

Strategically & Effectively Managing Public Dollars on Capital Improvement Projects



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Certified Healthcare Architect



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McGOUGH | INVISION
Construction

McGough | ABOUT OUR FIRM

COMPANY TYPE
Private, family-owned

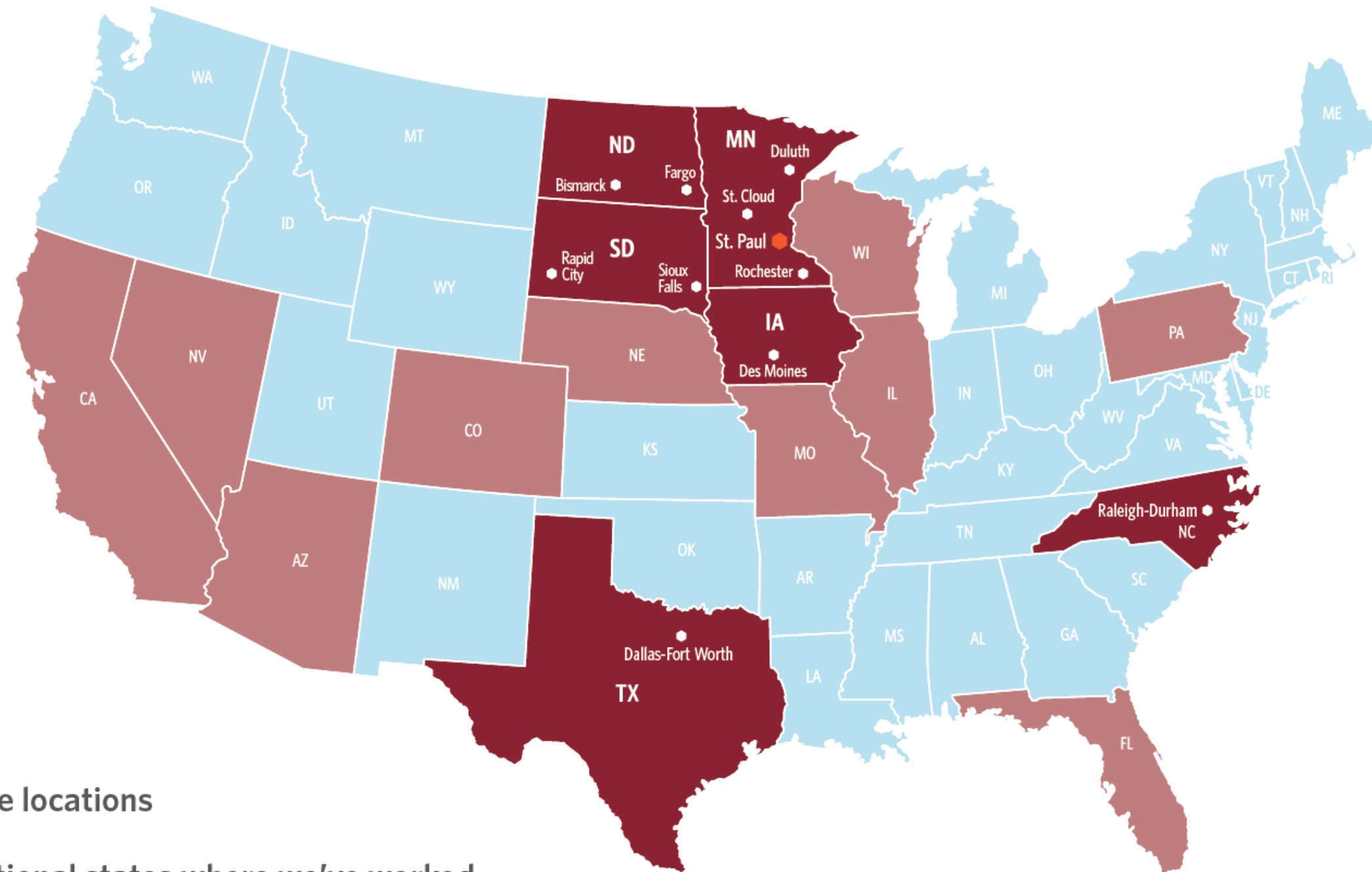
ANNUAL REVENUE
\$1.2B

EMPLOYEES
700+

YEARS IN BUSINESS
68

YEARLY HEALTHCARE REVENUE
\$250MM-\$400MM

STAFF CREDENTIALS
27 Healthcare Construction Certificate (HCC)
9 Certified Healthcare Constructor (CHC)
1 Fellow of the American College of
Healthcare Executives



-  Office locations
-  Additional states where we've worked
-  McGough headquarters

INVISION Architecture

110

*Years in
Business*

100+

*Team
Members*

46%

*Of Iowa's
Hospitals
Work with
INVISION*

70+

*Years of
Healthcare
Experience*

350+

*Healthcare
Projects in
the Past 5
Years*



01

Strategic Planning

02

Facility Assessment

03

Master Planning

04

Funding Sources

05

Next Steps

06

Q&A

AGENDA



01 Strategic Planning

A background image showing several hands raised in a meeting or conference setting, with a focus on a hand in the foreground.

RAISE YOUR HAND

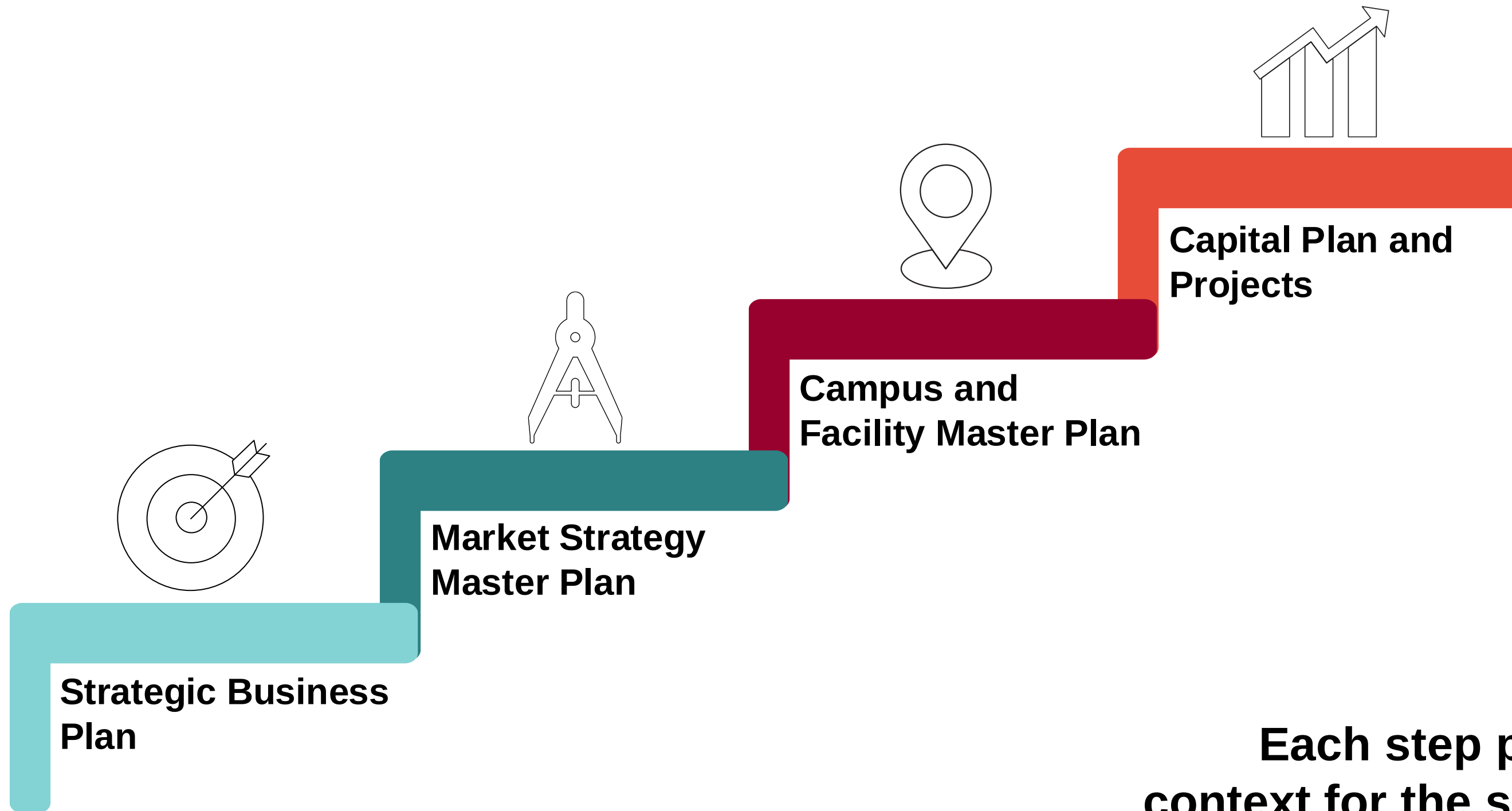
1

If you have a current strategic business plan

2

Keep your hand up if you know how that business plan should impact your facilities capital plan

CAPITAL PLANNING FLOW



Each step provides critical context for the step that follows

STRATEGIC PLAN AND MARKET STRATEGY

- Informed Decision Making - strategic planning provides a clear understanding of the business trajectory and guiding priorities that can influence facility needs.
- Market dynamics - competition, demographics, regional population growth
- Service line dynamics - new offerings, utilization levels, recruitment
- Entering new markets
- Potential partnerships and joint ventures
- Changes to care delivery
- Reimbursement realities
- Real Estate dynamics



