Rebekah G. Gladson, FAIA, DBIA – ANSER ADVISORY Fadi Nassar, MBA, DBIA – ANSER ADVISORY

Progressive Design Build



Progressive Design Build

Briefing

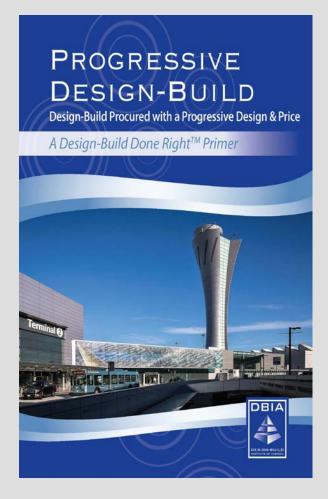
Webinar

OVERVIEW

- Progressive Design Build delivery
 - Process Framework
 - Two Examples
 - Design Build Project Delivery with Program and Design Criteria
 - Design Build Project Delivery without Program and Design Criteria
 - Importance of Design Build Team Qualification
- Overview of Processes/Procedures/Tools use with one Public & Private Client
- Best Practice
- Lessons Learned

DBIA PRIMER: PROGRESSIVE DESIGN BUILD

- Presentation utilizes concepts and principles of National DBIA Primer
- Progressive Design Build "Done Right"
- DBIA Primer Available online
- Strongly Recommend Reading



PROJECT DELIVERY DEFINED

Comprehensive Process:

- Planning, design, construction & other services necessary for organizing, executing and completing a project
- Three Fundamental Owner Decisions:

What Project Delivery System (Method)?

What Procurement Method? What Contract Format?

Planning the "Acquisition Strategy" + Design Process Options

PROJECT DELIVERY METHOD

- Establishes when the parties engaged in a contract,
- Influences the choices for contractual relationship among the parties,
- Influences the programming and design process,
- Influences ownership and impact of changes and modification of project cost & schedule.



GENERAL DESIGN BUILD PROCUREMENT METHODS

Fixed Price Design Build – (Often Design Competition)

- Performance Based
 - Programming
 - Criteria
- Bridging/ Prescriptive
- Progressive Design Build



- GMP (Possible to converted to Lump Sum)
- Cost Plus Fee

FIXED PRICE VS PROGRESSIVE

Fixed Price

- Known cost at time of selection
 - Cost may be to a pre-established maximum allowable cost (MAC)
- Involvement of Design Builder during development of design
- Benefit of multiple design solution and innovation
- Owner must define program and design criteria to minimal level
- Cost significant factor in selection
- Significant investment by DB Teams in selection process
- Stipend is required

FIXED PRICE VS PROGRESSIVE (cont'd)

Progressive

- Final Cost established after selection of DB Team
 - Target Value Design budget may be established prior to selection
 - GMP or Lump Sum
 - Need to clearly define components of GMP or Lump Sum
- Involvement of Design Builder during the development of design
- Lower cost of procurement (Specifically A&E)
- Open book on cost estimating
- Cost is not as significant of a factor in selection

FIXED PRICE VS PROGRESSIVE SIMILARITIES & DIFFERENCES

FIXED PRICE DESIGN-BUILD

Known Cost at time of selection,

Involvement of Design Builder during development of design – Limited Owner Input

Benefit of multiple design solution and innovation through competition

Owner must define program and design criteria to minimal level

Cost significant factor in selection

Significant investment by DB Teams in selection process

PROGRESSIVE DESIGN-BUILD

Final Cost after selection of DB Team, Open book on cost estimating

Involvement of Design Builder during the development of design

Owner involved in the design solution options during concept stage

Design-Builder is engaged at the preliminary planning level

Cost is not as significant of a factor in selection (Some Owners see this as negative)

Lower cost of procurement (Specifically A&E)



