CA	\$45M	GC/CM	PM PIC	PM PIC	PM PIC
		Summit Pacific Medical Center Hospital, Elma, WA	\$20M	DBB	PM	PM	PM
		DOE Headquarters, Lacey	\$40M	D/B	CM	CM	CM
		Lincoln Square, Bellevue	\$400M	GC/CM	PIC	PIC	PIC

Firm: Mahlum Architects – Architect of Record					Role During Project Phases		
Name	Summary of Experience	Project Names	Project Size	Type	Planning	Design	Construct
1.PJ Bauser	Principal	NKC Bellevue Clinic Bellevue, WA	\$5.1M	GC/CM	PM, Principal	PM, Principal	PM, Principal
		NKC Rainier Beach Clinic Seattle, WA	\$7.2M	GC/CM	PM	PM	PM
		NKC Port Angeles Clinic Port Angeles, WA	\$6.1M	D/B	PM, Principal	PM, Principal	PM, Principal
		NKC Panther Lake Clinic Kent, WA	\$6.8M	D/B	PM	PM	PM
		Harborview PACU Expansion University of Washington Medical Center, Seattle, WA	\$380k		PM	PM	PM
		7SE Oncology Unit Renovation University of Washington Medical Center, Seattle, WA	\$1.2M	DBB	PM	PM	PM
		6NN Transfusion Lab University of Washington Medical Center, Seattle, WA	\$1.9M		A/PM	A/PM	A/PM
		NKC Burien Campus (Clinic, Admin, Logistics)	\$29M	GC/CM	PM	PM	PM
		Pediatric Emergency Department Sacred Heart Medical Center, Spokane, WA	\$12M		A	A	A
		Asante 2West and 6Tower Remodels	2W: \$7M 6T: \$2M	GC/CM	PM	PM	PM
		Providence Medical Park Spokane Valley Providence Sacred Heart Medical Center	\$29.5M		A	A	A
		Cardiac Intensive Care Unit Renovation & Expansion Providence Sacred Heart Medical Center, Spokane, WA	\$11.1M	GC/CM	A	A	A
		Peace Island Medical Center, Friday Harbor, WA	\$17.6M	GC/CM	A	A	A
		Samaritan, Sweet Home MOB, Sweet Home, OR	\$10.6M	GC/CM	Principal	Principal	Principal
		Klickitat Valley Health Goldendale, WA	\$19M	GC/CM RCW 39.10			

2. Janet Jacobs	Project Architect	Asante Rogue Regional Cancer Center (Heimann Cancer Center) Medford, Oregon	\$43M	D/B	NA	PA	PA
	Project Architect	OHSU Vollum Institute Façade Replacement Portland, Oregon	Projects Varied from \$1M-\$8M	D/B	PA	PA	PA
	Project Architect	OHSU Vollum Institute Deferred Maintenance Portland, Oregon	"	D/B	PA	PA	PA
	Project Architect	OHSU Vollum Institute 4 th Floor Laboratory Portland, Oregon	"	D/B	PA	PA	PA
	Project Architect	OHSU Collaborative Life Sciences Building CLSB 10N Simulation Stations Portland, Oregon	"	D/B	PA	PA	PA
	Project Architect	OHSU Medical Research Building MRB 4 Restorative Dentistry Laboratory Renovation Portland, Oregon	"	D/B	PA	PA	PA
	Project Architect	OHSU Salem Health Hospital Salem Health Pediatric Clinic Salem, Oregon	"	D/B	PA	PA	PA
	Project Architect	Providence St. Vincent Medical Center Renovations Portland, Oregon	"	GC/CM	PA	PA	PA
	Project Architect	Providence Seaside Hospital Hospital Master Plan and Surgery Expansion Seaside, Oregon	"	GC/CM	NA	PA	PA
	Project Architect	Providence Newberg Medical Center Renovations and Additions Newberg, Oregon	"	GC/CM	PA	PA	NA
	Project Architect	Providence Portland Medical Center Sleep Lab/EEG Remodel Portland, Oregon	"	GC/CM	PA	PA	PA
3. Justin Chitwood	Architect, Project Manager	Kaiser Permanente Blood Bank & Clinical Lab. Santa Rosa, CA	\$500K	GC/CM	PA/PM	PA/PM	PM
	Architect, Project Manager	Highland Hospital Cath Lab, Oakland, CA	\$400K	DBB	PA/PM	PM	PM
	Architect, Project Manager	Kaiser Permanente PACU & Imaging Department Renovation	\$2M	GC/CM	PA/PM	PA/PM	PM
	Project Manager	Kaiser Permanente OR AHU Replacements, Santa Clara, CA	\$5M	GC/CM	PA/PM	PM	
	Architect, Project Manager	Kaiser Permanente Sleep Services, Santa Rosa, CA	\$1.5	GC/CM	PA/PM	PA/PM	PM
	Project Manager	UCSF Imaging Department Upgrade, San Francisco, CA	\$1.4M	DBB	PM		
	Architect, Project Manager	Kaiser Permanente Adult Family Medicine Relocation, Santa Rosa, CA	\$900K	GC/CM	PA/PM	PA/PM	PM
	Project Manager	Kaiser Permanente Chronic Conditions Management, Santa Rosa, CA	\$1.5M	GC/CM	PM	PM	PM
	Project Manager	Kaiser Permanente Pharmacy Remodel, Petaluma, CA	\$850k	GC/CM	PM	PM	PM
	Project Manager	VA Palo Alto Cath Labs, Palo Alto, CA	\$12M	DBB			PM
	Architect	VA Mather Medical Specialties, Mather, CA	\$7.2M	DBB		A	A
	Architect	VA Palo Alto Translational, Palo Alto, CA	\$9.3M	DBB	A	A	