CAMPUS & FACILITY MASTER PLAN

- Holistic view of campus elements – facilities, infrastructure, central plant, circulation, parking, access, etc.
- Aligning Organizational Goals with Facility Needs: Ensure that physical space and infrastructure reflect the future vision of the organization.
- Optimized Facility Usage: Ensures that every square foot of space serves a direct purpose in line with organizational goals, optimizing space utilization and future operational costs.
- Focus on growth paths at building level, access, adjacencies, customer satisfaction inputs, etc
- Condition assessments



Capital Plan and Projects

- Prioritize deployment of capital across clinical growth opportunities, routine capital replacement and deferred maintenance
- 1, 3 and 5-year spending plan aligned with priorities
- Align financing realities with prioritized needs
- Project financing strategy





02 Facility Assessments

60%

Of hospitals were
built before 1975

(Source: Government Accountability
Office, Statista)

\$390B

Worth of deferred
maintenance in
healthcare
facilities

(Source: HFM)

1 in 3

U.S. Hospitals is
facing significant
capacity and
space constrains

(Source: AHA)

60%

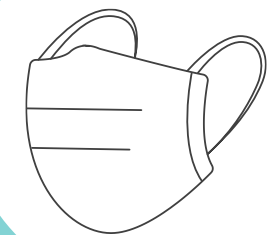
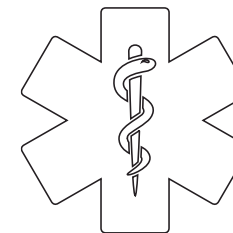
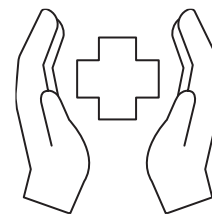
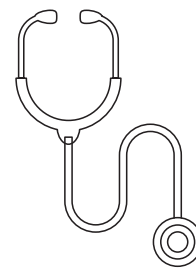
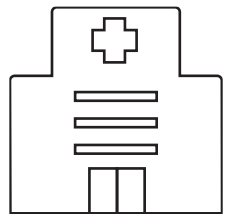
of healthcare
systems are
planning major
facility upgrades
or expansions
within the next
few years

(Source: Modern Healthcare)

85%

of healthcare
workers say the
facility affects
their ability to
perform
effectively

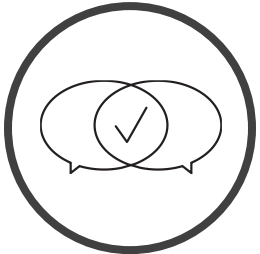
(Source: HFM)



COMPONENTS OF A FACILITY ASSESSMENT



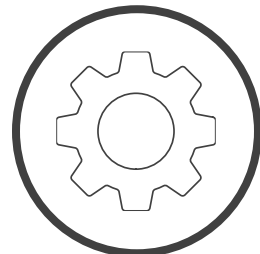
Physical Condition Evaluation: Evaluating condition of existing site(s), building structure(s) and MEPT systems and ability to serve the hospital in the future.



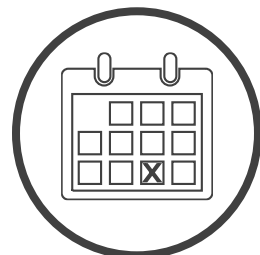
Narrative of Findings: An executive summary followed up with a written narrative that includes photos identifying the various findings and observations.



Categorization of Findings: Break out each major finding as Critical Items, Repair Issue, and General Repairs



Mechanical and Electrical System Equipment List: Compile a complete inventory of mechanical and electrical equipment including information like model, serial number, and year installed.



10 Year Capital Expense Plan: Utilizing information gathered on MEP systems and building components identify which years you should be planning major capital expenses for repairs and replacements.



Compliance: Ensuring that the facility(s) meets all relevant healthcare regulations, safety codes, and environmental standards.

FACILITY ASSESSMENT PROCESS & WHAT TO EXPECT

- 1-3 Days of onsite evaluation
 - Staff current state discussions
 - Site walk - building components
 - Roof
 - Windows
 - Doors
 - Joints
 - Cladding
 - Site walk - MEP
 - Inventory
 - Year in place
 - Condition
- Report findings





03 Master Planning



RAISE YOUR HAND

1

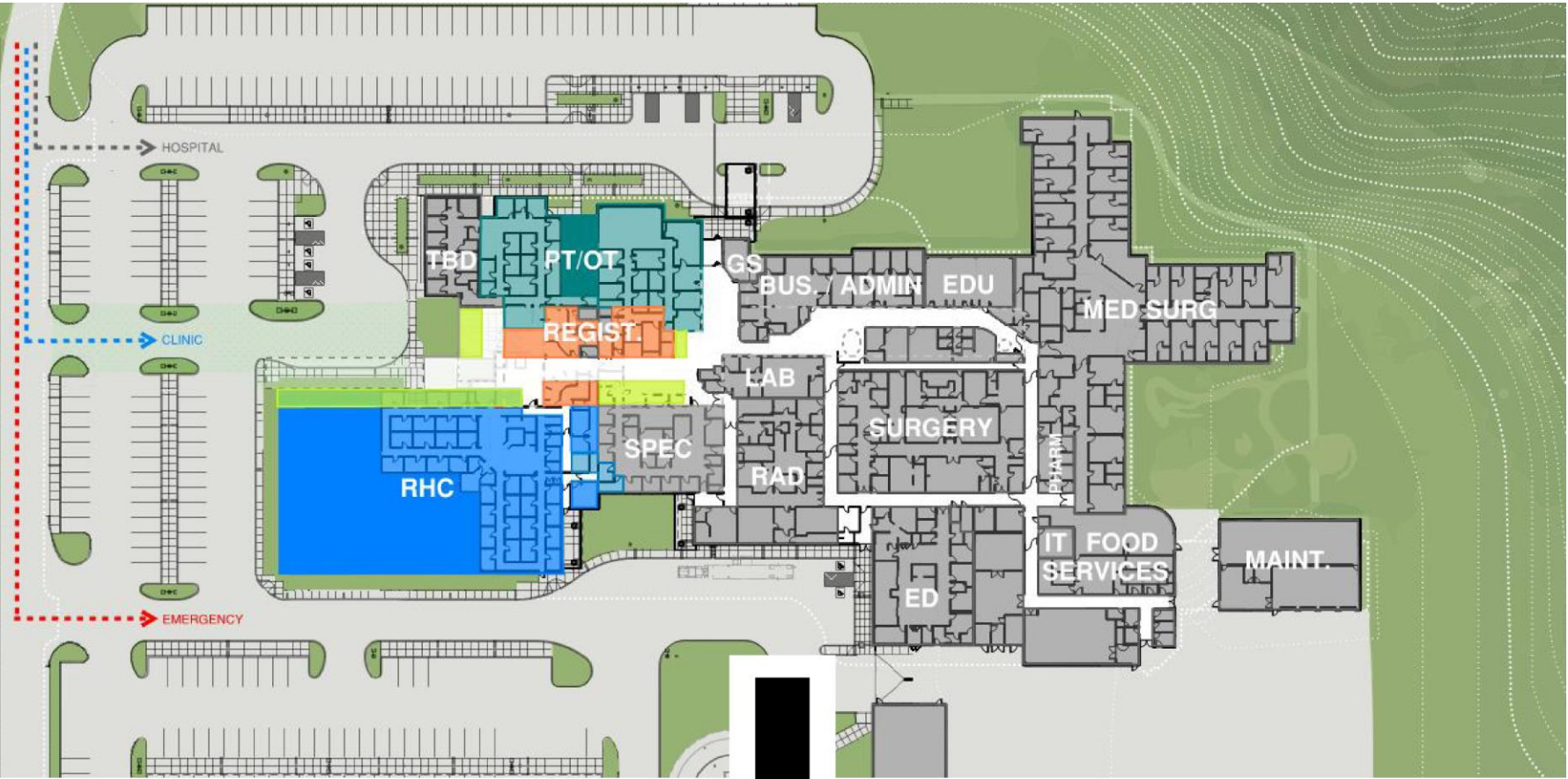
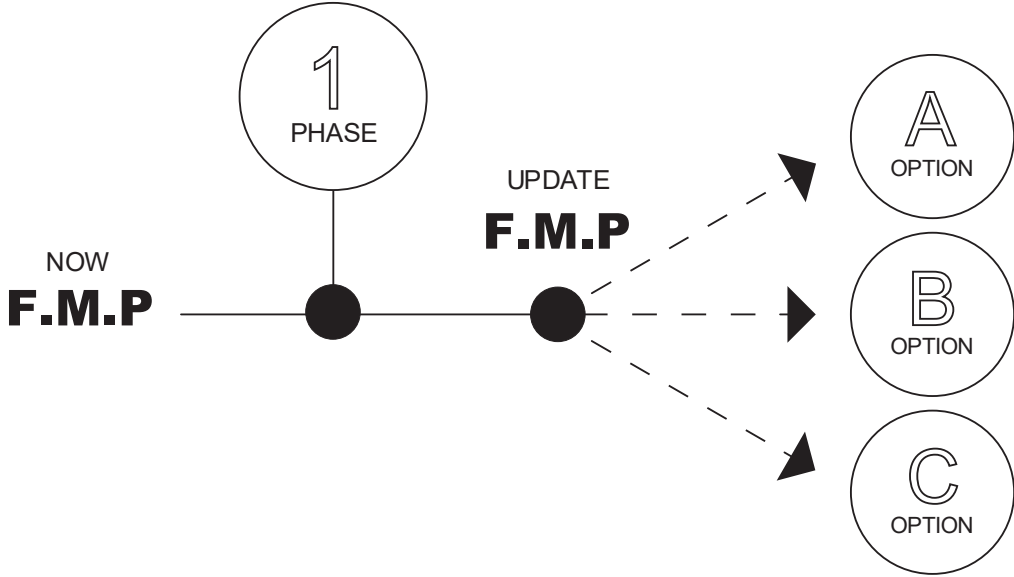
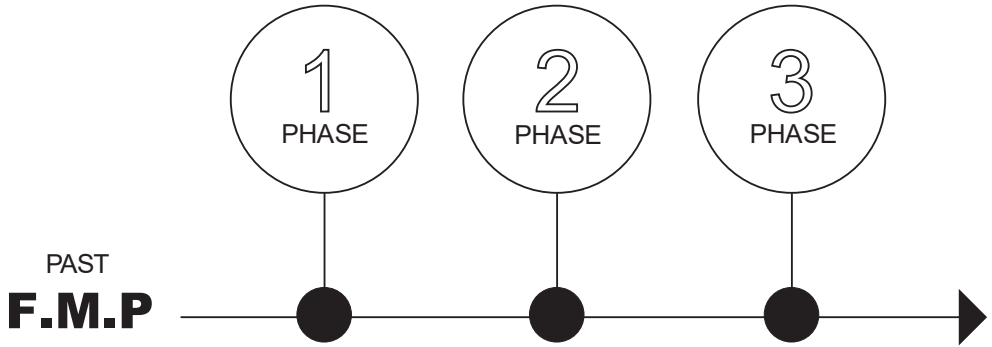
If you have a current master plan

