Top 10 Mistakes in Master Facility Planning
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Session Objectives
- Definition of a Successful Master Facility Plan
- Understand the Planning, Design, and Construction Process
- Knowledge of Next Steps To Implement A Master Facility Plan
- List of Frequent Mistakes Made During the Planning Process

What is a Master Facility Plan?
Definition
A road map
For capital investment and building/campus improvements
That meets an organization’s long-term business goals
While addresses current deficiencies and opportunities

Top 10 Mistakes in Master Facility Planning
- Are the right players involved? Committed?
- Does the hospital understand the market changes? Is the strategic plan complete? Adequate detail?
- What is the Facility Vision?
- Were planning objectives established early and enforced throughout?
- Was the assessment comprehensive? Or cursory?
- How will the plan improve operations?
- Has a project budget been established? Dream or reality?
- Does the expansion/renovation provide ROI?
- Was a 20-year plus planning horizon used or just an immediate project?
- What is the “big idea?” What is the concept that holds the plan together?

Planning, Design and Construction Process
- Visioning
- Strategic Planning
  - Workloads
- Facility Planning
  - Master Planning
  - Programming
- Operations Planning
- Business Planning

The Future is Something You Create
Healing Environment –
Internal and External
Facility Vision Statement

Facility Vision Statement
- Is not your Mission Statement.
- It looks towards the future
  - “How do you want your facility perceived?”
  - “Why do patients and families prefer your hospital?”
  - “Why does staff and physicians select your hospital?”
- Should be memorable, challenging and inspirational.
- Which results in:
  A clear direction that creates an ideal physical environment.
Guiding Principles
- List the top 4-7 guidelines that should be followed in design solutions
- Unifies management team’s priorities
- Creates matrix for assessing the value of proposed solutions
- Objective tool for evaluating emotional planning issues
- Financially Viable (8)
- Market Driven/ Dynamic/ Visionary (7)
- Customer Focused (7)
- State of the Art (7)
- Efficient Design (5)
- Functional Locations (4)
- Flexible and Expandable (4)
- Aesthetically Pleasing/Healing (3)

**Vision of the Future**
- The board, C Suite or community identify a need to plan for future growth, change in the services or simply a facility face lift
- The need for a 5 to 10 year strategic plan is identified as the first step in shaping the future

**Strategic Planning**
- Identify the key personnel to participate in the planning session
- Collect Data
- Changes in the industry
- Demographics which reflect growth, aging population
- Future reimbursements from insurance and Medicare where is it going?
- New programs, expand current programs or delete services not adding value.

**Objectives**
- Discuss the move from vision to realistic implementation of a women’s health service line
- Explain the strategic plan process and the necessity to integrate the steps to ensure optional decision making
- Discuss methods to ensure implementation
- Discuss the impact of a well designed women’s health facility on

Moving From VISION To REALITY Requires A STRATEGY that Works!

Is it a
vision
or a
hallucination?

Vision:

**Strategy Is…**
- Global thinking about what the organization should be in the future
- A sense of direction
- A plan to move the organization forward to the future

Behind every successful business there is a strategy that works!

Evolution of Strategy
- There’s a new manifesto for management. We need to move beyond planning.

**Types of Strategy**
- Directional – mission, vision
- Adaptive – expand/contrast
- Market entry
- Competitive strategy

Strategies create value for the organization

**Heart and Soul of Strategy**
- Who should you target as customers?
- What products or services should you offer targeted customers?
- How can you create the best value for your customers most efficiently?

Strategic thinking requires continual surveillance, creative innovation, and rapid transformation.
The strategic thinking process has to start with organization Leaders!

**Steps to Strategic Planning**

- **Situational Analysis**
  
  Situation Analysis Wheel
  
  SITUATIONAL ANALYSIS
  
  Assess the Gap

<table>
<thead>
<tr>
<th>Current Reality</th>
<th>Future Reality</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How Wide is the Gap?</strong></td>
<td></td>
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**EXTERNAL ENVIRONMENT**

Market/Competitive Analysis

- Who are your customers?
- What is the size of your market?
- What is the growth potential of your market?
- Can you satisfy your market demand?

**Customer Behavior**

- Preferencing behavior
- Attitude towards competitors
- Biggest unmet healthcare need
- Socio-economic status
- Level of education
- Continual surveillance
- Creative innovation
- Rapid transformation of the organization in anticipation of market changes, not in response to market changes!