2.Andy Drissell	Medical Planner						
	Medical Planner, Project Architect	Klickitat Valley Health Goldendale, WA	\$19M	GC/CM RCW 39.10	Lead MP / Lead PA	Lead MP / Lead PA	
	Medical Planner, Project Architect	NKC Seattle Clinic (Flagship) Seattle, WA	\$36.7M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	
	Medical Planner, Project Architect	NKC Everett Clinic Everett, WA	\$2.6M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	Lead MP / Lead PA
	Medical Planner, Project Architect	NKC Bellevue Clinic Bellevue, WA	\$5.1M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	Lead MP / Lead PA
	Medical Planner, Project Architect	NKC Rainier Beach Clinic Seattle, WA	\$7.2M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	Lead MP / Lead PA
	Medical Planner, Project Architect	NKC Port Angeles Clinic Port Angeles, WA	\$6.1M	D/B	Lead MP / Lead PA	Lead MP / Lead PA	
	Medical Planner, Project Architect	NKC Panther Lake Clinic Kent, WA	\$6.8M	D/B	Lead MP / Lead PA	Lead MP / Lead PA	
	Medical Planner, Project Architect	NKC Burien Campus (Clinic, Admin, Logistics)	\$29M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	
	Architect	OHSU 7C Medical Surgery Remodel	\$4.2M	IPD		A	
	Architect	OHSU Emma Jones Hall Family Medicine Renovation	\$200k	IPD	A	A	
	Architect	Asante Heimann Cancer Center	\$42.6M	D/B	A	A	
	Architect	Asante TRCH Cancer Center Linear Accelerator Renovation	\$1.2M	GC/CM		A	
	Architect	Asante 3 East Behavioral Health Unit Renovation	\$6.1M	GC/CM		A	
	Architect	Asante 2West and 6Tower Remodels	2W: \$7M 6T: \$2M	GC/CM		A	
	Architect	Kaiser Rockwood Mental Health Clinic	\$1M	GC/CM	A	A	
	Architect	Kaiser Amberglen Headquarters Remodel	\$3.4M	GC/CM	A	A	
	Project Architect	Telluride New Medical Center	\$24M	DBB	Lead PA	Lead PA	
	Architect	Centre Hospitalier de l'Université de Montréal	\$1.5B	IPD, P3		A	A

Firm: JMB Consulting Group LLC – Cost Estimator					Role During Project Phases		
Name	Summary of Experience	Project Names	Project Size	Type	Planning	Design	Construct
1.Jon Bayles	Principal	Klickitat Valley Health Goldendale, WA	\$19M	GC/CM RCW 39.10	Cost Estimator	Pending	N/A
		Samaritan Hospital, Moses Lake, WA	\$130M	GC/CM RCW 39.10	Cost Estimator	Cost Estimator	N/A
		University of Washington Medical Center Kitchen Renovation & Expansion Seattle, WA	\$60M	Design-Build	Cost Estimator	Pending	N/A
		Bozeman Health Cancer and Pediatric Center Bozeman, MT	\$190M	CMAR	Cost Estimator	Pending	N/A
		Samaritan Health Patton Clinic Moses Lake, WA	\$3M	Design-Bid-Build	N/A	Cost Estimator	N/A
		SEARHC Mt Edgecumbe Medical Center Campus Sitka, AK	\$400M	GC/CM	N/A	Cost Estimator	Cost Estimator