2

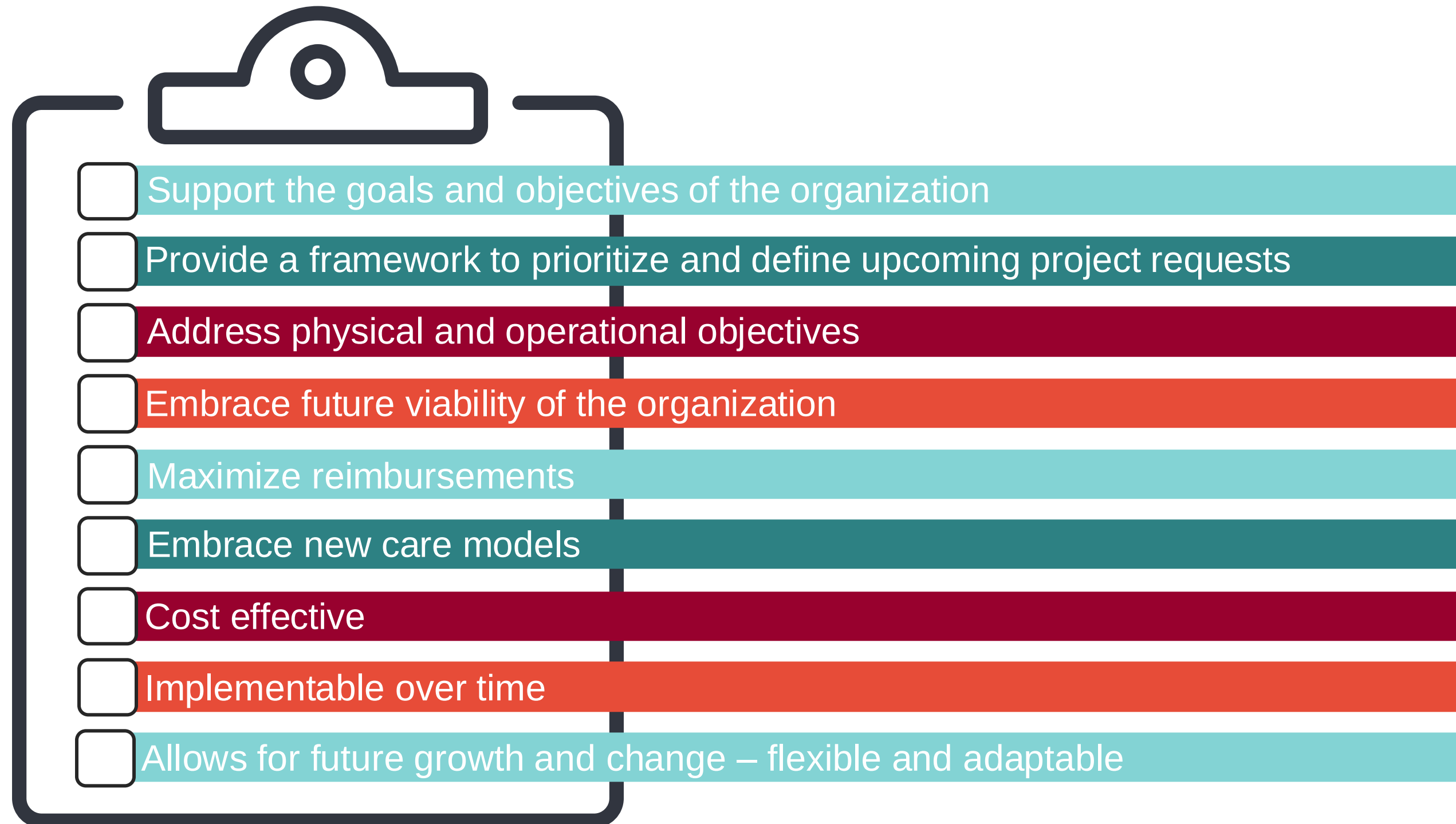
Keep your hand up if it is being implemented

ACTIONABLE PLANS LEAD TO SUCCESSFUL PROJECTS

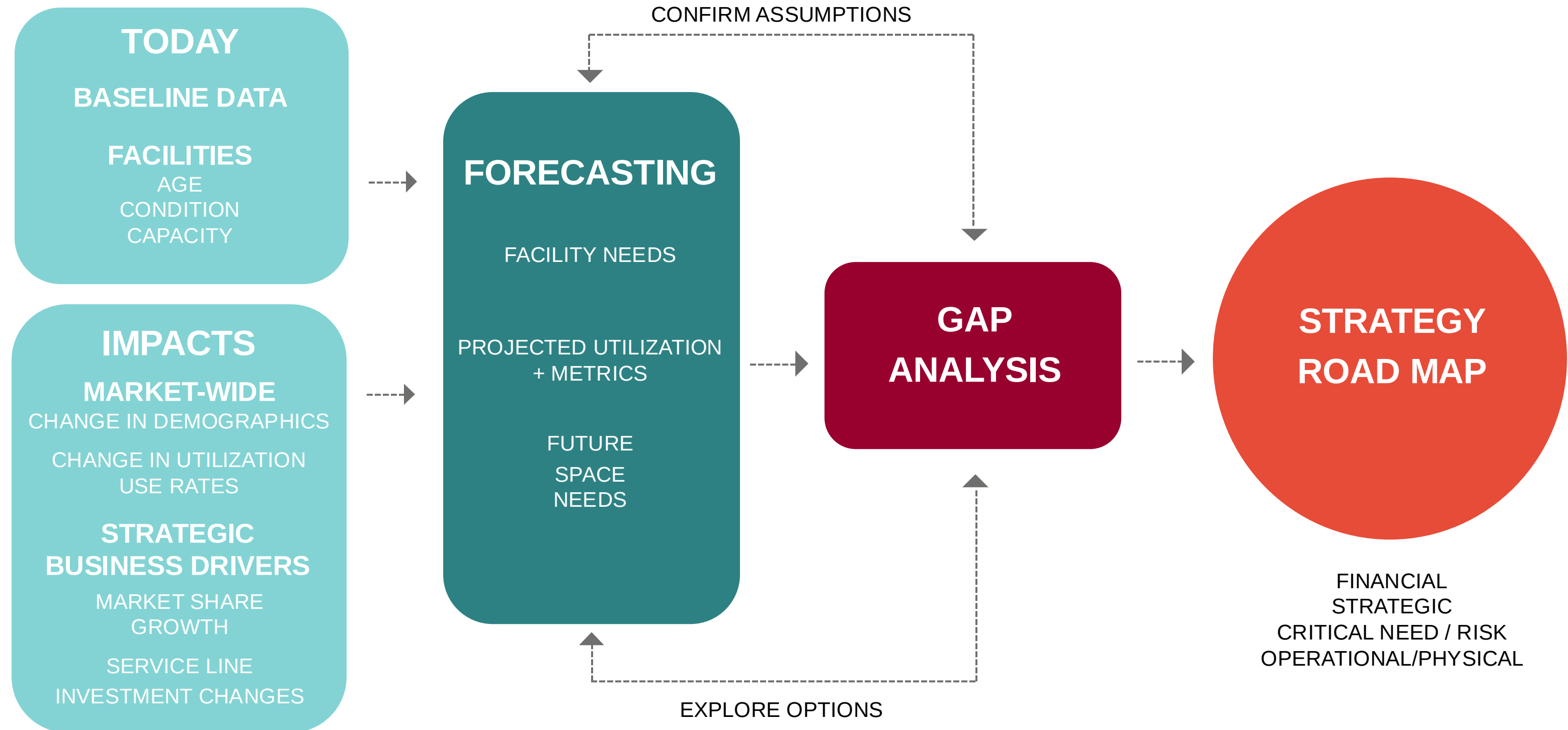
ALIGNS WITH YOUR VISION FOR THE FUTURE



KEYS TO A SUCCESSFUL MASTER PLAN



DATA DRIVEN METHODOLOGY



CAMPUS STRATEGY – EXISTING TO NEW

Existing

SOUTH HEALTH PLAZA

LAUNDRY
CHILD CARE

MEDICAL CENTER

LEVEL 4	GEN SURG. PRE-OP
	INFUSION / CATH RECOVERY
	CHEMOTHERAPY
	CARDIOLOGY CLINIC - 4 PROVIDERS
	ONCOLOGY CLINIC - 1 PROVIDER
LEVEL 3	LAB
	BRAIN HEALTH
	MATERNAL CHILD
	SLEEP LAB
	ACUITY ADAPTABLE UNIT
LEVEL 2	CATH LAB
	IMAGING
	CRITICAL CARE UNIT
	ACUITY ADAPTABLE UNIT
LEVEL 1	IMAGING
	SURGERY
	LAB
	EMERGENCY DEPARTMENT
	SPECIALTY CLINIC - 5 PROVIDERS
GROUND	RADIATION ONCOLOGY
	CARDIAC REHAB
	SPD
	PHARMACY