**START THINKING...**

- What are the core business units or major revenue drivers for the organization?
- What needs to be done to support the top business units to ensure dominance in the market?
- What can we do to ensure that our organization is indispensable and recognized as the preferred provider in the market?
- Does the organization employ the top performers who provide the best possible patient care?
- What is needed to support professional practice in the organization and ensure cutting-edge clinical care?
- Do patients and their families have the best possible experience while in our care? What does the organization need to ensure an environment that is life and health enhancing?
- What needs to be done to maximize the financial integrity of the organization?

**START THINKING...**

What the organization does today to enhance its uniqueness in the marketplace is likely to be outdone tomorrow by its competitor.

**START THINKING...**

- Build financial performance, drive revenue, and improve margins
- Enhance the capabilities of the centers of excellence
- Improve organization performance and efficiency
- Create an optimal work environment for professional staff
- Ensure the best patient experience
- Improve the infrastructure and support programs
- Enhance the image of the hospital as a life-enhancing environment

Consumer Expectations
- Women shop around for the best fit for their needs.
- Women are the primary healthcare decision makers for their families.
- Competition for patients - consumers have choices.
- Patient outcomes - the new bottom line.
- Consumers are more knowledgeable about available options.
- Patients and families are demanding more control over the decisions that directly affect their lives.
- Patients are better educated & sophisticated.
- The built environment makes a difference!

**What Do Women Want?**

**How Do Women Choose?**

Insurance does influence choice,
but given a choice, women…

- Do comparative shopping
- Listen to the experiences and advise of family and friends
- Listen to their doctors

**What Do Women Want?**

A total EXPERIENCE

Women Want and Seek Out &
Entire Continuum of Care

Searching for the “Best of the Best”
Best “Hunting Grounds”

- Conferences
- Literature
- Internet
  - www.cdc.gov
  - www.healthstreet.com
- Professional Organizations
  - Web-site press releases
- Disease-specific associations

**INTERNAL ENVIRONMENT ASSESSMENT**

S
W
O
T

You should implement strategies that will:

| Strategy Formulation |
| Strategy Formulation |
| Strategy Formulation |
| Strategy Formulation |
| Strategy Formulation |
| Strategic Implementation |
| Project Schedule |
| Strategic Implementation |
| of a Customer Focused Vision |
| From Vision to Reality |

**BALANCED SCORECARD**

- The Balanced Scorecard (BSC) is designed to assist organizations to better serve their customers by developing key goals and measures that will enhance services delivered.
- The Scorecard links the mission, vision, and values with key organizational initiatives and strategies. This included developing the action plans necessary to carry out the strategies and tactics.
- The BSC align ALL PARTS OF THE ORGANIZATION to focus on how they help make this a reality.
- This process gives the organization a way to look at itself in a a “balanced” way to assess how well it is performing in clinical, administrative, and financial areas.

**CRITICAL GOALS for SHC**
- Commit absolutely to quality clinical care and service
- Achieve financial health to fulfill our mission and invest in the future
- Assure excellent Board, physician, volunteer, staff, and administration relationships to foster collaborative partnerships
- Develop, train, and recruit the best talent to become the Valley’s healthcare employer of choice

**Systems Scorecard**

**Strategy:** Enhance intra and inter-departmental efficiencies and effectiveness to improve patient satisfaction

**Tactic:** Develop a system-wide emergency care patient service strategy to relieve ED of overcrowding

**Measures:**
- Patient satisfaction with wait times
- Employee satisfaction with intradepartmental collaboration
- Discharges between noon and 6pm

**Making it Stick**

Chart to follow

The Next Generation of Women’s Health Design
The Debate is Over…

LDR

LDR + P

The New Ideal Is…
The best patient experience – The best staff experience

The Best or Optimal
Patient Experience

Patient Directed  Family Centered

Choice
Control
Collaboration
Competency

The Best or Optimal Staff Experience
“The hospital is the professional workspace”
An Attractive Setting
Attracts & Retains Staff

- Excellent view of patient
- Convenient access to equipment and supplies
- In room or near room charting
- Adequate sized nursing station
- Close proximity to pharmaceuticals
- Space for family
- Operational efficiency
- A place to relax – break room

