

## 2.0 Project Team Overview

### 2.1 Client Information

The Washington County Regional Medical center is owned by Washington County Health Systems (WCHS), a non-profit organization, accredited by the Joint Commission on the Accreditation of Healthcare Organizations. WCHS is building the new medical center because the old hospital is becoming obsolete and the old site provides no room for expansion. The old technologies and facilities make it hard to keep up with the ever evolving healthcare world. Also the region that the hospital serves is rapidly expanding and the old hospital can not handle the growth without an expansion. The new medical center is allowing WCHS the opportunity to expand to a regional trauma unit, a goal that they look forward to achieving.

The medical center has always had a mission of delivering quality healthcare in a safe manor as demonstrated in the following quote from their website:

“....offering spaces and amenities just for patients and their families, focusing on quality and safety, and bringing advanced medical technology to our region.”

Source: <http://www.washingtoncountyhospital.com/news/pdfdb/Case%20Statement.pdf>

WCHS expects to be occupying the new medical center in early 2011. They are excited to attain regional medical center status and are anxious to operate as a regional trauma center. The new medical center will also allow for an easy flow of inpatient and outpatient procedures between the existing Robinwood Medical Center and the medical center.

### 2.2 Project Delivery System and Contracts

The delivery system chosen for The Washington County Regional Medical Center was a Construction Manager (CM) @ Risk approach. This approach was taken because of the nature of the relationship between Gilbane and WCHS. They began negotiating the contract as soon as the decision to build a new hospital in Hagerstown was made. The architect, M&CA, was also chosen very early on negotiated terms and conditions. M&CA was chosen because of their extensive work and expertise in the healthcare facility market. The contract between them and the owner is a percent fee type. This gives M&CA a percentage of the costs of the project. M&CA also has arrangements with several design consultants; however, the contract details could not be released. The CM @ Risk approach and the contract types between all parties is very appropriate for this type of job and this type of owner. These factors should allow for a smooth successful project.

A lump sum contract was chosen for the subcontracting roles. These were hard bid packages released to qualified subcontractors. The low bid was then used for the guaranteed maximum price (GMP) contract between the CM and the owner.

### 2.3 Project Team Organization Structure

The organizational structure, as shown below in Figure 2.1, establishes all the personnel that the CM has staffed on the project. All staff personnel are onsite. The project manager, general superintendent, and two of the project engineers will see the project from start to finish. The other project staff will spend their full time on the project when their specific contractors are completing their work.

Figure 2.1: CM Organizational Chart