NORTH HEALTH PLAZA

PRIMARY CARE - 20 PROVIDERS
PULMONOLOGIST - 1 PROVIDER
IMAGING
LAB
RHEUMATOLOGIST - 1 PROVIDER
ENT OUTREACH - 1 PROVIDER
INTERNAL MEDICINE - 1 PROVIDER
HOME MEDICAL EQUIPMENT
HOME CARE / HOSPICE
PT/OT/SPEECH

MEDICAL HEALTH PLAZA

DIALYSIS
WOUND CARE
INTERNAL MEDICINE - 3 PROVIDERS

FREESTANDING

CHILD CARE

New

MEDICAL OFFICE BUILDING

PHASE 1	PRIMARY CARE - 20 PROVIDERS
	PULMONOLOGIST - 1 PROVIDER
	RHEUMATOLOGIST - 1 PROVIDER
	ENT OUTREACH - 1 PROVIDER
	GROWTH FOR 1 PROVIDER
PHASE 2	IMAGING
	LAB
	CARDIOLOGY CLINIC - 4 PROVIDERS
	SPECIALTY CLINIC - 6 PROVIDERS
	GENERAL SURGERY - 3 PROVIDERS
OTHERS*	GROWTH FOR 15 PROVIDERS? *
	PT / OT / SPEECH
	HOME CARE / HOSPICE
	HOME MEDICAL EQUIPMENT
PHASE 3?	DIALYSIS
	WOUND CARE
	INTERNAL MEDICINE?

MEDICAL CENTER

INFUSION / CATH RECOVERY
BRAIN HEALTH
MATERNAL CHILD
SLEEP LAB
ACUITY ADAPTABLE UNIT
CATH LAB
IMAGING
CRITICAL CARE UNIT
ACUITY ADAPTABLE UNIT
IMAGING
SURGERY
LAB
EMERGENCY DEPARTMENT
CARDIAC REHAB
SPD
PHARMACY

PREP/RECOVERY
-SURGERY
-CATH LAB
-PROCEDURES
-INTERVENTIONAL RADIOLOGY

CANCER CENTER

RADIATION ONCOLOGY
ONCOLOGY CLINIC - 1 PROVIDER
CHEMOTHERAPY
IMAGING - PETCT
LAB

PALLIATIVE CARE?
SURVIVORSHIP CARE?

