

## Vista Awards Winners Announced

By Deanna Martin, senior communication specialist with the American Society for Healthcare Engineering of the American Hospital Association



Top left: 2012 Vista Award for Renovation, Hoag Hospital Irvine renovation; Bottom left: 2012 Vista Award for Infrastructure, cardiology addition/central plant relocation of Liberty Hospital. Right: 2012 Vista Award for New Construction, Virginia Commonwealth University Health System Critical Care Hospital;

**T**eam members working on hospital projects in Missouri, California, and Virginia are the latest winners of the prestigious Vista Awards, which are presented annually at the International Summit & Exhibition on Health Facility Planning, Design & Construction™ (PDC Summit). The awards recognize the importance of teamwork in creating an optimal health care physical environment. These teams showed a unity of purpose that helped their projects succeed from pre-planning to implementation.

The winners 2012 Vista Awards are the new Virginia Commonwealth University Health System Critical Care Hospital in Richmond, Va.; the renovation of Hoag Hospital Irvine in Irvine, Calif.; and the cardiology addition and central plant relocation at Liberty Hospital in Liberty, Mo. The projects won in the categories of best new construction, renovation, and infrastructure, respectively.

A closer look at each of the projects shows how working together as a team helped complete projects without budget overruns or construction delays.

*continued on page 2*



### A message from the ASHE president

Dear Colleague,  
The phrase “time flies when you are having fun” has never meant so much to me as it does now. It seems as only yesterday I was recognized as the Region 5 Emerging Regional Leader. That was in 2005, when I came to a better understanding of the important role played by ASHE members in our facilities. This was a pivotal point in my career, and I knew then that I wanted to share my vision and passion with other ASHE members. Over the course of the next few years, I served on a number of ASHE committees and was elected to be the Region 5 Board representative. In 2010, I ran for the office of President-elect, and I was both honored and humbled to be entrusted with this leadership role in ASHE.

*Continued on page 15*

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## 2012 Vista Award for New Construction

*Presented to an organization that has constructed a new facility essentially from the ground up. The new facility may be connected to an existing facility, but the building must have its own identity and be a new space.*

### **Project: Virginia Commonwealth University Health System Critical Care Hospital**

**Location:** Richmond, Va.

**Square feet:** 367,000

**Number of beds:** 232

**Projected budget:** \$167 million

**Actual cost:** \$163 million

#### **Team members:**

**Robert Reardon**, chief facility officer, Virginia Commonwealth University Health System, Richmond, Va.

**Skip Smith**, project executive, W.M. Jordan, Richmond, Va.

**Pete Dunbar**, principal, Dunbar, Milby, Williams, Pittman & Vaughan, Richmond, Va.

**Mark Ahern**, project manager, Jones Lang LaSalle, Richmond, Va.

**Tom Bartlett**, principal, ccrd partners, Richmond, Va.

**Leslie Hanson**, associate principal, HKS, Inc., Richmond, Va.



The team constructing the Virginia Commonwealth University Health System Critical Care Hospital (VCUHS Critical Care Hospital) faced plenty of challenges in building a 15-story, state-of-the-art tower in a tight, historic, and urban campus. But by collaborating with members of the team and enhancing communications with everyone involved in the project, the new hospital was built under budget and ahead of schedule.

“The VCUHS Critical Care Hospital project was a success because each team member was focused on expedited issue resolution and quality of the finished product,” said Craig Rader, construction administrator with HKS, Inc. “Many

different companies contributed, but it was the hundreds of dedicated and results-oriented individuals—users, designers, contractors, installers, and quality control managers—whose collaboration yielded an exceptional project.”

The VCU Critical Care Hospital is Virginia’s only hospital devoted solely to critical care, and the 15-story tower was the largest capital construction project in the history of the VCU Medical Center. Project goals included increased patient and provider safety; increased collaboration by getting input from doctors, nurses, staff, and patients; the implementation of innovative safety and critical care







features; the use of evidence-based design principals; and respect for its location in a historic area adjacent to the Museum and White House of the Confederacy.

