Contact: Jean Friedrich

REGISTER OF UNIVERSITY OF IOWA CAPITAL IMPROVEMENT BUSINESS TRANSACTIONS

Actions Requested: Consider:

- The following actions for the Iowa Memorial Union Remodel/Enhancement/Deferred Maintenance project, the Proton Beam Therapy System Installation in Center of Excellence in Image-Guided Radiation Therapy project, and the Cardiovascular Intensive Care Unit Renovation and Expansion project, major capital projects as defined by Board policy.
 - a. Acknowledge receipt of the University's initial submission of information to address the Board's capital project evaluation criteria (see Attachment A [lowa Memorial Union – Remodel/Enhancement/Deferred Mai`ntenance project], Attachment B [Proton Beam Therapy System Installation in Center of Excellence in Image-Guided Radiation Therapy project], and Attachment C [Cardiovascular Intensive Care Unit Renovation and Expansion project];
 - b. Accept the Board Office recommendation that the projects meet the necessary criteria for Board consideration; and
 - c. Authorize permission to proceed with project planning, including the selection of Rohrbach Associates for the Iowa Memorial Union – Remodel/Enhancement/Deferred Maintenance project and Heery International for the Cardiovascular Intensive Care Unit Renovation and Expansion project, and the consultant selection process for other identified projects.
- 2. Receive an oral report on the University's short and long term plans to address student housing needs and authorize permission to proceed with project planning, including the consultant selection process, for the University Housing Construct New Residence Hall project, a major capital improvement, which meets the necessary criteria for Board consideration. (See Attachment D for information to address the Board's capital project evaluation criteria.)
- 3. Authorize permission to proceed with project planning, including the consultant selection process, for the **Parking Ramps & Lots Expansion of Commuter Lot 75** project.
- 4. Approve schematic designs and project descriptions and budgets for the Clinical Cancer Center and Infusion Therapy Suite project (\$12,225,000) and the AirCare Hangar Replacement project (\$1,995,000).

Executive Summary: The University requests permission to proceed with project planning for five projects. The **lowa Memorial Union – Remodel/Enhancement/Deferred Maintenance** project would renovate and enhance portions of the upper floors of the lowa Memorial Union (IMU) and address accumulated deferred maintenance issues. (See Attachment E for map showing the location of the Union.) The project would be undertaken in conjunction with the

IMU flood mitigation and recovery project. The University also requests of the selection of Rohrbach Associates as the architect for the project.

The estimated total project cost of \$25 million would be funded through Iowa Memorial Union Earnings, Improvement and Extension, and Bond Funds; General Education Fund Building Renewal: and Treasurer's Temporary Investment Income.

The Proton Beam Therapy System Installation in Center of Excellence in Image-Guided Radiation Therapy project would provide for the renovation of space in Pomerantz Family Pavilion to permit installation and operation of lowa's first proton beam radiation therapy system in the Center of Excellence in Image-Guided Therapy. This center is an essential component of the University's National Cancer Institute - designated Holden Comprehensive Cancer Center. The proton beam therapy system would be used to treat pediatric and adult patients inflicted with certain types of cancer.

Renovation of the space is estimated to cost \$5 million, and the projected cost of the proton therapy system is \$20 million for a total estimated project cost of \$25 million. The project would be funded through University Hospitals Building Usage Funds, Hospital Revenue Bond proceeds and gift funds.

The Cardiovascular Intensive Care Unit Renovation and Expansion project would provide for the renovation and expansion of the Cardiovascular Intensive Care Unit (CVICU) located on the fourth level of the John Colloton Pavilion. The total area to be renovated is approximately 23,000 gross square feet. Included in this renovation is approximately 11,300 gross square feet of space currently occupied by the Medical Cardiology inpatient unit. The functions of this unit would be incorporated as step down services in the expanded CVICU.

The estimated project cost of \$7.5 million, exclusive of furniture and equipment, would be funded through University Hospitals Building Usage Funds. The University requests the selection of Heery International to provide design services for the project.