MEDICAL HEALTH PLAZA

DIALYSIS
WOUND CARE
INTERNAL MEDICINE - 5 PROVIDERS
LAUNDRY

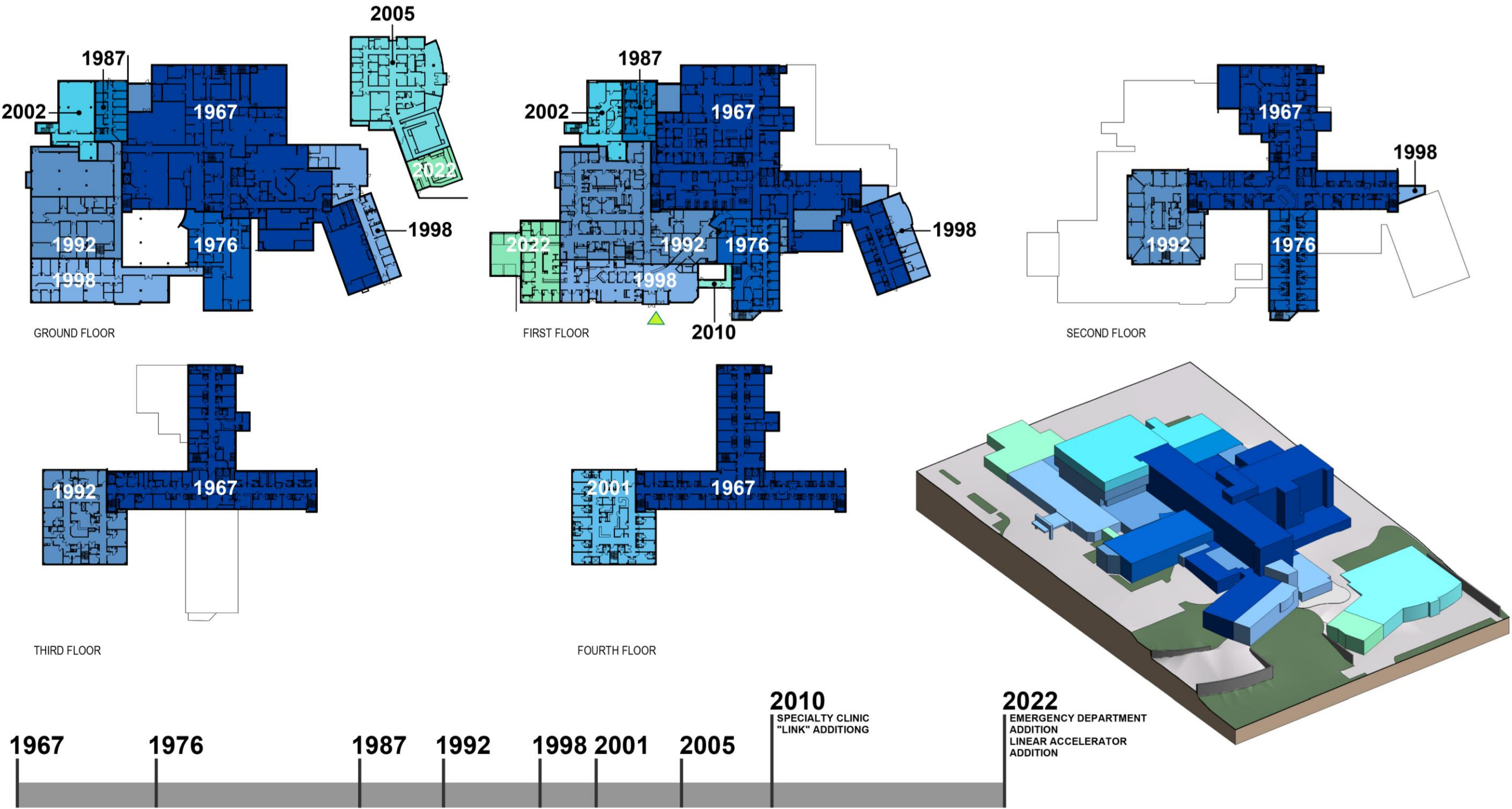
FREESTANDING

CHILD CARE

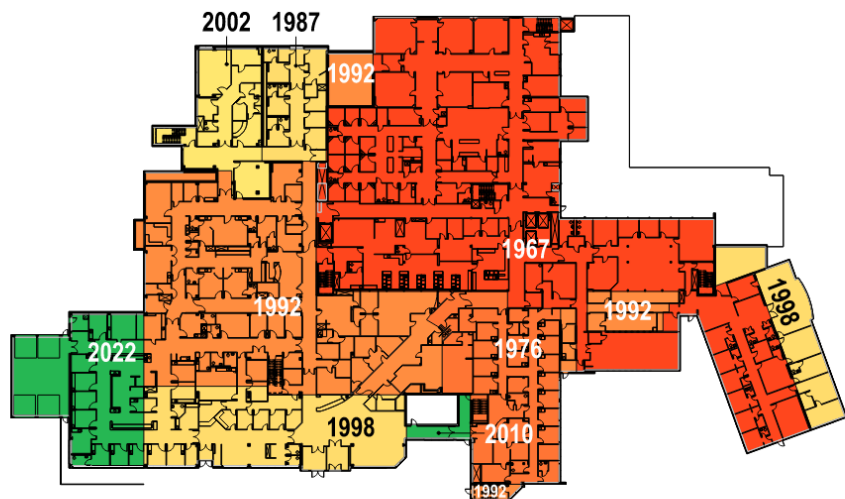
ZONING LEGEND

BUILDING SUPPORT	INPATIENT
BUSINESS	OUTPATIENT
CLINICAL SUPPORT	PUBLIC / ADMIN
DIAGNOSTIC / TREATMENT	

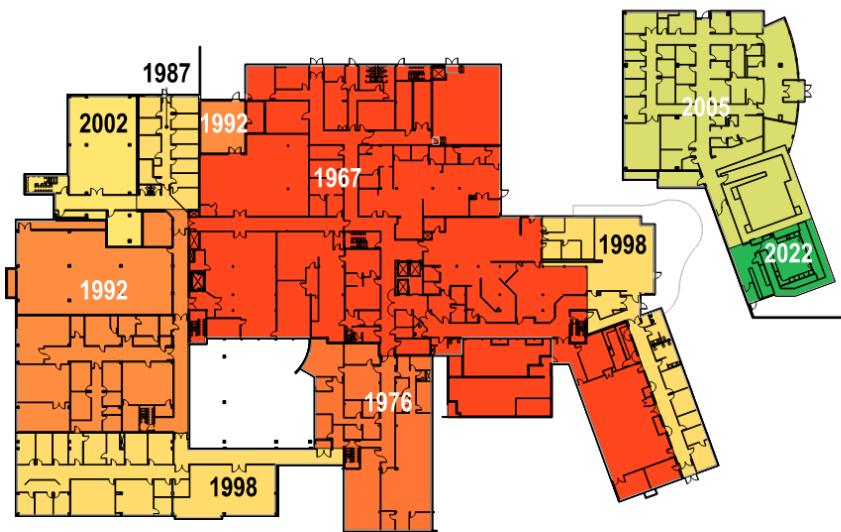
CAMPUS EVOLUTION



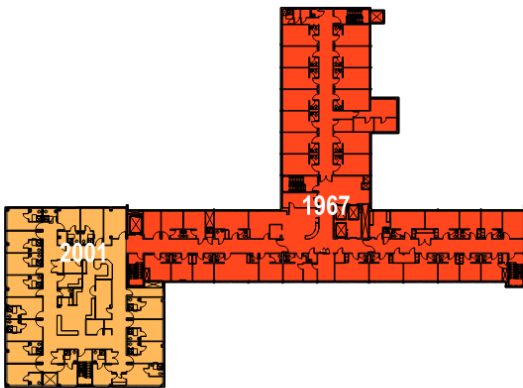
FACILITY CONDITION



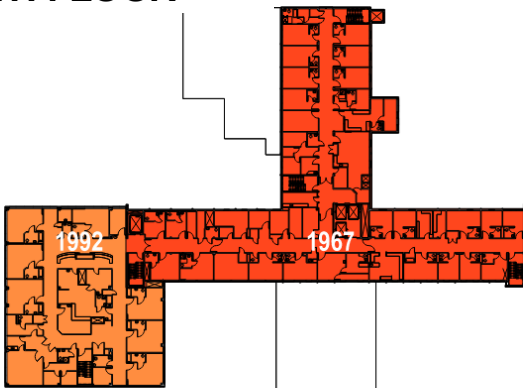
FIRST FLOOR



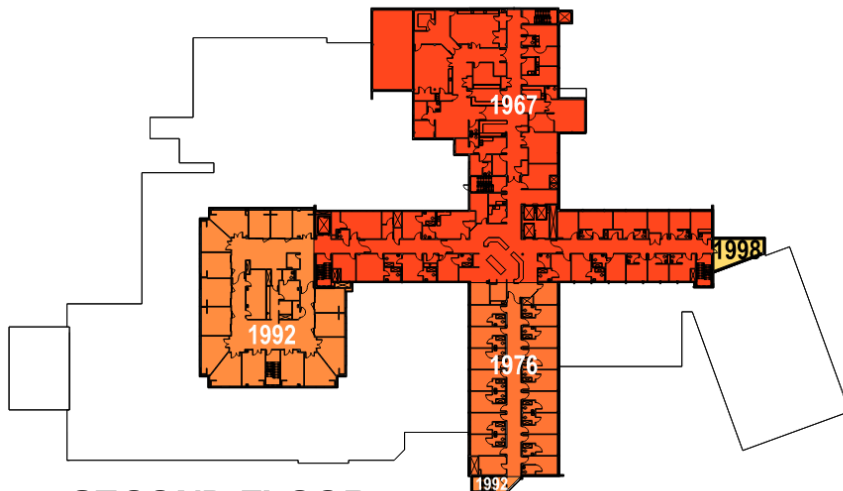
GROUND FLOOR



FOURTH FLOOR



THIRD FLOOR



SECOND FLOOR

POOR	89	1967 - ORIGINAL BUILDING
	85	1976 - SOUTH TOWER ADDITION
	83	1992 - ED, IMAGING, & PATIENT ROOM ADDITION
	79	2001 - 4TH FLOOR INPATIENT ADDITION
FAIR	77	1998 - FIRST FLOOR EXPANSION / ADDITION
	76	1987 - SPECIAL PROCEDURES ADDITION
	75	2002 - MRI ADDITION
GOOD	56	2005 - RAD - ONC FREE STANDING BUILDING
	44	2022 - EMERGENCY DEPARTMENT ADDITION
	37	2022 - LINEAR ACCELERATOR ADDITION

INFRASTRUCTURE ASSESSMENT

CRITERIA	REMARKS
System Condition	Age of major equipment ranges from 5-30+ years.
Serviceability	Majority of equipment is consolidated in mechanical/electrical equipment spaces or on the roof for good accessibility.
Reliability	Good redundancy in the cooling system, but poor redundancy in the heating system due to plant reliability concerns. Air handling systems do not have redundancy and there is limited spare capacity.
Code Compliance	Some code compliance issues were observed during plan reviews.
Constructability	Upgrading systems in an operating hospital can cause significant disruption and increased cost
System Selection	New HVAC systems will likely be rooftop units or indoor air handling units connected to the existing heating/cooling plants. Humidification will be provided by existing steam system.