- The qualifications of the existing or planned project manager and consultants.
Dick Bratton Project Management [DBPM] was founded 20 years ago primarily to provide Owner Rep/PM/CM services for the healthcare industry. Many projects under the management of DBPM have successfully been completed using the Alternative Contracting GC/CM methodology including projects for: Summit Pacific Medical Center, Lake Chelan Health, Samaritan Hospital, Skyline Hospital, Klickitat Valley Health, St. Joseph’s Hospital, PICC. DBPM will direct the solicitation and selection of the GC/CM firm for the project and continue overall

project management involvement from the outset of design through construction completion as primary Owner Rep/PM responsibility within the integrated team profile. DBPM will lead the development and negotiations of the GC/CM precon agreement as well as providing key oversight on the terms and conditions and MACC for the GC/CM AIA A133 contract. Frequent weekly OAC meetings and on-site reviews of construction will enhance the project team with QA/QC management as well as approvals of each monthly pay application issued by the GC/CM.

- If the project manager is interim until your organization has employed staff or hired a consultant as the project manager, indicate whether sufficient funds are available for this purpose and how long it is anticipated the interim project manager will serve. **NA**
- A brief summary of the construction experience of your organization's project management team that is relevant to the project.

Dick Bratton [DBPM] as Owner Rep/PM for the project represented SPMC in the same capacity for managing the successful design and GC/CM selection and subsequent construction within the schedule and budget for the Wellness Center project completed in 2018 on the SPMC campus. Relevant to the SPMC Expansion Project is DBPM expertise:

- Successful numerous GC/CM projects over the past 20 years
 - A focus on healthcare projects
 - Disciplined project management controls and protocols
 - Recent success in managing the A/E selection, GC/CM selection and subsequent design and construction for several health care building projects in WA utilizing RCW 39.10 protocol.
- A description of the controls your organization will have in place to ensure that the project is adequately managed.
 - The SPMC hospital expansion facility project team comprised of Dick Bratton, Mahlum Architects, and Perkins Coie are all proven experts in developing and implementing project controls and procedures to guide the project to a successful and timely completion. A specific project plan task matrix will be drafted to outline critical project team responsibilities and procedures for budget, schedule and change of work controls.
 - Project budgets, schedules and VE in progress will be established and updated throughout the design phases. Each phase of design will be reviewed for scope and budget and will be approved by SPMC before moving into the next design phase. Contingencies will be comprised of both statute driven contractor contingencies and Owner contingencies to provide budget cushion beyond the MACC allowance provided in the GC/CM contract.
 - Once construction has commenced the work will be documented daily by the project management team and weekly OAC meetings held on site to review and facilitate the progress of the work. The GC/CM will be held accountable to provide Owner approved safety and QA/QC strategic plans as well as project reporting provision for documentation. Schedules will be tracked on a weekly basis and budget updates will be required monthly. On-site inspections conducted by SPMC project management will be documented on a daily basis.
 - The table below provides a perspective of the team roles related to the GC/CM selection and implementation process.

	Task	SPMC Owner	Owner PM	GC/CM	A/E, Legal
Key to Abbreviations: A=Approve L=Lead R=Review S=Support					
1	Application to PRC	A	R		S
2	Draft GC/CM Contract	A	L		S
3	GC/CM RFQ development	A	R		S
4	GC/CM Selection procedures	A	R		S
5	OAC Conduct Site Visit	S	L		S
6	GC/CM Selection Phase 1 RFP/RFQ	S	L		S
7	GC/CM Selection Phase 2 Interviews	S	L		S
8	GC/CM Selection Phase 3 RFFP	S	L		S
9	Final Proposals for FEE/Specified GCs	A	L		S
10	Preconstruction Work Plan/Agreement	A	L	R	S
11	Consultation During Precon	S	L	R	S
12	MEP Selection [if elected and eligible]	A	R	L	S
13	Subcontract Plan	A	R	L	S
14	Subcontractor Buyout	A	R	L	S
15	MACC Negotiations and GC/CM Contract	A	L	R	S
16	SH Approval MACC	A	L	R	S
17	Construction - Completion	A	A	L	S