**Health Enhancing Designs**

- The environment does make a difference is feelings of well-being, recovery times, medication rates, and socialization
- Attributes of a healing environment
  - Light
    - Natural
    - Patient controlled
  - Color
  - Aromas
  - Nature (flowers, plants, trees, gardens, paths)
    - Real or in artwork
  - Aesthetic appeal
    - a “woman’s touch”
    - culturally appropriate
  - Pleasant sounds
  - Privacy
  - Choice and control
The Vision for Scottsdale Healthcare

Women’s Services

- System-based, patient-focused women’s services in an integrated, comprehensive, caring and cost competitive manner
- Services will be delivered in a wellness and holistic approach based on a lifestyle continuum
- Service will emphasize improving health status through education and prevention
- Services provided will be with uniform excellence in quality and customer service
- Design will be innovative, convenient, respectful, and empowering to women
- Design will reflect a holistic definition that encompasses the physical, spiritual, emotional, economic and psychosocial aspects of health

Clinical Outcome Variables

From VISION to REALITY
The Women’s Service Line
Development Process

- Facility design process and implementation
  - The built environment must enhance strategy
  - The design process must foster authorship and ownership

Supporting Statistics for the new Women’s Hospital

- Focus groups supported a continuum of care that women desired for all life stages
  - Address women’s needs - “Womb to Tomb”
  - Prevention, education and wellness-based
- Market research demonstrated that the market discriminates about care quality
- Market projections - 3500 annual births by 2001
- Community wanted to be involved

The Vision – Scottsdale Healthcare Women’s Center
Volume & Room Projections

Option 1 – Adler Building Consolidation
- Only uses space made available by New Cardiology Building
Option 1 – Adler Consolidation

PROS
- 7 Witt becomes available for Med/Surg
- Minimal disruption
- Least cost

Option 7 – Freestanding Building
- +/- 160,000 BGSF

PROS
- Stand-alone consolidation of Women’s services
- No disruption to existing facilities
- Ideal functional layout
- New identity
- Provides for additional beds in Witt, Barnard, and Adler

Cost/Summary Comparison
Facility Amenities – First Floor Health and Wellness Center

- Lobby
- Conference Center
- Women’s Resource Center
- Breast Health/Diagnostics
- Women’s Shop
- Child Care Center
- Family Support Center
- Wellness Center
- Café
- Spa

Women’s Shop
- Retail - convenience items
- Breastfeeding supplies
- Maternity & breastfeeding clothes
- Infant supplies, clothes and developmental toys

Child Care Center
- Reinforces emotional support of family needs

Breast Health Diagnostic Center
- Breast health diagnostics including screening and diagnostic mammograms, ultrasound, and stereotactic diagnostics
- Urinary incontinence program
- Osteoporosis screening, diagnostics, and education

Conference Center
- Parking access
- Separate entrance
- Food Support
- Rooms can be opened for large conference or educational area
- Storage area is critical
  - tables, chairs, mats,
  - balls
  - educational materials
  - and video

Women’s Resource Center
- Medical literature for women and facility
- Educational video room for children
- Internet access

Wellness Spa
Therapeutic Services that support Women’s health
program for stress reduction & fitness orientation
- Massage therapy
- Steam room
- Sauna
- Shower/change area
- Meditation rooms

Café
- Promote choices for healthy eating and body awareness

Neighborhoods of Care
Optimal LDRP Room Layout
- Provide designated space for patient/family
- Enhanced privacy - positioning of bed
- Zone room for model of care of room
  - Caregiver zone (Nurse & Dr.)
  - Family zone
  - Patient zone
  - Infant resuscitation zone
  - Toilet/personal care zone - large and flexible
- Amenities reflecting strategic goals
  - microwave/refrigerator
  - business center

Scottsdale Women’s Center – Patient Room
C-Section Area
NICU

- Address security
- Decrease environmental “noise”
- Provide privacy
- Design in Clusters or Pods
- Provide diversity in lighting
- Create stress reducing environment and break-out areas
- Provide conference/education space

Scottsdale NICU Clusters
They Built It…Did They Come?
Scottsdale Memorial Shea Women’s Center – Outcomes

- Annual volume of deliveries  28%
- Market share  33%
- Staff satisfaction
- Staff retention - turnover  11.2%
- Patient satisfaction
- Physician satisfaction