ZONING DIAGRAM



FIRST FLOOR



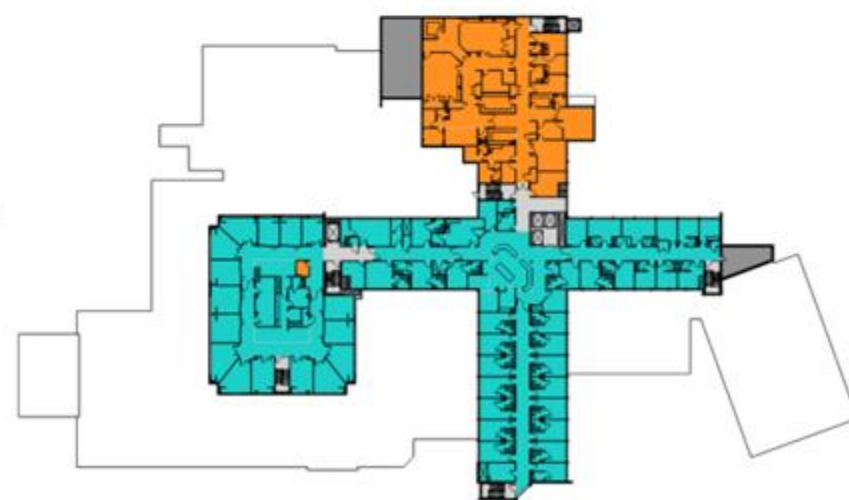
GROUND FLOOR



FOURTH FLOOR

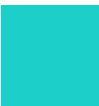


THIRD FLOOR

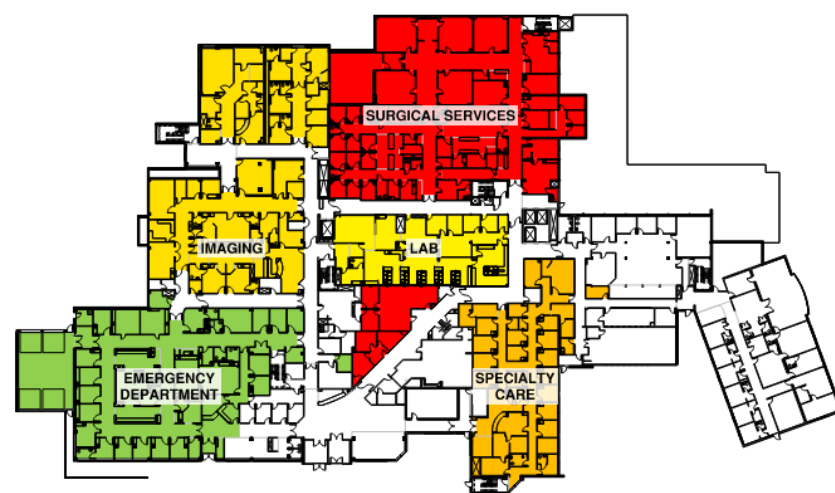


SECOND FLOOR

ZONING LEGEND

	BUILDING SUPPORT
	BUSINESS
	CLINICAL SUPPORT
	DIAGNOSTIC / TREATMENT
	INPATIENT
	OUTPATIENT
	PUBLIC / ADMIN

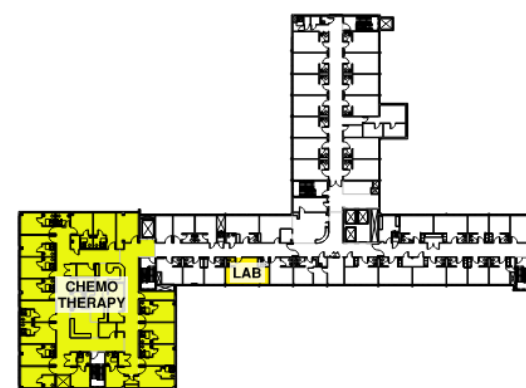
DEPARTMENTAL ASSESSMENT



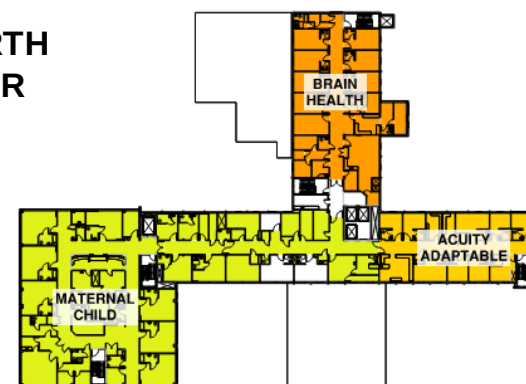
FIRST FLOOR



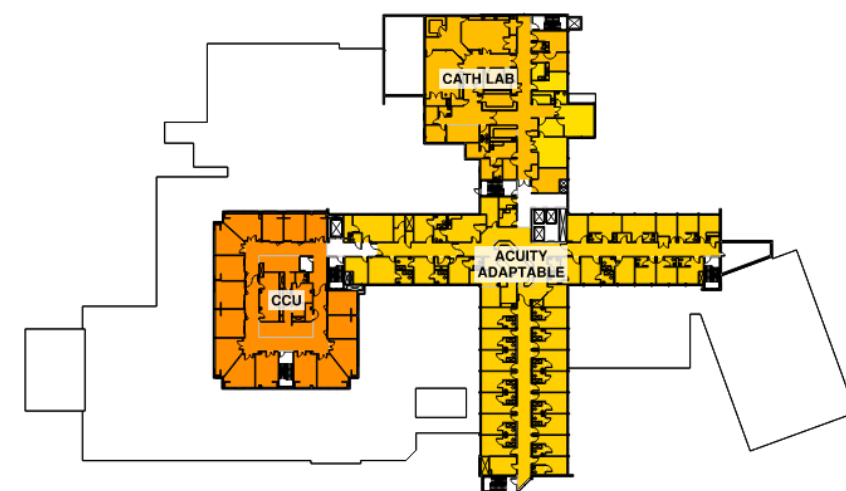
GROUND FLOOR



FOURTH FLOOR



THIRD FLOOR

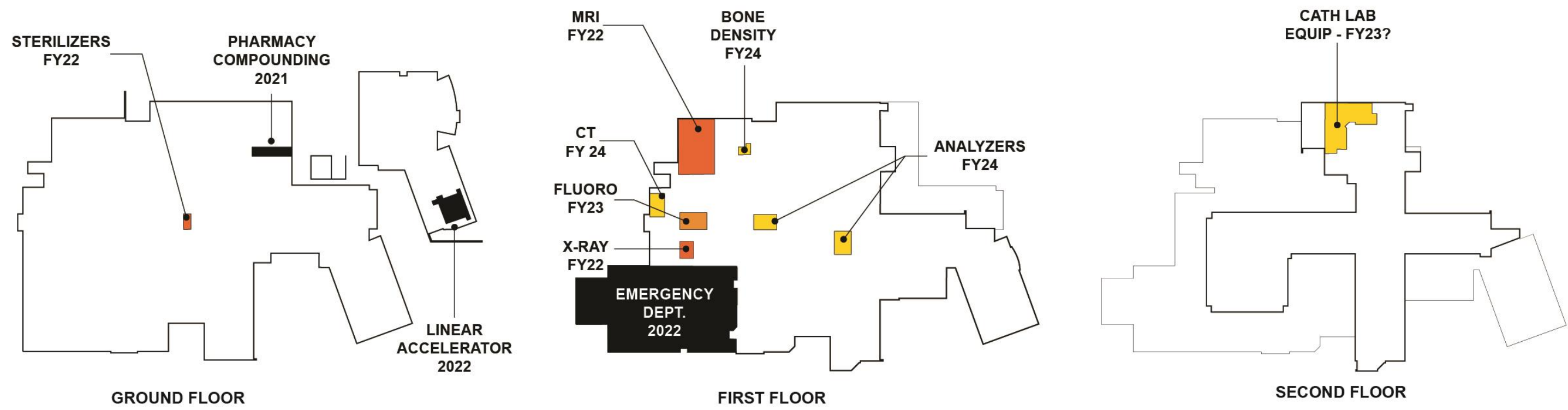


SECOND FLOOR

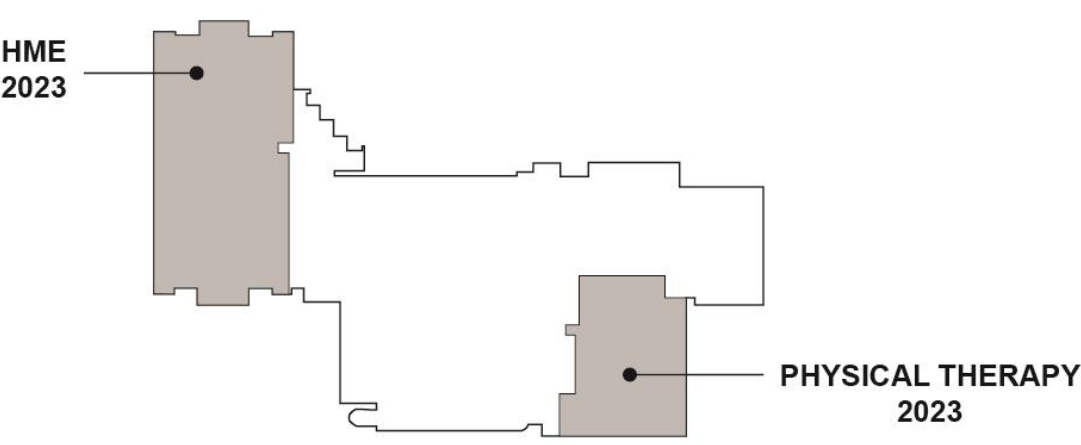
POOR	9	SURGICAL SERVICES
	16	PRIMARY CARE (NHP)
	18	CRITICAL CARE UNIT
	19	BRAIN HEALTH
NEUTRAL	20	CARDIAC REHAB
	21	SPECIALTY CARE
	21	CATH LAB
	22	ACUITY ADAPTABLE
EXCELLENT	23	IMAGING
	24	LAB
	27	CHEMOTHERAPY
	28	MATERNAL CHILD
	29	RADIATION ONCOLOGY
	39	EMERGENCY DEPARTMENT