Those involved with the project took a team approach from the very start. The architectural team generated design concepts with department users' input, and the construction manager developed demolition logistics that would work with surrounding historical structures. The team used an open-book policy to share pricing and estimates, and value engineering efforts were conducted weekly. An independent commissioning consultant started in design development and participated

through the project completion. The Department of Historical Resources and officials from Museum and White House of the Confederacy were regularly briefed in monthly meetings. Web-based construction updates were distributed to all departments throughout the process to let hospital employees know about potential disruptions as the tower was connected to the existing hospital through all 15 floors. Life-size mock-ups were built for the ICU, acute care, and NICU patient rooms for review by staff, physicians, and faculty.

The end result was a state-of-the-art facility that hospital officials say has revolutionized patient care. A post-

occupancy review found that patient satisfaction with room accommodations increased more than 20 percent, and cleanliness scores were up 10 percent. The overall hospital experience was up 3.2 percent.

"The Critical Care Hospital fills a tremendous need in the region for highly specialized care that involves advanced and complex procedures and treatment for seriously ill and injured patients," said Dr. Sheldon Retchin, VCU Health System CEO and VCU vice president for Health Sciences. "The new hospital is yet another demonstration of the VCU Medical Center's dedication to practice innovation and ensuring the best patient care possible."



## 2012 Vista Award for Renovation

*Presented to an organization that has altered the existing conditions or added new space to existing structures. The original building envelope remains essentially intact.*

### **Project: Hoag Hospital Irvine renovation**

**Location:** Irvine, Calif.

**Square feet:** 244,000

**Number of beds:** 154

**Projected budget:** \$90.7 million

**Actual cost:** \$86.7 million

### **Team members:**

**Sanford Smith**, senior vice president of Real Estate, Facilities & Construction, Hoag Hospital, Newport Beach, Calif.

**D. Randy Regier, AIA, ACHA, CHC**, principal-in-charge, TAYLOR, Newport Beach, Calif.

**Issam Khalaf**, principal-in-charge, Jacobs Project Management Co., Irvine, Calif.

**Jim Ardary**, senior construction manager, Howe Bonney & Associates (HB&A), Gardena, Calif.

**Roger Carter, P.E., LEED AP, CxA**, principal, TKSC Consulting Mechanical Engineers, Irvine, Calif.

**Ed Gharibans**, principal, TMAD Taylor & Gains, Pasadena, Calif.



Officials working on the Hoag Hospital Irvine renovation project wanted it to provide more than just a revamping of the entire hospital, but a complete revitalization of patient care that would provide the highest quality services to the Irvine, Calif., community. The project started as a three-phase “patch-and-paint” and grew to 13 stages that touched every corner of the hospital—all while maintaining the original schedule. Hospital officials said the fact that the hospital was completed three months ahead of schedule and nearly 5 percent under budget was an amazing accomplishment and reflects the collaboration so central to this project.

“Since Hoag Hospital Irvine’s opening in late 2010, the project has been viewed by many as a successful and meaningful connection between Hoag’s reputation for providing quality patient care and the surrounding Irvine community,” said Dr. Richard Afable, president and chief executive officer of Hoag Memorial Hospital Presbyterian. “This may be attributed to how well the entire project team has functioned in all aspects of the word ‘team’—communication, decision-making, and a passion to exceed expectations—throughout all phases of project development to completion.”





Hoag Hospital, anchored by its Newport Beach location, took over a 20-year-old failing community hospital and put together a team of administrators, physicians, nurses, designers, engineers, and builders to participate in the facility's overhaul. The completed project allows Hoag to operate two distinct hospitals—Hoag Hospital Irvine and Hoag Orthopedic Institute—in one shared facility.