- A brief description of your planned GC/CM procurement process.
 - SPMC will contract for GC/CM services in accordance with the process outlined by RCW 39.10.210 through 39.10.410. The RFP will be advertised in local publications and will require responses based on a select set of criteria and consistent with RCW 39.10. An informational meeting will be held, and proposals submitted for SPMC review. Notification of most qualified firms will be extended for shortlisting firms to receive the final Request for Proposal, RFFP. Selection of the GC/CM firm will be based on highest total score with scoring tabulated in three phases of GC/CM evaluation: Qualifications Submittal, Interview and Cost Proposal based on fee of cost of construction and cost of General/Special Conditions.
 - The selected firm will be required to enter into a GC/CM agreement based on the AIA 133 GC/CM-Owner Agreement with modified AIA 201 General Conditions.

Verification that your organization has already developed (or provide your plan to develop) specific GC/CM or heavy civil GC/CM contract terms.

- The AIA A133 GC/CM-Owner Agreement, AIA A133 Exhibit A with modified AIA A201 General Conditions have been drafted for use for this project.

7. Public Body (your organization) Construction History:

Provide a matrix summary of your organization's construction activity for the past six years outlining project data in content and format per the attached sample provided:

Project Name	Description	Contracting Method Design Bid Build (DBB)	Planned Start	Planned Finish	Actual Start	Actual Finish	Planned Budget	Actual Budget	Reason for Budget or Schedule overrun

Wellness Center	60,000 SF Clinic and Wellness Center, new café, PT area	GC/CM RCW 39.10	6/2016	12/2018	6/2016	12/2018	\$31M	\$31M	On budget and schedule
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8. Preliminary Concepts, sketches or plans depicting the project

To assist the PRC with understanding your proposed project, please provide a combination of up to six concepts, drawings, sketches, diagrams, or plan/section documents which best depict your project. In electronic submissions these documents must be provided in a PDF or JPEG format for easy distribution. (See *Example concepts, sketches or plans depicting the project.*) At a minimum, please try to include the following:

- A overview site plan (*indicating existing structure and new structures*)
- Plan or section views which show existing vs. renovation plans particularly occupied during construction.

Find sketches last 4 pages of this submittal-DBPM

Note: Applicant may utilize photos to further depict project issues during their presentation to the PRC.

9. Resolution of Audit Findings on Previous Public Works Projects

If your organization had audit findings on **any** project identified in your response to Question 7, please specify the project, briefly state those findings, and describe how your organization resolved them.

None

10. Subcontractor Outreach

Please describe your subcontractor outreach and how the public body will encourage small, women and minority-owned business participation.

The GC/CM will work with SPMC during the preconstruction phase to identify specific MWBE and DBE opportunities to meet goals and requirements. The GC/CM will be requested to develop a subcontracting plan that establishes the MWBE, DBE and apprenticeship utilization goals. NADBE, NAME and WA State Office of Minority and Women’s Business Enterprises [OMWBE] will be contacted for listings of eligible firms. Outreach efforts will continue throughout the bidding process to solicit competitive bidding and strive to meet recommended % goals for M/WBE and DBE participation which will be outlined in the instructions for GC/CM RFQ which would be reasonable and representative of the specific geographic area of Elma and Western WA. SPMC also maintains a small works roster as an information resource during the GC/CM bidding sequence.

Outreach efforts shall include:

- Informational meetings prior to bidding to generate interest among the MWBE, DBE, and all local trade partners
- Issue advanced notice to include bidding timelines and critical dates
- Develop bid packages aligned with the capabilities of local and regional MWBE and DBE firms
- Thoroughly advertise the project and make available access to all documents

11. Alternative Subcontractor Selection

- If your organization anticipates using this method of subcontractor selection and your project is anticipated to be over \$3M, please provide a completed *Supplement A Alternative Subcontractor Selection Application* document, **one per each desired subcontractor/subcontract package**.
- If applicability of this method will be determined after the project has been approved for GC/CM alternative contracting or your project is anticipated to be under \$3M, respond with **N/A** to this question. **NA -TBD**
- If your organization in conjunction with the GC/CM decide to use the alternative subcontractor method in the future and your project is anticipated to be over \$3M, you will then complete the *Supplement B Alternative Subcontractor Selection Application* and submit it to the PRC for consideration at a future meeting.