PROCUREMENT & CONTRACTUAL RELATIONSHIPS

- Relationship between owner, design professionals, contractors
- Responsibility of each party
- Liability of each party
- What this means to owners
- Design, cost and schedule



CONTRACT FORMAT

- Lump Sum/Firm Fixed Price
- Cost Reimbursable
 - Cost Plus Fee
 - Guaranteed Maximum Price (GMP)
- Target Price
- Unit Price



DESIGN BUILD CONTRACTUAL RELATIONSHIP

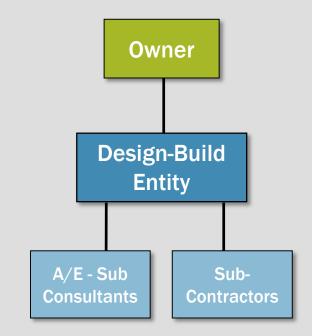
Characteristics

- Integrated process-overlapped design & construction
- Often fast tracked
- Two prime players:
 Owner & Design Build entity
- Entity can take on many forms
- One contract
 - Owner to Design Builder

Responsibilities

- Owner Program, design direction, performance requirements, & finance*
- Design-Builder Design & Construction. Can include programming & post construction services

Note: D-B can expand services to include programming, finance, operate, etc.



BUT....HOW TO GET WHAT YOU WANT IN DESIGN BUILD

- Design and Cost
 - Level of design in the RFP
 - Shifting risk
 - Who controls the "details" of the design?
 - Design management
 - Best without "Bridging Documents"
- Selecting your Team
 - Prequalification
- Management & Decision Making
- Risk Strategies
 - Owner Requirements



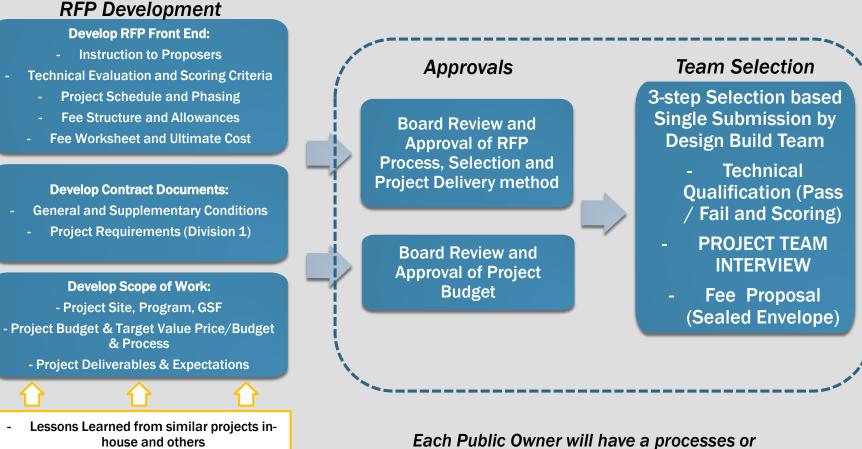
SINGLE MOST IMPORTANT DISTINCTION



Public Project Private Project

PROGRESSIVE Design Build

PUBLIC PROCESS SUMMARY



- Peer / Subject Matter / Counsel Input
 - Stakeholders, Facilities Input
 - Industry Outreach and Input

Each Public Owner will have a processes or guidelines for Approvals & Team Selection. Adapt process to Owner requirements.

PRIVATE PROCESS SUMMARY

Develop RFP Front End:

- Instruction to Proposers
- Technical Evaluation and Scoring Criteria
 - Project Schedule and Phasing
 - Fee Structure and Allowances
 - Fee Worksheet and Ultimate Cost

Develop Contract Documents:

- General and Supplementary Conditions
- Project Requirements (Division 1)



- Peer / Subject Matter / Counsel Input
 - Stakeholders, Facilities Input
 - Industry Outreach and Input

Board Review and Approval of RFP Process, Selection and Project Delivery method

> Board Review and Approval of Project Budget

3-step Selection based Single Submission by Design Build Team

Technical
 Qualification (Pass
 / Fail and Scoring)