The **University Housing – Construct New Residence Hall** project would construct a new residence hall to support increasing undergraduate enrollments and long-term development needs for on-campus student housing. A new facility, which would house between 250 and 400 students, would be located within the west campus residence hall district. This would be the first of a two phase project to increase on-campus bed capacity by as many as 800 beds. (See Attachment F for map showing the proposed locations.)

The preliminary estimated cost of the new residence hall of \$20 million to \$32 million is based on the costs of recent projects at other universities. As the design is advanced, more precise cost estimates would be established. The source of funds for the project would be Dormitory System Revenue Bonds.

In conjunction with this agenda item, the University will provide an oral report at the Board meeting that addresses this additional new student housing in two phases and the more

immediate steps being taken over the course of the next three years to ease the burden of housing demand and promote living-learning communities for undergraduate students.

The **Parking Ramps & Lots – Expansion of Commuter Lot 75** project would expand the 406 space Arena Commuter Lot (Lot 75) by approximately 300 to 350 spaces. The lot is located due south of Carver Hawkeye Arena along the south side of Hawkins Drive. The area of expansion is the former Grant Field site (intercollegiate field hockey), directly south of the present lot (see Attachment G for map). The estimated total project cost of \$2.5 million would be funded through Parking Improvement and Extension funds.

The University requests approval of the schematic design and project description and budget (\$12,225,000) for the Clinical Cancer Center Clinic and Infusion Therapy Suite Development project. The schematic design booklet is included with the Board's agenda materials. The project provides for the finishing of approximately 63,000 gross square feet of shell space on the first and second levels of the west addition to the Pomerantz Family Pavilion to develop a replacement ambulatory care clinic, infusion therapy and clinical support facilities for the Holden Comprehensive Cancer Center. The project would be funded by Hospital Revenue Bonds, Pomerantz Family Pavilion Fund and University Hospitals Building Usage Funds.

The University requests approval of the schematic design and project description and budget (\$1,995,000) for the **AirCare Hangar Replacement** project. The schematic design booklet is included with the Board's agenda materials. The project provides for development of a replacement maintenance hangar and helipad north of the lowa City Municipal Airport for the UIHC AirCare emergency helicopter service. With development of land surrounding the hangar's current location at the University's Research campus, the helipad needed to be relocated to meet Federal Aviation Administration requirements for unobstructed and safe landings and take-offs.

Details of Projects:

Iowa Memorial Union - Remodel/Enhancement/Deferred Maintenance

Project Summary

	<u>Amount</u>	<u>Date</u>	Board Action
Permission to Proceed		June 2010	Requested
Initial Review and Consideration of Capital Project Evaluation Criteria		June 2010	Requested
Selection of Design Professional (Rohrbach Associates, Iowa City, IA)		June 2010	Requested

The project to renovate and enhance portions of the upper floors of the lowa Memorial Union (IMU) and address accumulated deferred maintenance issues would create a new corridor

system on the first floor to connect the Hubbard Commons on the east side of the building to the River Room dining area on the west. A non-traditional Instructional Technology Center would be developed in the southeast corner of the first level to provide informal seating arrangements, computer use areas and a semi-enclosed glassed area for student study. Offices on the first floor would be renovated to accommodate the Dean of Students, the Office of Student Life, and IMU administration. The renovation/enhancement program on the second floor would expand the Student Organization Office Suite to accommodate additional student organizations, Student Legal Services Offices, and a conference room.

This project would be accomplished in conjunction with and would be complementary to the flood mitigation and recovery project in IMU. The flood related project will restore the basement and ground floors to pre-flood conditions. The mitigation/recovery project addresses modifications to the site and facility to alleviate the impact of future flooding on the building. The University proposes to take this opportunity to address deferred maintenance and renovation/enhancement work on the upper floors of the IMU in a companion project.

To gain efficiencies, and to assure compatibility, and design and phasing coordination between the two projects, the University requests that the architectural selection process be waived and that the flood mitigation and recovery architect of record, Rohrbach Associates, be selected for the project.

