

Request for Qualifications

Construction Manager at Risk

Project Owner: Regional Medical Center

Project Name: Surgical Services Addition & Radiology Renovation

Project Location: 709 West Main Street, Manchester, IA 52057

Delivery Method: Construction Manager at Risk (CMaR)

RFQ Issuance: August 2, 2024

Questions Deadline: August 9, 2024

Qualifications Deadline: August 16, 2024, 2:00 PM CST

Public Opening of RFQ: August 16, 2024, 2:00 PM CST at Regional Medical Center, Huber Board Room

A. History & Background

Since 1950, Regional Medical Center (RMC) has been committed to area communities, providing quality, personalized care to patients. As a public, not-for-profit, 501(c)(3) 25-bed Critical Access Hospital, the revenues go back into the operation of the hospital, enhancing and expanding upon the facilities and staff available to care for patients. Regional Medical Center's service area reaches seven counties and has approximately 23,000+ in population.

In early 2024, RMC and INVISION Architecture engaged in a process to evaluate the existing conditions of the existing Surgical & Imaging Services and developed a comprehensive solution to meet the long-term goals of each department.

B. Executive Summary

Regional Medical Center (RMC) is seeking statements of qualification for Construction Manager at Risk (CMaR). The request for qualifications is part of a competitive selection process to engage a CMaR firm to provide services for the construction of an addition to the hospital and an interior renovation of the existing hospital.

RMC has engaged INVISION Architecture to provide professional services to lead the planning and design of the addition and renovation.

C. Project Overview

The project includes new construction and renovation.

The plan includes an approximately 18,500 square feet, one-story addition and partial basement for Surgical Services located on the north end of the hospital campus.

The renovation area includes approximately 5,000 square feet on the first floor of the hospital for Imaging Services.

Sitework will include the expansion of the existing parking lot on the northwest corner of the hospital campus.

D. Scope of Services

The CMaR along with the Owner, Architect and Engineering teams will be a critical member of the project team, providing services prior to the start of construction through final acceptance and project closeout. The CMaR services are outlined below for pre-construction, construction, and post construction.

I. PRE-CONSTRUCTION PHASE SERVICES

The Construction Manager at Risk (CMaR) will provide preconstruction phase service for the project. The CmaR will assign a team to the project who will be the same team that will be assigned during the construction phase to work cooperatively with the Owner and the A/E team. The CMaR team will be responsible for performing the following duties including, but not limited to, cost estimating, value management, constructability review, scheduling, and preconstruction planning throughout the preconstruction phase. The CMaR shall provide recommendations about accelerated or fast-track scheduling, procurement, and phased construction. The CMaR will be brought on to the team midway through the Schematic Design phase.

During the development of the drawings and specification, partially completed documents shall be provided to the CMaR for pricing check points.

Cost estimation will be required at the following stages of the project:

1. At completion of the Schematic Design phase to manage scope and cost against budget
2. At completion of the Design Development phase to manage scope and cost against budget.
3. At the point established for Guaranteed Maximum Price (GMP), after the Design Development phase is complete. See additional information that follows.
4. Prior to the release of bidding documents as a last check prior to bidding.

The CMaR shall submit to the Owner and A/E their proposed Guaranteed Maximum Price (GMP) and its qualification and assumptions based upon the documents. The Owner, A/E, and CMaR shall meet to reconcile and questions, discrepancies, or disagreements relating to the GMP and the qualification and assumptions. The project will be an "open-book", including, but not limited to, bids on all trade packages, general conditions, and fees. The CMaR shall then submit to the Owner, for approval, the CMaR's proposed final GMP based upon the documents including the approved qualification and assumptions. Contingent upon the Owner's approval for the final GMP, the parties will execute an amendment to the CmaR agreement establishing the GMP.

II. BIDDING PHASE SERVICES

The CMaR will establish and implement procedures for the bidding process including the development of bid packages, distribution of bid documents, the issuance of addenda, the holding of pre-bid conference, the receipt of bid, and the bidding schedule. The CMaR shall adhere to Iowa statutes regarding qualification, selection, and award of contract for public work. Reference Iowa Senate File 183 directly in addition to other public bidding laws.

The CMaR will identify potential contractors and suppliers, develop their interest in bidding on the project to ensure a competitive bidding environment, and determine their ability to meet project requirements.

The CMaR will develop a construction schedule that meets the needs of the Owner for inclusion in the contract documents. The CMaR, in consultation with the Owner and Architect, will schedule, organize, and conduct pre-bid conference in a manner consistent with the bid schedule.