- PROJECT TEAM INTERVIEW

Fee Proposal
 (Sealed Envelope)

2 STEPS POST SELECTION

Step 1

- Validation of Program
- Alignment of Scope and Budget
- Development of Basis of Design (May be provided by Owner)
- Development of Design to Specified Level (Design Development, 50%, 60%...)
- Development of GMP or

Step 2 **OFF RAMP if Owner & Design Builder cannot Align**

- Completion of Design & Construction Documents
- Construction & Commissioning
- Inspection
- All Close-Out & Transition Processes & Requirements

PROJECT ROADMAP (ASSUMING PROGRESSIVE DESIGN BUILD CONTRACT MODEL)

KEY PHASES & MILESTONES (Per present level of Information)

PROJECT DELIVERY STRATEGY	D B T E A M P R O P O S A L (July 20 – Aug 22)	D B T E A M S E L E C T I O N Design-Build Contractor Architect / Engineer of Record (Aug 22 – Sept 9)		PROGRAMMING DESIGN (Oct '18 – Apr '19	& CONSTRUCTION	LICENSING & OCCUPANCY (June '23 – Nov '23)
(Julie 0 July 13)	(July 20 - Aug 22)	(Aug 22 Sept 5)	(500010)		(may 15 may 25)	(50110 25 1107 25)
6 WEEKS	4 WEEKS	2.5 WEEKS	4 WEEKS	6 MONTHS	4 YEARS PHASE II	6 MONTHS
PROGRAM / RFP	PROCUREMENT & PROPOSAL SUBMISSION	SELECTION / AWARD	MOBILIZATION / SITE PLANNING / OSHPD	PROGRAMMING, SCHEMATICS, DESIGN DEVELOPMENT, 25% CDs	COMPLETION OF DOCUMENTS AND CONSTRUCTION	EQUIP & MOVE-IN
 * Preliminary Program Definition * Establish Preliminary * Target Value Budget – ("TVB") * Develop RFP & Selection Criteria * Identify User Groups / Decision Makers * Develop DB Contract * Identify Minimum of 3 Teams to send RFQ/ RFP 	* Qualifications * Pre-Con Fee - % of TVB * Design Fee - % of TVB (Include all typical sub consultants, including MedEquip & IT) * DB Fee - % * Litigation / Claims * Pre Proposal Mtg * New Hospital Site Visit	* Review & Evaluate Proposals * Check References * Interviews * Potential Reference Site Visits * Contract Negotiations * Contract Award	* DB Team Mobilization * Kick-Off w/ Hospital Team * Establish Project Goals * Site Zoning & Planning Studies & Decisions * Prel Meeting(s) with OSHPD * Develop Project Design Schedule * Environmental CEQA Planning * Re-Confirmation of DB-Team	* Program Development * Schematic Design * Validate Target Valued Budget * Partial Construction Drawings (25%) (CD) * Negotiate COA w/ OSHPD* * Identify/Bid Key DB Sub contractors for Design Assist * Selection of IOR * Intense User Group Meetings * Re-Confirmation of DB Team * Negotiate GMP	 * Complete CDs * Early OSHPD Permits * Limited Develop cGMP w/ Cost of Work, Escalation, Contingencies (Owner Controlled), GCs, GR, Med Equip, etc. (Fee was part of proposal) * Complete Sub Contractor Selection/Procurement * Procure Med Equip * Commissioning * Staff & Stock * OSHPD CO * Licensing Consultation * Transition Planning * Procure FF&E 	 * Transition * Implementation * FF&E Installation Equipment * Installation * Licensing * Hospital Move/ Opening

Durations shown in Road Map will require expedited decision making

- If No Make-Ready Work, Schedule could be Shortened
- OSHPD is Still "Wild Card" At This Time and will require development of a COA or agreed to schedule of review
- Soil Remediation Some Boring May Be Required

*Completion of Construction Documents will overlap with Construction. This is a critical part of OSHPD Conditions of Approval (COA).