Proton Beam Therapy System Installation in Center of Excellence in Image-Guided Radiation Therapy

Project Summary

	<u>Amount</u>	<u>Date</u>	Board Action
Permission to Proceed		June 2010	Requested
Initial Review and Consideration of Capital		June 2010	Requested
Project Evaluation Criteria			

This project would renovate approximately 4,000 gross square feet of space in the Pomerantz Family Pavilion to permit installation of the first proton beam radiation therapy system in lowa at the University of Iowa Hospitals and Clinics. In the past, centers providing proton beam therapy have required large scale facilities with multiple treatment and support rooms, with costs exceeding \$120 million. Recent advances in system technology have significantly reduced costs.

The absence of a proton beam radiation therapy system in the state of lowa requires patients to travel out-of-state to receive this advanced form of cancer treatment.

Cardiovascular Intensive Care Unit Renovation and Expansion

Project Summary

	<u>Amount</u>	<u>Date</u>	Board Action
Permission to Proceed		June 2010	Requested
Initial Review and Consideration of Capital		June 2010	Requested
Project Evaluation Criteria			
Selection of Design Professional		June 2010	Requested
Heery International (Iowa City, IA)			

This project would renovate and expand the Cardiovascular Intensive Care Unit (CVICU) located on the fourth level of John Colloton Pavilion.

At the present time, patients with a cardiovascular or thoracic disease and requiring intensive care services are either admitted to the CVICU if they have a medical diagnosis or to the Surgical Intensive Care Unit after completion of surgery. The CVICU, which opened in 1985 and is UIHC's oldest intensive care unit, does not meet contemporary air handling requirements nor present day standards for the size of patient rooms. The renovated unit will permit the consolidation of all cardiothoracic ICU patients, both medical and surgical, in a single inpatient unit and in a manner that eliminates the need to transfer the patient to a separate room or inpatient unit once he/she no longer require intensive care services. The completed unit will have a 24-bed Cardiovascular Intensive/Intermediate Care Unit designed to meet contemporary codes and standards for providing intensive care.

UIHC requests approval to waive provisions of the Board's <u>Policy Manual</u> that require the selection of an architectural firm by an institutional Architectural Selection Committee for projects of \$1 million or more, and requests approval for the selection of Heery International, lowa City, lowa to provide design services for the project.

Heery was selected in 2008 to provide master planning assistance for UIHC to develop a children's hospital, critical care bed expansion and renovation of existing patient pavilions as part of UIHC's Strategic Facilities Master Plan. As a part of the master plan, Heery developed multiple studies, looking at ways to renovate patient floors to develop single patient universal bed units.

University Housing – Construct New Residence Hall Project Summary

	<u>Amount</u>	<u>Date</u>	Board Action
Permission to Proceed		June 2010	Requested
Initial Review and Consideration of Capital		June 2010	Requested
Project Evaluation Criteria			

This new construction project would be the first of a two phase project to increase on-campus bed capacity by as many as 800 beds.

The University is committed to house the first year class in the residence halls. To accomplish this within the current housing capacity (approximately 5,600 beds), the University must limit the number of returning students who can reside in the halls. This project would allow University Housing to increase the capacity of the residence halls, thus providing more space for first year and returning students who choose to live in the halls.

Specific siting of the new residence hall will be determined during the early design phases. The University currently believes that the best site for the Phase 1 project is in an area near the Hillcrest Residence Hall, which provides food service to the west campus residence halls. The University indicates that this dining facility has capacity for as many as 400 additional residents.

Parking Ramps & Lots – Expansion of Commuter Lot 75

Project Summary

Permission to Proceed	<u>Amount</u>	<u>Date</u> June 2010	Board Action Requested
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This project was planned in anticipation of a significant loss of parking spaces at the Finkbine Commuter lot due to the planned construction of the new West Campus Energy Plant.