III. CONSTRUCTION PHASE SERVICES

The CmaR shall construct the project pursuant to the construction documents and in accordance with the schedule requirements. The CMaR shall hold all subcontract and shall be fully responsible for the means and methods of construction, project safety, project completion within the schedule agreed upon in the preconstruction phase, compliance with all applicable laws and regulations including monitoring compliance with all diversity participation, equal employment, and prevailing wage requirements, and submitting monthly reports of these activated to the Owner.

IV. POST-CONSTRUCTION PHASE SERVICES

The CMaR shall collect all as-built drawings from vendors and consultants and approved by the Architect. The CMaR will also collect and categorize all warranty and maintenance manuals, certify all vendor bills after collecting all documents, prepare the completion certificate based on all documents and drawings, and assist in submitting all occupancy documents to relevant governing bodies. The CMaR will also assist in facilitating/requiring training sessions for appropriate employees regarding the operation and maintenance of technical equipment, provide follow-up and call back services for the duration of the longest warranty period covered by a contractor on the project and conduct a post-occupancy walk-through appropriately times to address project issues prior to expiration of applicable warranties.

E. Anticipated CMAr Selection Schedule

Public Notice of RFQ	July 18, 2024
Issuance of RFQ	August 2, 2024
RFQ Questions Due	August 9, 2024
Qualification Statements Due	August 16, 2024, 2:00 PM CST
Public Opening of RFQ submissions	August 16, 2024, 2:00 PM CST
RFQ Results Announced	August 22, 2024*
RFP Issued to Qualified Candidates	August 23, 2024*
Mandatory CMAr Site Walk	August 29, 2024*
RFP Reponses Due	September 9, 2024, 2:00 CST*
Selection Committee Interviews	September 16 & 17, 2024*
Notification of Selected CMAr Selection	September 24, 2024*

*Subject to change

F. Anticipated Costs

The anticipate cost for Construction is \$18M. The total cost of the project is estimated at \$26.5M.

G. Proposed Project Schedule

Schematic Design	complete approx. November 1, 2024
Design Development	complete approx. January 17, 2025
GMP Pricing	February 17 – March 14, 2025
Construction Documents for Bidding	complete approx. April 11, 2025
Bidding	May 2025
Construction	June 2025 – December 2026

H. Qualification Content

To facilitate the review of the anticipated responses, each candidate firm shall submit its information electronically in PDF format. It must be submitted by email, or a secure document transfer site. Document formatting shall be standard letter size, 8 ½" x 11" pages. The proposal shall not exceed 20 total sheets (cover, cover letter, table of contents, and page headers excluded from the quantity). All content pages shall be consecutively numbered. The submitted response shall address the following specific criteria and present the information in the order identified below.

Section 1.0 – Firm Profile and Background

1. Firm – Inditify the firm's name and the address of its principal office and any branch offices, and a brief history of the firm. If the firm has more than one office, specify which office will be responsible for the completed project (the "Contact Office").

2. Organization – Specify the type of organization (partnership, corporation or other) and the year established. State the number of years the firm has been involved in ongoing work in the vicinity of the project.
3. Volume – Provide a statement indicating the annual volume of completed healthcare construction in the last five years as well as present and projected work. Indicate the specific extent of the Contact Office's involvement (prime contractor, joint venture partner, subcontractor, other).
4. Values – Provide a description of the firm's core values, philosophy, and mission statement.

Section 2.0 – Project Experience, Qualifications, and References

- A. Applicable Project List – Provide the following information for a minimum of five (5) healthcare projects completed by the Contact Office that are similar in size and scope to the proposed project. Please include the following information for each project separately.
- B. Include the following information:
 1. Building name and address.
 2. Building Owner and Architect, contact names and telephone numbers
 3. Project type and size.
 4. Scope of service performed on the project, including any pre-construction services,
 5. List original construction contract cost and final project cost. Describe key cost management challenges and how you dealt with them.
 6. Construction duration and date of completion. Indicate key scheduling challenges and how they were overcome.
 7. Indicate the names of your Project Manager and Superintendent.
 8. Indicate what percentage of the work was accomplished with your own force and in what trades. Note that retention of all trades will follow qualification and bidding requirements under Iowa Code Ch. 26A. Self-performance of work by the CMaR is allowable under Iowa law in certain circumstances.

Section 3.0 – Insurance & Litigation

- A. Indicate your insurance coverage limits.
- B. Provide your current and historic (3 prior years) general liability insurance cost on a cost / \$ thousand basis.
- C. Litigation – Provide a list of any litigation filed by or against the company in the last ten years and state the nature and outcome of the litigation.

Section 4.0 – Project Team

- A. List specific personnel proposed for the project team. Provide a narrative or organization chart to indicate the project assignment, role, or area of responsibility of everyone.
- B. Provide a resume for each proposed team member listing years of experience, relevant experience and qualifications. Also state the current assignment and commitments for the proposed personnel. Include a reference.