HOSPITAL PROJECT ROADMAP (ASSUMING PROGRESSIVE DESIGN BUILD CONTRACT MODEL)

DRAFT 2

KEY PHASES & MILESTONES (Per present level of Information)

PROJECT DELIVERY STRATEGY	DB TEAM PROPOSAL & SELECTION Design Build Contractor + Architect / Engineer of Record	DESIGN & 25% CONSTDOCS	CONSTRUCTION DOCS & CONSTRUCTION	L I C E N S I N G & O C C U P A N C Y
(June – July)	DEVELOP PROJECT GOALS & PROGRAM (July – Sept)	(Oct '18 – May '19)	(June '19 – May '23)	(June '23 – Nov '23)
6 WEEKS PROGRAM / RFP * Preliminary Program Definition * Establish Preliminary * Target Value Budget – ("TVB") * Develop RFP & Selection Criteria * Identify User Groups / Decision Makers * Develop DB Contract * Identify Minimum of 3 Teams to send RFQ/ RFP	2.25 MONTHS (July 23 – Aug 22) DB TEAM PROPOSAL SUBMITAL * Qualifications * Pre- Con Fee % of * Design Fee - % of TVB TVB (Include typical * DB Fee - % sub consultants, w/ * Litigation / Claims IT) * Pre Proposal Mtg (Aug 15 – Sept 15) PROGRAM DEVELOPMENT (Separate Architect) * Kick-Off w/ Hospital Team * Establish Project Goals * Space, Functional & Operational Program * Align Program Scope with TVB (Aug 22 – Sept 6) DB TEAM SELECT/AWARD * Review & Evaluate Proposals * Check References * Interviews (9/4&5 Tentative) * Potential Reference Site Visits (Sept 6 – Sept 22 DB TEAM CONTRACT AWARD * Contract Negoti		S YEARS & 10 MONTHS PHASE 2 COMPLETE DOCS & CONSTRUCTION * Notice to Proceed to DB Team * Complete CDs * Early OSHPD Permits * Limited Develop cGMP w/ Cost of Work, Escalation, Contingencies (Owner Controlled), GCs, GR, Med Equip, etc. (Fee was part of proposal) * Complete Sub Contractor Selection/ Procurement * Procure Med Equip * Commissioning * Staff & Stock * OSHPD CO * Licensing Consultation * Transition Planning * Procure FF&E	6 MONTHS EQUIP & MOVE-IN * Transition * Implementation * FF&E Installation Equipment * Installation * Licensing * Hospital Move/ Opening

* Contract Award

* Bonds & Insurances

- OSHPD is Still "Wild Card" At This Time and will require development of a COA or agreed to schedule of review
- Soil Remediation Final Determination, Additional Boring May Be Required
- Completion of Construction Documents will overlap with Construction. This is a critical part of OSHPD Conditions of Approval (COA) Plan.
- Durations shown in Road Map will require Expedited Decision
 Making