The project to expand the 406 space Arena Commuter Lot (Lot 75) by approximately 300 to 350 spaces includes re-grading of the site, utility relocations, new parking lot lighting, new Portland cement concrete paving, new fencing and landscaping. The construction of a new access drive from the west would accommodate Cambus traffic and normal vehicular traffic.

The proposed site is within walking distance of the UIHC and other west campus destinations and would serve athletic events, graduation ceremonies, concerts and other events held at Carver Hawkeye Arena and Kinnick Stadium.

University Hospitals and Clinics – Clinical Cancer Center Clinic and Infusion Therapy Suite

Project Summary

Permission to Proceed Initial Review and Consideration of Capital Project Evaluation Criteria	<u>Amount</u>	<u>Date</u> June 2007 June 2007	Board Action Approved Approved
Selection of Design Professional (Heery International, Iowa City)	\$ 746,000	Oct. 2007	Not Required*
Program Statement		Feb. 2010	Not Required*
Revised Design Professional Agreement (Heery International, Iowa City)	655,817	March 2010	Not Required*,**
Schematic Design Project Description and Budget Final Review and Consideration of Capital	12,225,000	June 2010 June 2010 June 2010	Requested Requested Requested
Project Evaluation Criteria			

^{*}Approved by Executive Director, consistent with Board policies

The John and Mary Pappajohn Clinical Cancer Center Ambulatory Care Clinic, a component of the National Cancer Institute (NCI) designated Holden Comprehensive Cancer Center, became operational on the fourth level of the Pappajohn Pavilion in 1993. Over the past ten years, clinic visits have increased by over 34%, and, over the past 5 years, the number of infusion therapy procedures has increased by over 31%.

The project, which will finish 62,762 gross square feet of shell space on the first and second levels of the west addition to the Pomerantz Family Pavilion (PFP), also includes a healing garden for cancer patients. Since approval of the program, an additional 6,862 gross square feet (5,622 net square feet) on the far west side of level 1 has been added to the program. This space will be finished to accommodate all clinical research staff in one location, close to the clinic.

	Program	Schematic
	February 2010	May 2010
Total Net Assignable SF	29,278	34,900
Anticipated Gross SF	55,900	62,792
Anticipated Net-to-Gross Ration	52%	55%

A new pedestrian link will be constructed to allow for a more direct pedestrian connection from the east side of Pomerantz to the west. It will be constructed on top of the existing canopy on the north side of PFP, which serves as a drop off for patients and for valet parking. The link will be constructed from a simple steel tube structure attached to the concrete wall of the existing canopy. The exterior shell of the link will be clad with aluminum curtain wall, using

^{**}Replaces 2007 agreement

both tinted insulated vision glass as well as insulated spandrel glass. Spandrel glass will be used at the lower and upper portions of the link to block vision of the link structure from the outside. The curtain wall and glass will complement the existing aluminum glazing systems on the adjacent facades.

Windows on the north and west elevations of the west addition will be enlarged to provide more light and enhance the views of the Healing Garden. This will be beneficial to this area as evidence based design has proven that views of nature and access to daylight increase patient satisfaction and reduce pain in patients.

Final capital project criteria are included as Attachment H.

Construction is scheduled to commence in the fall of 2010. All construction is scheduled to be completed October 2011.

Project Budget

Construction	\$9,400,000
Design, Inspection and Administration	1,885,000
Project Contingency	940,000
TOTAL	<u>\$12,225,000</u>

Source of Funds: UIHC Revenue Bonds

Pomerantz Family Pavilion Funds

University Hospitals Building Usage Funds

AirCare Hangar Replacement

Project Summary

	<u>Amount</u>	<u>Date</u>	Board Action
Selection of Design Professional (ASK Studio, Des Moines)	\$ 137,428	March 2010	Not Required*
Program Statement Final Review and Consideration of Capital Project Evaluation Criteria		March 2010 June 2010	Not Required* Requested
Project Description and Budget Schematic Design	\$1,995,000	June 2010 June 2010	Requested Requested

^{*}Approved by Executive Director, consistent with Board policies

The project would provide for development of a replacement maintenance hangar and helipad for University of Iowa Hospital and Clinics' AirCare emergency helicopter service; these functions are currently housed at the Research Campus.