MASTER PLAN

Assessment of Current Facility
- 3,000 foot view of Central Utility Plant, Parking, offsite utility capacity
- Which buildings do we want to and need to keep
- Demo of existing facilities
- Green field location versus renovate in place
- Neighborhood acceptance of expansion or renovation

Parking Deck Option - Before
Parking Deck Option

Assessment of current facility
- 3,000 foot view of Central Utility Plant, Parking, offsite utility capacity
- Which buildings do we want to and need to keep
- Demo of existing facilities
- Green field location versus renovate in place
- Neighborhood acceptance of expansion or renovation

Aerial Rendering
West Side Story | Existing Condition

West Side Story | Temporary Shoring Wall
West Side Story | Drill Rig Access Road
West Side Story | Selective Demolition
West Side Story | Remove Pedestrian Bridge
West Side Story | Soldier Piles
West Side Story | Lagging to First Whaler
West Side Story | Crunch Plant to First Whaler Elevation
West Side Story | Lagging to Second Whaler
West Side Story | Retaining Wall in Place

Decision Matrix

Assessment of current facility
- 3,000 foot view of Central Utility Plant, Parking, offsite utility capacity
- Which buildings do we want to and need to keep
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Planning, Design and Construction Process
- Visioning
- Strategic Planning
- Workloads
- Facility Planning
  - Master Planning
  - Programming
- Operations Planning
- Business Planning

**Typical Master Facility Planning Process**

**Planning Questionnaire - Topics**

- Services
- Trends
- Market
- Utilization
- Staffing
- Location
- Operations
- Layout/ Circulation
- Supply
- Space
- Facility
- Major Equipment

**Site Analysis**

- Access to Campus
  - External Signage
  - Site Signage
- Campus Road System
- Entrances
  - Main
  - Emergency
    - Walk-in
    - Ambulances
  - Service
  - ADA
- Helipad
- Expansion Surrounding Area
- Landscaping
- Image

- Parking
  - Patients
  - Visitors
  - Physicians
  - Emergency
    - Patients/Family
    - Ambulance
- Staff
- Vendors

**Parking Lot Survey**

**Functional Zoning Analysis**

- Administrative Services
- Diagnostic and Therapeutic Services
  - Outpatient
  - Inpatient
- Inpatient Services
- Support Services
- Physician Offices
- Ancillary services
- Critical Care Adjacencies
- Emergency Department Adjacencies

**Internal Circulation Analysis**
- Simple Corridor System
- Separation of Dissimilar Traffic
  - Visitor
  - Inpatient
  - Service
- Elevators
- Pneumatic Tube System
- Automation

Inpatient Accommodation Analysis
Department Evaluations
Criteria and Scoring

- Space
  - Patient Care (x6)
  - Support (x4)
  - Physical Condition (x2)
- Function
  - Location (x3)
  - Design and Operations (x5)
  - Equipment (x1)
- Scale
  - Unacceptable
  - Marginal
  - Adequate
  - Good
  - Exceptional

Space Analysis

- Measured Existing DGSF
- Compared To Benchmarks
  - Based on unit measurement
    - Beds
    - Procedures
    - Stations
    - Staff
  - Created a Hospital standard benchmark
- Estimated Proposed Square Footage
  - Current Volumes
  - Future Volumes

Political Support of a Master Plan

- Board
- Municipality
- Internal Department Heads and Physicians

Is Everyone on the Bus?
A Road Map for Change
A Road Map for Change

New Master Plan Program from Strategic Plan

- Does it make good business sense “run a Proforma”
- “Put a number to it”, Estimate the cost of construction including all the pieces
  - Phasing
  - Logistics
  - Parking
  - Infection Control
- Establish a Total Project Budget
  - Professional Services
  - FF and E
  - Land Cost
  - Finance Cost

Site Orientation · Parking
Site Preparation
New Southwest Parking Lot Complete

New Garage Construction Underway
Phase I - Dietary Cardiology Underway
Phase I - Dietary Cardiology Underway
Dietary Cardiology Infill Underway
Tower Excavation Underway
Wayfinding Issues
Early Emergency Department Occupation
Project Complete

New Doctors’ Parking Lot

New Master Plan Program from Strategic Plan

- Establish a Total Project Budget
  - Professional Services
  - FF and E
  - Land Cost
  - Finance Cost

