VII. STANDING COMMITTEES

B. Finance, Audit and Facilities Committee

University of Washington Medical Center Expansion Project - Architect

RECOMMENDED ACTION:

It is the recommendation of the administration and the Finance, Audit and Facilities Committee that the President be delegated authority to award a design contract for the UWMC Expansion project Phase I and II to Anshen+Allen subject to the successful negotiation of an Architectural Agreement.

BACKGROUND:

The University of Washington Medical Center (UWMC) is recognized as one of the top ten Medical Centers in the United States and is a Magnet Hospital for nursing. It is renowned for its programs in solid organ transplantation, cancer treatment, heart care, high-risk pregnancy and neonatal intensive care, rehabilitation, and specialized orthopedic surgery. As a well-respected clinical, training, and research organization, it is committed to serving the community by providing the highest quality care and service available and to cooperate with the faculty of the School of Medical and other schools of the Health Sciences to support education in the health professions as well as research into the causes and treatment of illness and disease.

UWMC began developing the “Comprehensive Facility Planning Study” as a response to growing space deficiencies and ongoing facility obsolescence. The intent of this study was to perform a comprehensive analysis of all services and buildings in an effort to determine how maximum efficiency and utilization might be achieved. UWMC must remain a strong player in the region, with the right mix of patients to provide appropriate teaching experiences for students and to ensure continued accreditation of Medical School residency programs to achieve its educational mission. Continued growth in a systematic and well-executed manner assists UWMC in its mission of assuring long term stability in the delivery of health care to the region and financial stability for the institution.

The 2005 UWMC Comprehensive Facility Planning Study predicts a shortage of 36 beds as well as diagnostic and treatment space between 2005 and 2015 which translates into a need of approximately 260,000 gross square feet by the year 2015. Financial constraints prohibit the full provision of 260,000 additional square feet in one project. The best option given the site and financial constraints would be to build in two phases, with the first phase as described below and the second phase following completion of the first phase.

Phase I is proposed as a four (4) story, plus a penthouse floor, 130,500 gross square foot addition that will built on the existing Columbia Road area directly
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south of the existing Pacific Tower. This addition will address workload needs in
ICU, Imaging, Acute Care and Surgery. It is anticipated that Phase 2 will add an
additional three-level bed tower, 95,500 gross square feet, above the Phase 1.

The Architect will provide planning, programming and test-fit pre-design services
for Phase 1 and Phase 2 of the project’s development. Additionally the Phase 1
construction budget and project development schedule will be defined. The
estimated budget for pre-design services is $1 million. It is anticipated that pre-
design will define a total project with a budget of approximately $85 million,
which includes the $1 million pre-design services cost.

The appointment is subject to the successful outcome of contract negotiations.
Basic services contract negotiations are expected to be complete and the pre-
design effort to begin by July, 2006. Pre-design will be accomplished with a
Professional Services Agreement and design and construction administration for
each phase will be accomplished with an Agreement for Architectural Services
utilizing GC/CM Construction once the scope of the work, project development
schedule and construction budget are established.

In March, 2006, the Capital Projects Office advertised for firms interested in
providing architectural services. Eight firms responded to the Request for
Qualifications for this project and three were interviewed on May 15 by the
Architectural Commission. The three firms interviewed were the Zimmer,
Gunsul, Frasca Partnership; NBBJ; and Anshen +Allen. The Commission
recommended the firm of Anshen+Allen.

Anshen+Allen is among the nation's top five leading design firms dedicated solely
to healthcare facilities, including extensive academic health care design
experience, with over 170 persons combined in its San Francisco and Seattle
offices. The Anshen+Allen team includes one of the nation’s most distinguished
planners for medical imaging facilities, which is a core function of the expansion
project. Although the architect has not worked at the University of Washington,
in 1999 they were one of two finalists interviewed for the UWMC Surgery
Pavilion project. Other academic medical centers designed by Anshen+Allen
include Stanford Hospital and clinics, Stanford University; Doernbecher
Children’s’ Hospital, Oregon Health and Science University; and UCSF Medical
Center Strategic Plan, University of California.

The anticipated budget for this project is $85 million. Funding for pre-design,
design and construction is available from UWMC Patient Revenues.