CAUTION TO APPLICANTS

The definition of the project is at the applicant’s discretion. The entire project, including all components, must meet the criteria to be approved.

SIGNATURE OF AUTHORIZED REPRESENTATIVE

In submitting this application, you, as the authorized representative of your organization, understand that: (1) the PRC may request additional information about your organization, its construction history, and the proposed project; and (2) your organization is required to submit information requested by the PRC. You agree to submit this information in a timely manner and understand that failure to do so may delay action on your application.

If the PRC approves your request to use the GC/CM contracting procedure, you also you also agree to provide additional information if requested. For each GC/CM project, documentation supporting compliance with the limitations on the GC/CM self-performed work will be required. This information may include but is not limited to a construction management and contracting plan, final subcontracting plan and/or a final TCC/MACC summary with subcontract awards, or similar.

I have carefully reviewed the information provided and attest that this is a complete, correct, and true application.

Signature:  _____

Name (please print): Josh Martin _____ (public body personnel)

Title: CEO-SPMC _____

Date: August 19, 2022 _____

8. Preliminary Concepts, sketches or plans depicting the project

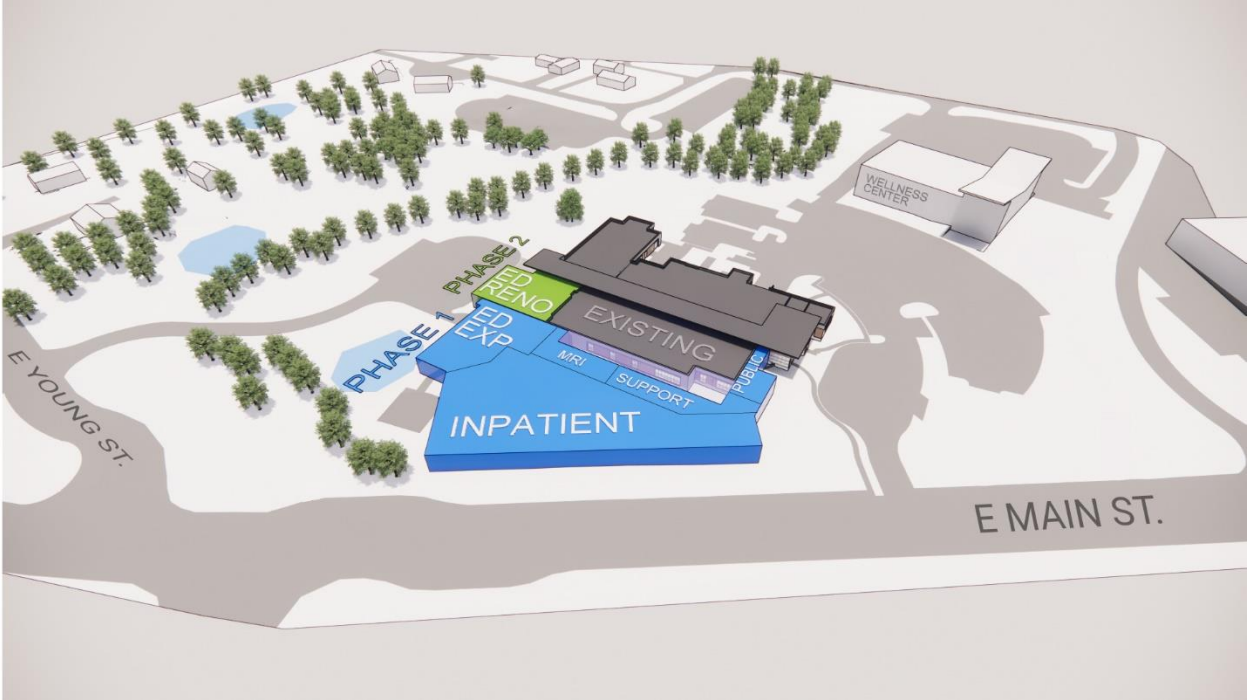
To assist the PRC with understanding your proposed project, please provide a combination of up to six concepts, drawings, sketches, diagrams, or plan/section documents which best depict your project. In electronic submissions these documents must be provided in a PDF or JPEG format for easy distribution.