PLANNED / RECENT INVESTMENTS

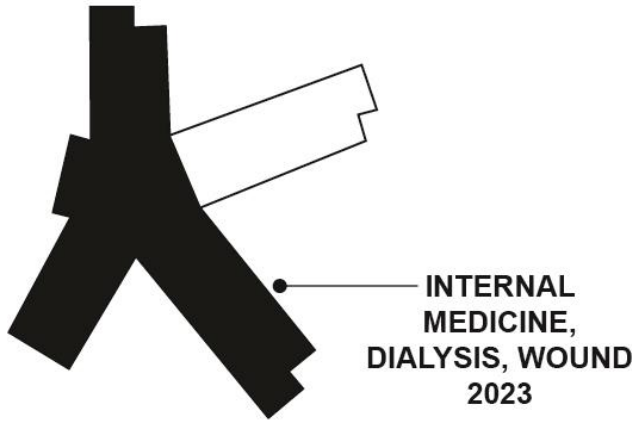
MEDICAL CENTER



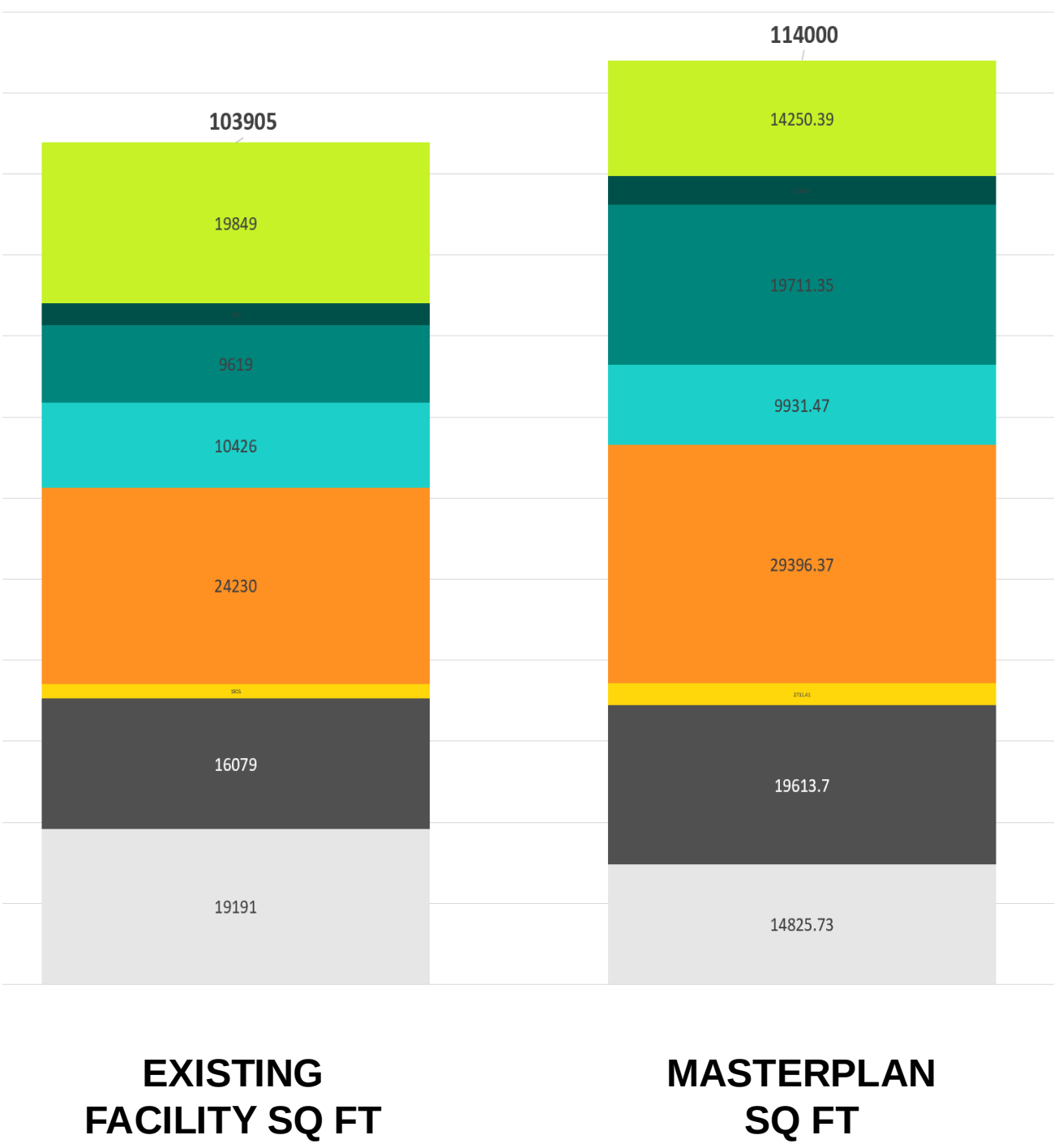
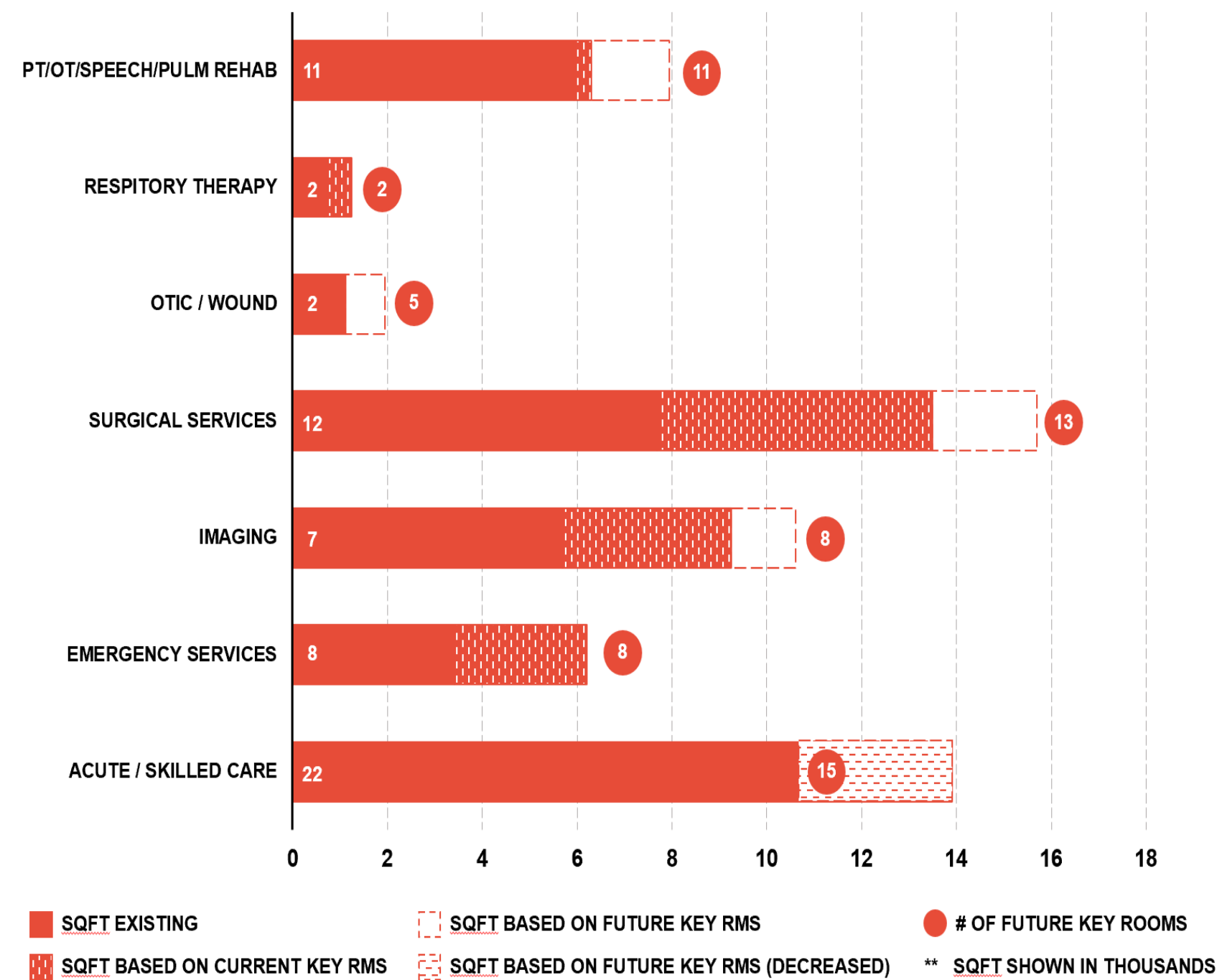
NORTH HEALTH PLAZA