Section 5.0 – Management Process

- A. How will your team ensure that the project will remain on schedule?
- B. Describe your communication plan with the Project Team. How will your communication plan ensure timely responses to issues as they arise during preconstruction and during construction?
- C. Indicate how you will assure the Owner that the proposed team members will dedicate the proper amount of time to this project and will not be reassigned to another project.
- D. Indicate a response plan and timeline for urgent Owner project situations.
- E. Describe your Safety Record & Internal Safety Program.

Section 6.0 – Differentiation

- A. Specifically indicate how your firms experience, approach, or process differentiates your firm from other CMaR firms.
- B. Indicate why you are interested in this project and have the motivation to provide exceptional service.
- C. How will your firm encourage participation by local subcontractors and suppliers?

I. Selection Criteria

Selection of the successful CMaR firm will be made based on:

1. Responsiveness to this RFQ including completeness of the requested information.
2. Rating of Qualification content by a group of representatives selected by Regional Medical Center.
3. CMaR scoring in the top 60% of the RFQ criteria applied to a weighted matrix will be considered to receive the subsequent proposal.

This RFQ sets forth the intent of Regional Medical Center as to the procedure and criteria by which the construction management firm will be offered the opportunity to respond to the addition and renovation RFP.

Except as required by statute, Regional Medical Center reserves the right, in its sole discretion, to modify this procedure and criteria to select a short list of potential candidates.

Regional Medical Center reserves the right, in its sole discretion, to have any candidate firm clarify or supplement its submittal, including make such request through direct contact with the Candidate firm. RMC may hold discussions with individual firms to explore further the firms statement of qualifications. Any attempt to influence any member of RMC regarding this RFQ prior to the selection will be grounds for disqualification.

J. Submission Instructions

Please submit one (1) electronic copy via email or secure file transfer to the addresses listed below by the deadline stated. Electronic submittals must be combined into one PDF file. Please keep submission under 20 mb.

The subject line in the email & file name should be **RMC RFQ CMAr Submission – Firm Name** to ensure that the submission is clearly identified upon receipt.

Kristina Mehmen, Architect
INVISION Architecture
kristinam@invisionarch.com

Jeremy Meyer, Facilities Manager
RMC
jmeyer@regmedctr.org

K. Other Instructions

Candidate firms are not to rely on any oral instructions or answers. Questions shall be submitted prior to the Questions Deadline outlined above. Questions may be submitted by email in writing to Kristina Mehmen, AIA, ACHA at the above email address.

Any questions will be collected, responded to, and issued by Addendum after the Questions Deadline. Oral responses affecting the information provided by the Candidate firm in its submittal will not be binding on Regional Medical Center, its employees, agents, or representatives.

1. The hospital campus is open to the public, access to the interior of the building is not permitted.
2. RMC reserves the right to reject any or all RFQ responses and to exercise its discretion and apply its judgement with respect to any aspect of this request and the evaluation of responses. The construction management firms whose submittals are not accepted will be notified.
3. By submission of a RFQ response, Consultant agrees to preserve the confidentiality of information of the Owner used by the consultant or to which it shall be granted access for purposes of preparing the response or in performance of work pursuant to any selection resulting from the response. Such

information regarding the Owner shall be protected from disclosure by the consultant and access thereto, limited to the consultant or those having a need therefore in performance of services to the Owner. Such information may not be disclosed to any other persons, or entities whatsoever without prior written consent of the Owner or unless such information shall become generally available, without fault of the consultant.

4. RMC assumes no responsibility, and no liability, for costs incurred in the preparation or submission of any RFQ response.
5. If provided by the Owner, any provided documents are complimentary. They are provided for use in preparing a response for the requested service only. RMC cannot guarantee their accuracy.

L. Attachments

1. Selection Criteria Weighted Matrix Scorecard
2. Draft Site Plan

Selection Criteria

% of Score Weight

RFQ	Section 1.0	Firm Profile and Background	10%	1
RFQ	Section 2.0	Project Experience, Qualifications, and References	30%	3
RFQ	Section 3.0	Insurance & Litigation	10%	1
RFQ	Section 4.0	Project Team	15%	1.5
RFQ	Section 5.0	Management Process	20%	2
RFQ	Section 6.0	Differentiation	15%	1.5
			100%	
RFP	Section 5.0	Management Process - additional information	10%	2
RFP	Section 6.0	Differentiation - additional information	10%	1
RFP	Section 7.0	Bonding Requirements	10%	1
RFP	Section 8.0	Construction Schedule	15%	1.5
RFP	Section 9.0	Construction Budget	15%	1.5
RFP	Section 10.0	Fees		
		Preconstruction Services	10%	1
		Construction Services	30%	3
Total Weighted Score			100%	

Interview

Top 2 scoring firms from the RFP will have the opportunity to interview

Total after interview