Budget Control

- Nail the Total Project Budget on Day One
- Managing Scope Change
- Exceptional Communication

Budget Control | Delivering the Goods

- Early Understanding Team Goals
- Team Organization and Defining Roles and Responsibilities
- Thorough Total Project Budget
- Contingencies
- Managing the Sawtooth Effect
- Early Value Analysis

Budget Control | Managing the Sawtooth Effect

- Accurate 1st Budget
- User Group Control
- Churn/Scope Creep
- Expectations “Change”

- Tips During SD/DD/CD Stages
  - Revisit the Program/Cost Objectives
  - Involve User/Leader Groups
  - Agree, Modify, then Sign Off
  - Obtain Buy-In and Reinforce Team Commitment
  - Benefits of Commitment - “It’s Our Project!”

- Lessons Learned
- Visualization & 3D Mock-Ups

- Actual Mock-Ups
- Ideas/Concepts at CD/Bid Phase
- “Wish List” Alternatives
- Keep it Simple
  - Casework
  - Flooring
  - Finishes
  - Schedule (Compression)
- Take Advantage of Market
- Fixed Unit Prices, Mark-Ups, Extra Work Costs at Bid Time

Budget Control | Total Project Budget

- Agree to Share the Information
- Kickoff Meeting
- Forge the TPB Format
- Tools of the Trade
Budget Control | Total Project Budget

- Analysis Best Value Issues
- Database Checks
- Keep an Eye on the Proforma
- Reduce Surprises
- Reclassify: Needs, Wants, Nice-To-Have

Total Project Budget

Construction Costs
- Building Construction
- Site Construction
- Renovation
- Demolition
- CM/GC Fees and Expenses
Subtotal
- Construction Contingency
Total

Additional Costs
- AE Fees
- Testing
- Land Acquisition
- Medical Equipment
- Furniture
- Artwork
- Signage
- IT Systems
- Communication Systems
Subtotal
- Owner’s Contingency
Grand Total

Assemble the Team

Internal
- Administrative Key Leaders (Point Person)
- Process Owner Process
- Service Line Key Persons
- Advisory Committee Members
- Facility/Construction Manager

Navigating the Road Blocks

- Culture change
- Leadership strength
- Unit design
- Patient care model
- Staffing model
- Operational flow
- Physician/Staff cynicism

Concepts and Programming

Programming With User Groups

- Schedule Departmental Meetings
- Define Perimeters and Objectives
- Identify Space Requirements and Department Workflow
- Operations Dictate Designs

Programming Considerations

- Technology Advancements
- Medicine
- Care Delivery
- New Diseases
- Treatment Delivery
- Equipment
- Sustainable Design
- Regulatory Requirements
Planning, Design and Construction Process

- Visioning
- Strategic Planning
  - Workloads
- Facility Planning
  - Master Planning
  - Programming
- Operations Planning
- Business Planning

Brainstorming Session with Leadership

- Discuss Past Experiences and Previous Employers
- Planning Opportunities
- New/Expanded Services
- Expansion Opportunities
- Issues/Deficiencies
- Preconceived Solutions
- Top Three Priorities

Planning Priorities

Summary of Individual’s Master Plan Priority Ratings

Facility Master Plan Concepts

- Wayfinding Concepts
  - Arcade and Concourse
  - Courtyards and Atriums
- Organization Concepts
  - Functional Zoning
  - Public to Private
  - Disney
- Expansion and Flexibility Concepts
  - Demolition
  - Vertical
  - Horizontal
  - Soft Space
- Patient Care Concepts
  - Concierge
  - Family Centered Care
  - Acuity Adaptable

Master Plan Concepts

Programming

- Room Name
- Quantity
- Size
- Function
- Major Furnishings and Equipment
- Adjacencies

Functional Relationships
Schematic Design, Design Development, and Construction Documents

Planning, Design and Construction Process

- Strategic Planning
  - Workloads and Volume
- Facility Planning
  - Master Planning
  - Programming
- Operations Planning
- Business Planning

Construction Documents
Program, Schematic and Design Development Process

- Signoffs by stakeholders
- Mockups to communicate the design concepts
- Logistics & Phasing
- Infection Control (ICRA Directly Linked to Phasing)