MEDICAL HEALTH PLAZA

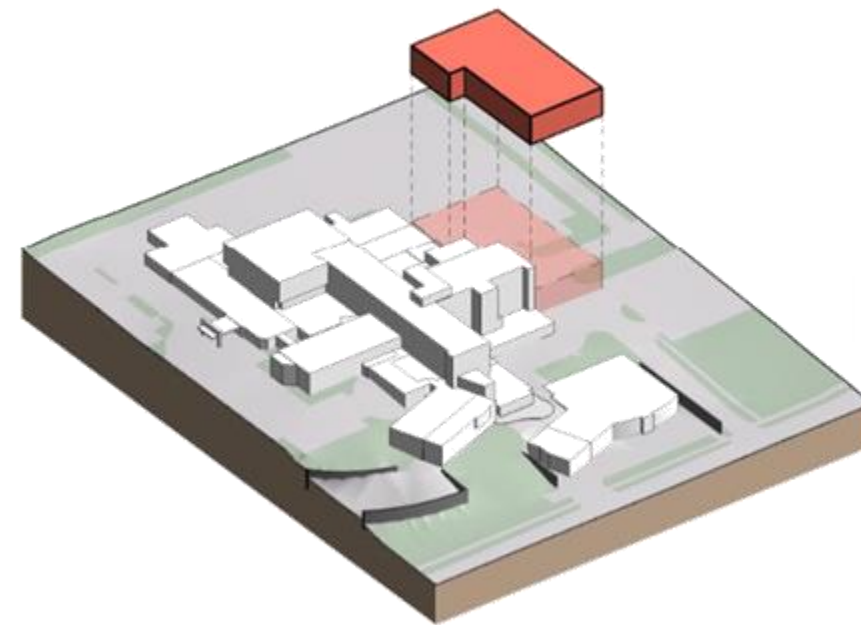


FORECASTING

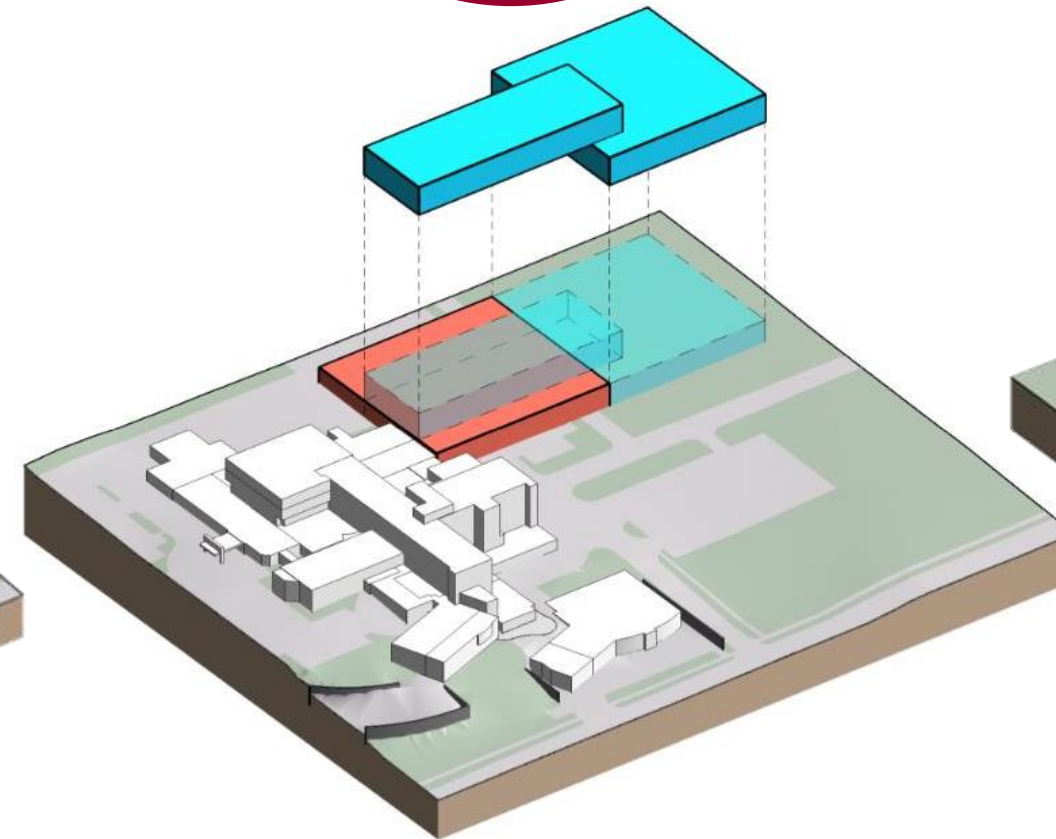


HOSPITAL STRATEGIES

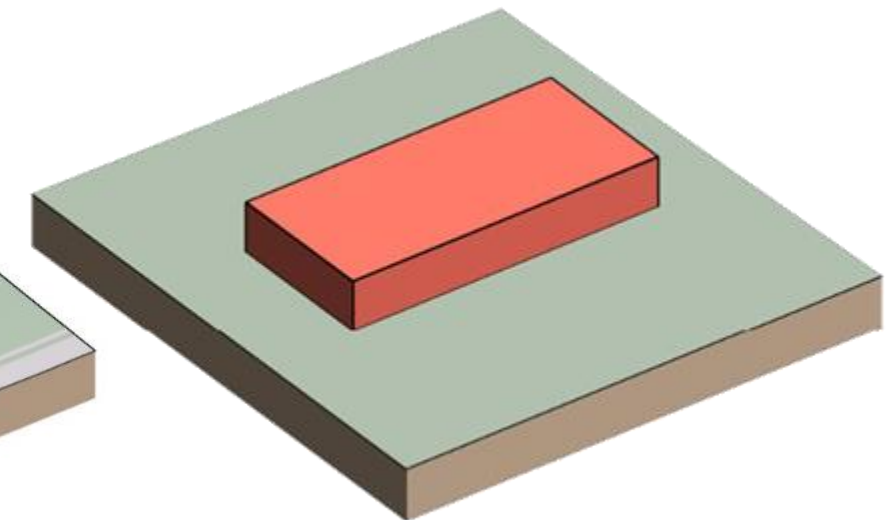
A
QUICK FIX



B
EXPAND &
RENOVATE



C
PHASED
REPLACEMENT



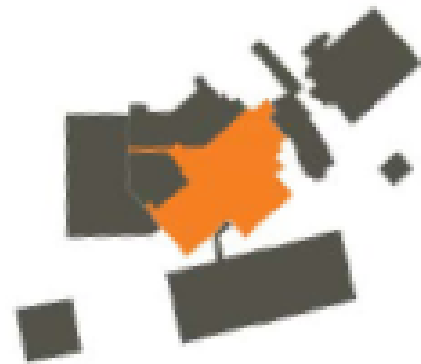
D
REPLACEMENT

PHASING

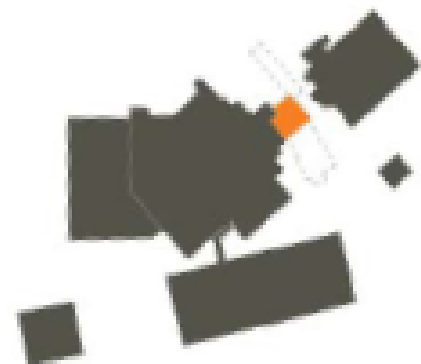
1. Transitional Phase



2. Sustainable Phase



3. Future Phase



BUDGETING

PHASE I - WEST EXPANSION										
1A	Wellness/Rehabilitation Services Addition	6,100				\$110.00	\$72.75	\$40.00	\$222.75	\$1,358,775.00
	West Parking/Site Improvements				35,000	\$5.00	\$2.00	\$1.00	\$8.00	\$280,000.00
1B	Wellness/Rehabilitation Services Renovation		5,600			\$75.00	\$72.75	\$40.00	\$187.75	\$1,051,400.00
	Northeast Parking/Site Improvements				12,000	\$5.00	\$2.00	\$1.00	\$8.00	\$96,000.00
						\$98.00	\$72.75	\$40.00	\$210.75	\$1,854,600.00
						\$125.00	\$72.50	\$60.00	\$257.50	\$4,120,000.00
						\$50.00	\$50.00	\$25.00	\$125.00	\$2,000,000.00
						\$98.00	\$72.50	\$40.00	\$210.50	\$1,915,550.00
						\$98.00	\$72.50	\$40.00	\$210.50	\$1,452,450.00
					95,000	\$5.00	\$2.00	\$1.00	\$8.00	\$760,000.00
700						\$98.00	\$72.50	\$40.00	\$210.50	\$1,410,350.00
300						\$150.00	\$98.51	\$65.00	\$313.51	\$3,072,398.00
100										
									CONSTRUCTION COST	\$19,371,523.00
									DESIGN CONTINGENCY- 15%	\$2,905,728.45
									TOTAL CONSTRUCTION COST	\$22,277,251.45
						\$ Total	% of Const Cost	\$/SF		
						\$22,277,251.45	100%	\$262.09		
						\$2,227,725.15	10%	\$26.21		
						\$50,000.00				
						\$106,250.00		\$1.25		
						\$668,317.54	3%	\$7.86		
						\$1,559,407.60	7%	\$18.35		
						\$111,386.26	0.50%	\$1.31		
						\$334,158.77	1.50%	\$3.93		
						\$1,113,862.57	5%	\$13.10		
						\$501,238.16	2.25%	\$5.90		
						\$445,545.03	2%	\$5.24		
						\$144,802.13	0.65%	\$1.70		
						\$1,113,862.57	5%	\$13.10		
						\$22,277.25	0.10%	\$0.26		
						\$1,113,862.57	5%	\$13.10		
						\$31,789,947.06		\$373.41		

A close-up photograph of a person's hand holding a silver and black pen, poised to write on a document. The hand is in sharp focus, while the background, which includes a desk, a calculator, and other papers, is blurred. A dark grey banner is overlaid at the bottom of the image.

04 Funding Sources

FUNDING SOURCES

External

- **Government Grants:** Funding from federal, state and local agencies
- **Philanthropic Donations:** Contributions from foundations, charities, or individual donors
- **Private Investment Loans:** Loans from banks or financial institutions
- **USDA Loans:** USDA Government-backed loan designed to support rural development
- **Public Bonds:** Municipal bonds issued by local governments for public projects
- **Tax Credits:** Recent legislation like the Inflation Reduction Act offers tax credits for non-profit healthcare organizations
- **Utility Rebates/Incentives:** Partnerships with utility providers for rebates and energy-efficient upgrades
- **OPM (Other People's Money):** Developer sourced funding and capitalized leases

Internal

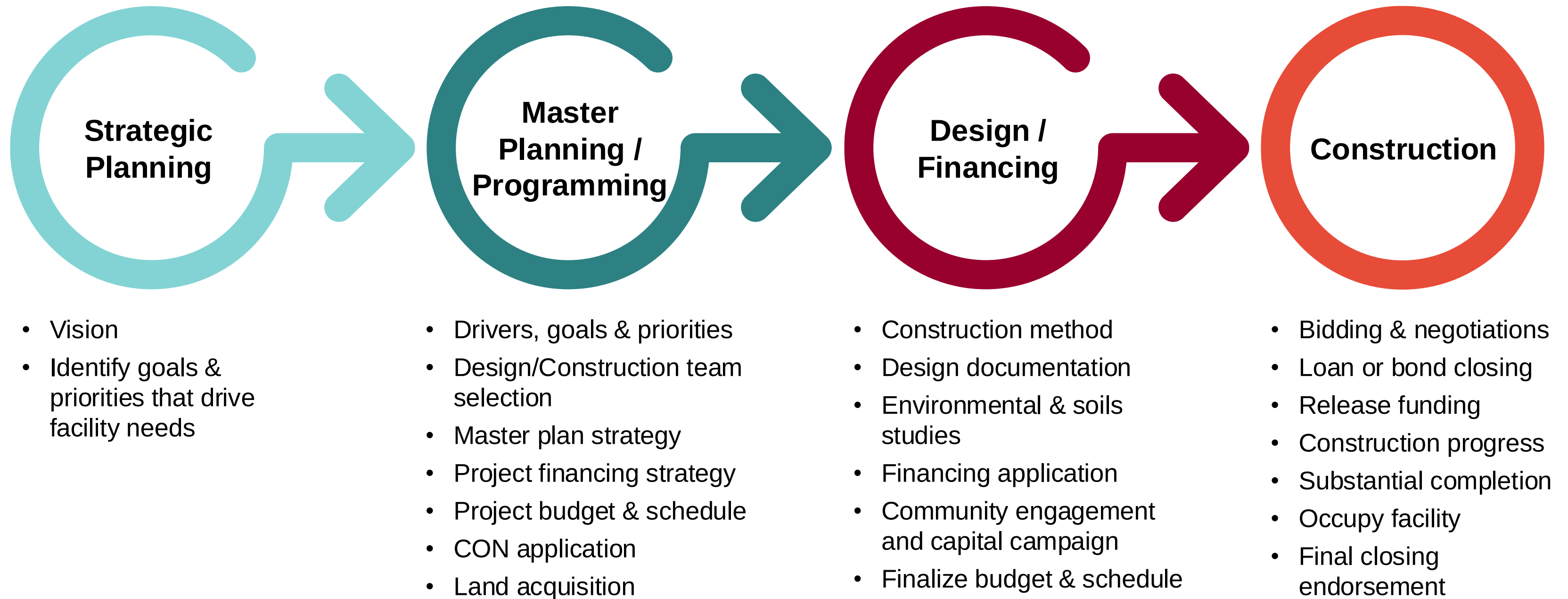
- **Operating Budget:** Using regular operating funds for project costs.
- **Capital Expenditure Budget:** Funds set aside for major infrastructure projects.
- **Green Revolving Fund:** A dedicated internal fund to finance energy efficiency upgrades, where cost savings are reinvested back into the fund

Consider Healthcare Capital Consultants such as Lument, Piper Sandler, Kaufman Hall, FTI, Mercer, etc



05 Next Steps

LIFECYCLE





?

Q&A

THANK YOU!