The team working on the project—everyone from the hospital CEO to the flooring subcontractor—used “think differently” as a guiding principle. Project leaders said this mantra

reinforced an energized, positive team atmosphere that embraced creative decision making. Planning sessions involved hundreds of meetings with hundreds of users. Every team member went through lean training. The project aimed for a sense of community with the citizens of Irvine. Designers used the nearby Mountains to Sea Trail, a popular 26-mile hiking and biking trail, as inspiration for the interior architecture. And a photo contest soliciting community images of the trail helped bring a sense of the local personality to the hospital.

The completed renovation was a success. Hoag Hospital Irvine was in the 97<sup>th</sup> percentile for hospital cleanliness and was in the 92<sup>nd</sup> percentile for pleasantness of room décor, according to post-occupancy evaluations. The hospital also kept an eye on green building and construction practices, and received LEED Silver certification under the Commercial Interiors for LEED CI Version 2.0.



## 2012 Vista Award for Infrastructure

*Presented to an organization that has modified or replaced major portions of the utility generations, distribution, or control systems involving significant project planning.*

### **Project: Cardiology addition/central plant relocation of Liberty Hospital**

**Location:** Liberty, Mo.

**Square feet:** 42,000

**Projected budget:** \$16 million

**Actual cost:** \$15 million

#### **Team members:**

**David Feess**, assistant administrator, Liberty Hospital, Liberty, Mo.

**Elise Kirchofer/Brian Artzer**, vice president, Henderson Engineers, Inc., Lenexa, Kan.

**Mark Oxler**, senior project manager, U.S. Engineering, Kansas City, Mo.

**Shannon Baird**, senior project manager, JE Dunn, Kansas City, Mo. (now vice president in West Des Moines, Iowa)

**Richard Johnson**, principal, Pulse Design Group (formerly known as Wilson Johnson Embers), Lenexa, Kan.

**John Henderson**, commissioning agent, AccuTec Services, Inc., Lee's Summit, Mo.



Liberty Hospital, a comprehensive medical center about 20 minutes north of downtown Kansas City, was built in 1974. As numerous construction projects took place over the years, the original plant facility was expanded incrementally. However, in 2009 hospital leaders determined that additional space was needed for a heart and vascular project, and that a major plant facilities infrastructure construction and relocation was required.

The challenge was to construct a new boiler building and bring the new plant online in a phased sequence while maintaining steam service without prolonged interruption. Because the

facility operated on all four of its existing boilers during peak winter conditions, it was necessary to keep the existing system in operation as long as possible while the new plant was built. Electrical, plumbing, and structure changes also needed to be accomplished, and the plan was to keep MEP equipment operational while the new equipment was installed.

“The project team knew we had a difficult project when the initial scope was to over build the existing utility plant to create a new cardiology addition, while keeping all systems operational,” said Richard Johnson, principal at Pulse Design Group.





“This resulted in a seasonal sequencing of building and systems to keep the hospital operational through the 18 months of construction. The committed efforts of the owner, design, and construction management teams resulted in a successful project.”

Because of the complexity of the construction sequence, mechanical and electrical contractors were pre-selected for bidding and the contractor hosted several pre-bid meetings to discuss the process. The owner directly purchased all major equipment to expedite equipment procurement, and purchase orders were then assigned to the appropriate contractors. Because the

equipment was already approved, contractors had all the information they needed to begin coordination and modeling following the award of contracts. From the onset of the design, all team members were committed to staying involved. That allowed the process to move smoothly, and potential concerns and opportunities for saving time and money could be identified early.

The project, completed in 2011, created an additional 42,000 square feet in space and brought the hospital space covered by the power plant to 549,000 square feet. The hospital reports that its new equipment is much more

efficient than the aged equipment. Previously, under severe weather conditions the boiler plant was operating at 250 bhp. This past winter, with the new system in place plus an additional 42,000 square feet online, the building was still operating at 250 bhp. Similar patterns were seen with the new chiller plant.

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