

DGS-30-456

(Rev. 10/18)

**Construction Management at Risk
Procurement Review Submittal Form**

General Project Information

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|--|------------------------------------|--|--|
| Agency Name: | Department of General Services | | |
| Is the agency a covered institution per §2.2-4379? | No | | |
| Project Name: | Central State Hospital Replacement | | |
| Project Number: | 194-194AA-000 | | |

Other Project Information

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|--|------------------------|-----------------|-----------|
| Advising A/E Name: | HDR Architecture, Inc. | License Number: | 411000030 |
| COV Sections: §2.2-4380.B.2, §2.2-4381.C.2 | | | |
| Attach written determination for use of CM at Risk. | | | |
| COV Sections: §2.2-4380.C.2, §2.2-4380.B.1; §2.2-4381.D.2, §2.2-4381.C.1 | | | |
| Is the procurement process proposed a two-step process? | | | Yes |
| COV Sections: §2.2-4380.C.2, §2.2-4380.B.7; §2.2-4381.D.2, §2.2-4381.C.7 | | | |

Agency Reasons for Use of CM at Risk

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| Construction Cost (COV Sections: §2.2-4381.B.1, §2.2-4380.C.3, §2.2-4381.D.3) | Yes |
| Building Use (COV Sections: §2.2-4381.B.1, §2.2-4380.C.3, §2.2-4381.D.3) | Yes |
| Project Timeline (COV Sections: §2.2-4381.B.1, §2.2-4380.C.3, §2.2-4381.D.3) | Yes |
| Need for Project Phasing (COV Sections: §2.2-4380.C.5, §2.2-4381.D.5) | Yes |
| Project Complexity (COV Sections: §2.2-4381.B.1, §2.2-4380.C.4, §2.2-4381.D.4) | Yes |
| Value Eng. and/or Constructability Analysis Concurrent with Design | Yes |
| Need for Quality Control/Vendor Prequalification | Yes |
| Need for Cost/Design Control (COV Sections: §2.2-4380.C.5, §2.2-4381.D.5) | Yes |

Supporting Information for Procurement Method Selection

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|--|-------------------|------------|--------------------|-----------|
| Project Use (i.e. lab, classroom, office, etc.): (COV Sections: §2.2-4380.C.3; §2.2-4381.D.3) | | | | |
| The replacement Central State Hospital will serve as an in-patient behavioral health hospital, serving acute forensic, secure forensic and civilly committed patients. It will also serve as the only maximum security forensic behavioral health hospital in the Commonwealth. The new facility will provide specialized treatment and support services for patients and staff. Program space will include living units, treatment and evaluation, clinical, security, visitation and administrative. | | | | |
| Construction Cost: \$200,000,000 (EST.) (COV Sections: §2.2-4380.C.3; §2.2-4381.D.3) | | | | |
| Project schedule: (COV Sections: §2.2-4380.C.3; §2.2-4381.D.3) | Design Start Date | 8/20/2019 | Design Compl. Date | 3/13/2021 |
| | Const. Start Date | 10/14/2020 | Const. Compl. Date | 3/26/2024 |
| Attach bar chart schedule to illustrate fast tracking or other schedule complexities. (COV Sections: §2.2-4380.C.3, §2.2-4380.C.4; §2.2-4381.D.3, §2.2-4381.D.4) | | | | |
| Additional description to highlight key attributes that affect the project complexity, need for value engineering/constructability analysis, quality control/vendor prequalification, and cost/design control as indicated by "Yes" answers above (see next sheet): | | | | |

Determination: The Office of Construction Management for Special Projects has determined that this project should be procured by the CM at Risk procedure, finding that competitive sealed bidding is not practicable or fiscally advantageous.

Compressed Schedule: The 2018 pre-planning study for the replacement hospital estimated that the required design and construction duration for the program necessary for this facility was seven years. As a result of the requirement of the legislation for this project, in order to be as fiscally responsible as possible, an accelerated schedule for constructing the project was adopted, along with a reduction in the number of civil commitment beds reducing the overall building footprint required. The accelerated schedule and slightly smaller footprint reduced the duration from seven years to five years, on the basis of implementing a CM at Risk method, whereby two early release packages would be issued for construction prior to overall completion of design. The reduced schedule and size fit the project cost within the acceptable realm. While the reduced footprint only decreased the construction timeline by six months, the new design and construction schedule in this method are more efficiently streamlined, reducing design from thirty-three months to nineteen months, and allowing construction to commence five months prior to design completion. The net result of these adjustments is a reduction in overall schedule duration of roughly two years as required, and would not be otherwise possible without implementation of the CM at Risk method.

Building Complexity: The new hospital will have a varied amount of space types and associated support systems. The spaces that will be provided in the new facility include patient living units with integrated nursing stations and security requirements, patient treatment areas, a full clinic with medical and dental evaluation and treatment spaces, administrative offices, and staff development and training facilities. Included in the design and construction of these spaces is the need for separation of program spaces due to the two types of patient populations (maximum security and civil), which do not allow for mixing of the two. The maximum security space will be the only space of its kind in the Commonwealth of Virginia, where it will house a population more akin to a DOC facility, regularly holding individuals charged with and convicted of violent felonies, and who are on occasion, capital defendants. A significant characteristic of this project will be the phased move-in of these maximum security patients prior to completion of the total project. Due to the very detailed pre-planning that will be required during pre-construction in order to facilitate design and cost optimization, as well as current facility operation support for the phased move-in of this highly secure population, the assist of a CM early on will be required to help shape those parameters. Additionally, CM preconstruction services will be needed to address the handling of the many historical resources on the project site. A good understanding early on of the typical impacts to cost and schedule related to historic preservation will be critical to budget and schedule success. The overall structure itself will be built in an area of high historic significance, near an existing grave site, and Civil War memorial. Additionally, the structure placement will require the demolition of a historic building on the campus of Central State Hospital, requiring care in handling these historic resources. Due to the complexities of the project, the use of an experienced CM to facilitate coordination of design and cost with respect to the differing space types, security, and historic preservation requirements will be a much needed asset to successfully completing the project as intended.

Budget Control: The total project cost is projected to be \$315,000,000. Given the high cost, and lengthy duration, it is important to secure a CM early in the design process to assist with real-world estimates and constructability reviews to ensure that the project budget goals are not being exceeded. Value engineering analysis being conducted throughout the design process is critical to budget success, and to also providing the staff and patients the quality of facility intended. Additionally, due to the complexity and size of the project, flexibility in supplier and contractor selection is needed. Vendors can be pre-qualified, which will be necessary for quality, cost and schedule success.

(COV Sections: §2.2-4380.C.4; §2.2-4381.D.4)

Submitted by: Chinh Vu Date: 5/17/2019

Signature: Chinh T. Vu
Title: Director - Office of Construction Management for Special Projects
(Agency Head or Authorized Representative)

For DGS Use Only

Based upon the information provided by the Agency, the use of Construction Management at Risk
19 recommended for this project.

Recommended by:

W. Michael Coppa 5/21/19
W. Michael Coppa, RA
Director, Division of Engineering and Buildings