 Phase 2 Notice to Proceed does not occur without a Negotiated GMP

BEST PRACTICE

TIMING OF SUB-CONTRACTOR INVOLVEMENT

Engage Key sub-contractors from the start

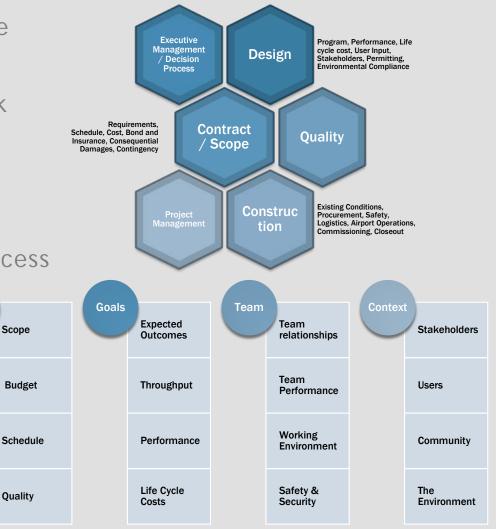
- Identifying key sub-contractor trades depend on type of project.
- When Possible, engage major sub-contractors during the procurement RFQ/RFP process of the Design-Build Team
- Ensure key subs are engaged prior to completion of 60% design documents (100% DDs – 50% CDs depending on project type)
- Provides truly integrated design development and best outcome of the Progressive DB Process
 - Higher level of innovation to meet desired performance
 - Better cost control to attain Target Value Budget
 - Lower Risk for unknown/unbought scope with early participate in design assist or design effort

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BEST PRACTICE: COLLABORATIVE 360 DEGREE RISK MANAGEMENT

Metrics

- Transparent and Collaborative Risk Identification
- Proactive and Continuous Risk Assessment
- Timely and Measurable Risk Mitigation
- Informed Decision Making Process
- Best Practice Tools
- Integrated Workflows
- Decision Making
- Communications



ACTIVE OWNER INVOLVEMENT BEST PRACTICE: COMMUNICATION

- Include Design Builder in Communications
 - Meetings
 - Emails, Letters, Etc...
- Transparency
 - Design, Budget, Operations, Financial Goals & Commitments all Parties
 - Talk About MONEY
- Who / How Commitments to Owner
 - Respect who has the financial responsibility
 - Don't Team with those you do not like and/or trust
- Isolation is a Problem
 - Physical separation... lets the mind ...



ACTIVE OWNER INVOLVEMENT BEST PRACTICE: MORE COMMUNICATION

- Engage in Informal Conversation
 - **Coffee, Water Cooler, Parking Lot...**
 - Change the Scenery
- Confirmation Documents
 - Importance of Document Control and Written Communication
 - Confirm commitments (Confirming RFI's, Timely Decisions, Agreements...)
 - Don't hide behind Email
- Work Sessions vs Meetings
 - Strategic Group side for better efficiency
 - Decision Makers in the Room
 - Meeting Size a Challenge on large jobs with complex stakeholder structure