Existing Conditions
Relocated MRI
Detailed Look at Radiology

- 7/31/06 C.O.N. Deadline
  - Fast-Track Design
  - Operate MRI in Permanent Location
- Temporary MRI Trailer
  - Electrical Services
  - Patient/Staff Access
  - Close to existing Radiology
- Access to ER
  - Patients/Visitors
  - Ambulance drop-off

Current Ambulance Entrance

Temporary Ambulance Entrance
Temporary ER Entrance
New Parking Structure
Program, Schematic and Design Development Process

- Signoffs by stakeholders
- Mockups to communicate the design concepts
- Logistics & Phasing
- Infection Control (ICRA Directly Linked to Phasing)

Town Hall Meetings
Communication/Ongoing Communication of Project

Construction Procurement

- Local participation
- Hospital focused understanding during the process

Subcontractor Initiative
- Maximizing Local Participation (MLP)
  MLP Program
Subcontractor Initiative

Planning, Design and Construction Process

- Strategic Planning
  - Workloads and Volume
- Facility Planning
The Construction Process

- Infection Control Plan, ICRA Implementation
- Communication of what is happening before it happens
- Parking and Traffic Flow
- Training of the tradesman as to what it means to be on campus
- Employee scheduled walk-thrus
- Controlling costs by minimizing changes
- Keep key decision makers involved

Construction Related
Infection Control

Thomas A. Lind, P.E.
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Infection Control

Infection Control
- Separation of the ICRA 2 Distinct IC Areas
  - Clinical IC & Construction-related IC
- Subcontractor Training
  - Management
    - IC is critical to us
    - Big picture “This is how it will work”
  - On-site everyday for trades “What is an ICRA” and “What does that mean to me?”

Infection Control | Implementation
The Construction Process

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- Controlling costs by minimizing changes
- Keep key decision makers involved
- Avoid Disruption to Operations -Kick Off

Moves Matrix
The Construction Process

- Infection Control Plan, ICRA Implementation
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Site Orientation · Parking
Wayfinding Issues
The Construction Process

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**Change Management**

- Proven Systems to Manage Change
- Timely Decisions
- Communication

**Handling Changes**

**Change Management | Delivering the Goods**

- Mock-Ups
- Planning for Change
- Classifications
- Project Management Systems
- Contractual Controls

**Change Management | Mock-Ups**

- Patient/Caregiver Workflow
- OR/ER/Treatment & Patient Rooms
- Medical Equipment Locations
- Vendor Input and Samples
- Walk Thru’s - /Sign Offs
- Again - Commitment & Teamwork

**Change Management | Mock-Ups**

**Change Management | Define ICRA Requirements**

- Identify on the Drawings
- Budget for Costs (ie Sticky Mats, HEPA Fans)
- Incorporate into Bidding Documents to Get Competitive Subcontractor Numbers
- Implement Properly

**The Construction Process**

- Infection Control Plan, ICRA Implementation
- Communication of what is happening before it happens
- Parking and Traffic Flow
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- Keep key decision makers involved

**Communication | Means & Frequency**

- Monthly Meetings with Leadership
- Monthly Report

- Monthly Meetings with Leadership
  - Schedule + Milestones
  - General Progress
  - Critical Issues
  - Safety
  - Cash Flow
  - Budget and Procurement
  - Pictures + Others

**Custom Communications**

**Commissioning and Training**

- In-house Expertise
- Standard Program (based on ASHRAE)
  - Master Planning Starts w/ Design - Day One
  - Build to Test
  - Fully Documented
Preconstruction Commissioning Activities

- Plan Start-Up of Systems and Sub-Systems
  - Coordinate Integrated Systems
  - Hardware
  - Software
- Isolation Valves
- Bypass Valves
- Control Sequences
- Plan Test & Balance
- Work with Facilities Dynamics Engineering

Construction Commissioning Activities

- Verify Submittals Meet Design Intent
- Receive and Inspect Materials
- Verify Equipment is Ready to Start-Up
- Verify Control Sequence & Operation

Commissioning & Start-Up

- Safety Plan in Place (Lock-Out, Tag-Out, Confined Space, Emergency Response)

The Move to Our Home

Structured Operations/Planning Process

Key Dimensions of Occupancy Planning

TASK FORCE

Operations Design and Implementation

Information Technology and Telecommunications

Department-Move Planning

Patient-Move Planning

Education and Training

Marketing & Public Relations

Is Everyone on the Bus?