Please note that the SPMC Expansion Project is in the preliminary programming phase at this writing and about to enter Schematic Design. Simple site plans, floor plan and block diagrams are representative of the campus, expansion scope and depth.

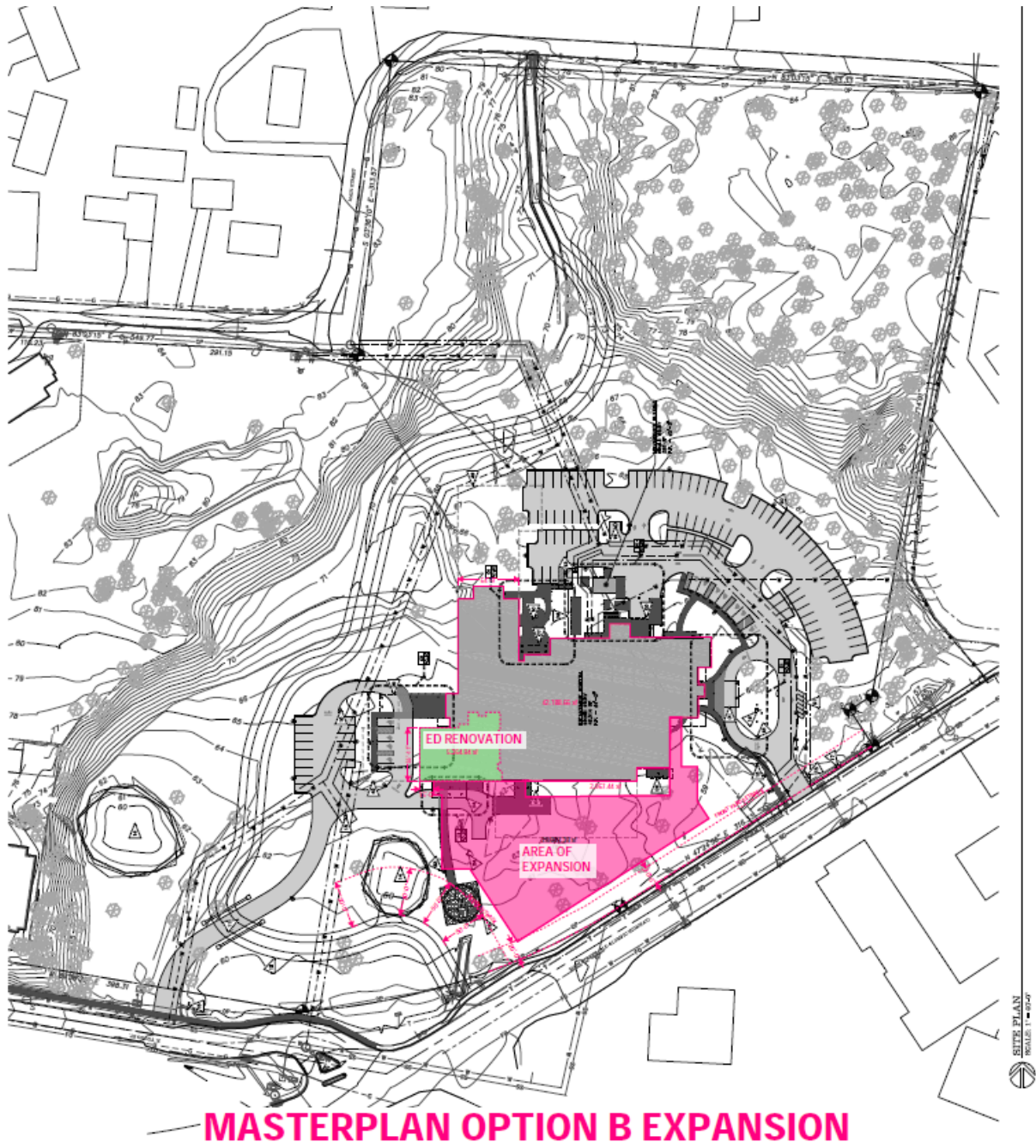
Picture one below is the existing campus located in Elma, WA.



Picture two below shows the expansion scope highlighted in blue fill



Picture three below shows the general footprint of expansion relative to the overall campus



Picture 4 below illustrates the departmental expansions as labeled