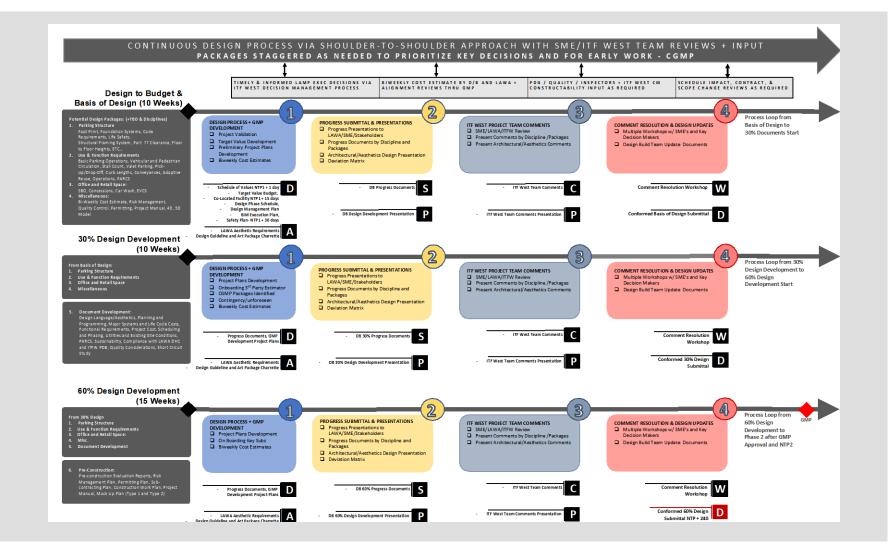


ACTIVE OWNER INVOLVEMENT BEST PRACTICE TOOLS

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Decision Making Matrix

COLLABORATIVE DESIGN MANAGEMENT PROGRESSIVE DB PROCESS EXAMPLE



LESSONS LEARNED

LESSONS LEARNED

- Assess appropriateness of Project Definition Documents for Project & Owner
- Understand Procurement Limitations
- Co-Location Project
 Management Office
- Maintain momentum after Major Owner Decisions
- Streamline Workflows to Accommodate Leadership schedules
- Engage Building & Safety upfront and pitch innovations early to ensure compliance
- It's never too early to innovate or engage stakeholders, industry experts and subcontractors

- Develop trust early
- Transparency
- Collaborative Risk management Strategy
- Consider Risk Sharing
- True understanding of Design to Budget requirements.
- Adopt processes/ procedures & tools as a team
- Ensure Executive decisions and agreements are conveyed to the whole team
- DB must have strong Cost Estimator
- Early decision on Subcontractor procurement/role/involvement
- Can TEAM (People) TRUST

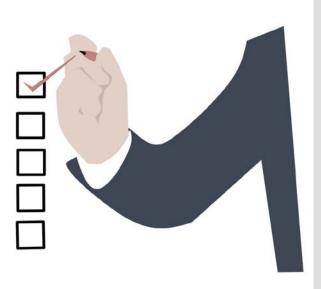
TOP CRITICAL SUCCESS FACTORS

Owner Factors:

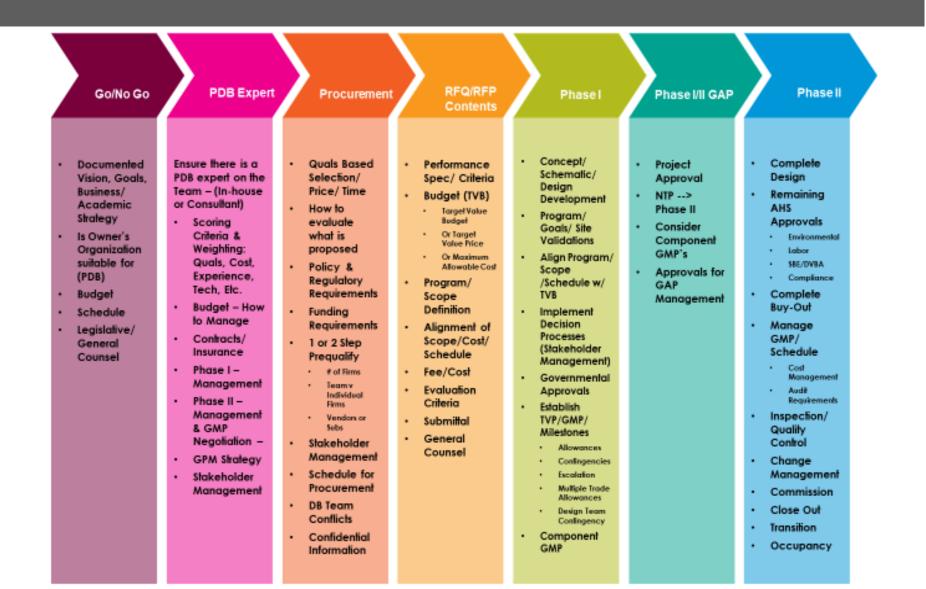
- **1**. OWNER center leadership
- 2. Complete program requirements & design decisions
- **3.** Program change policy
- 4. Director's leadership role in design, budget and schedule management
- 5. Clear project governance structure and mechanism; clear locus of authority

Project Management Factors:

- **1**. Design-Build experience and knowledge
- 2. Partnerships Pre-qualifications
- **3.** Applied lessons learned
- 4. Utilize technology
- 5. Early selection of equipment
- 6. Budget and schedule management (including realistic alignment with scope expectations)



WPR DBIA PROGRESSIVE DESIGN BUILD



DISCUSSION