The Board approved the purchase of property located at the North Airport Development Subdivision Part Two in Iowa City, Iowa, from the City of Iowa City in August 2009 as the site for the new facility.

Since approval of the program statement, the pilot sleeping quarters has been designed as a storm safe room. The added wall thicknesses necessary to make this room storm safe resulted in a minor square footage increase (80 gross square feet, 54 net assignable square feet).

	Program	Schematic
	March 2010	May 2010
Total Net Assignable SF	6,179	6,233
Anticipated Gross SF	6,523	6,603
Anticipated Net-to-Gross Ration	94%	94%

Functions to be housed in this hangar, which will be a pre-engineered metal building, include helicopter maintenance and weather protected storage space for three helicopters, maintenance and building support rooms and office and sleeping quarters for AirCare pilots. Exterior to the new hangar will be fuel storage, helipad and parking facilities.

Final capital project criteria are included in Attachment I.

Project Budget

Construction	\$1,560,000
Professional Fees	255,000
Planning and Supervision	60,000
Project Contingency	120,000
TOTAL	<u>\$1,995,000</u>

Source of Funds: Income from Treasurer's Temporary Investments

University Hospitals Building Usage Funds

UIHC Revenue Bonds

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Iowa Memorial Union – Remodel/Enhancement/Deferred Maintenance <u>Evaluation Criteria</u>

<u>Fulfillment of Mission and Strategic Plan</u>: The Iowa Memorial Union (IMU) is the traditional center of student life. It is an essential out-of-classroom learning laboratory for a myriad of experiential learning activities with emphasis on the development of leadership skills. It accommodates meetings ranging in size from just a handful to over a thousand people. Meeting rooms are made available to faculty, staff, and students for interdepartmental and interdisciplinary gatherings that promote a vibrant intellectual campus atmosphere. Prior to the 2008 flood, over 3,000,000 people entered the IMU annually.

The IMU is a vital facility on the UI campus. It is often the place where the University makes its first impression on potential students, faculty and staff. It is also the place where current students come to study, plan and participate in experiential learning opportunities, meet with classmates, grab a bite to eat, and listen to lecturers and concerts. To bring the IMU up to the standard students, parents and other visitors expect, a major renovation is required. This project will also address accumulated deferred maintenance issues, improve energy efficiency of building systems, improve way-finding, create additional student spaces, and create more efficient and student-friendly office spaces.

The renovation is required to meet these needs and enhance the IMU's ability to serve University of lowa students, faculty, staff and visitors; serve as a recruitment tool for prospective students, faculty and staff; and remain the keystone connecting alumni and the community to the campus.

<u>Alternatives Explored</u>: No alternates were explored since the enhancement work involves organizational consolidation and circulation improvements.

<u>Abandoned/Transferred/Demolished Space</u>: No area will be abandoned, transferred or demolished as a result of this project. As part of the mitigation strategy, mechanical spaces on the Ground Floor will be repurposed for other uses.

<u>Available Financial Resources/Anticipated Source of Funds</u>: IMU Earnings, IMU Improvement & Extension funds, GEF Building Renewal, Treasurer's Temporary Investment income

<u>Available Operating and Maintenance Resources</u>: The source of funds to cover operation and maintenance costs will be from IMU operating revenue and from the General Education Fund, just as it is now.

External Forces Justifying Approval: It is important that students have intentional, relevant, and meaningful out-of-classroom experiences. Empirical research has found that students' involvement outside the classroom and students' environments (i.e., the campus student union) are central and essential in students' learning and development. The IMU is the "out-of-classroom laboratory." It is a place where students have the opportunity to apply what they have learned in the classroom to real life situations, have the chance to listen and be challenged by lecturers and peers, and have the ability to interact with their fellow students and faculty and staff.

Proton Beam Therapy System Installation in Center of Excellence in Image-Guided Radiation
Therapy
Evaluation Criteria

Fulfillment of Mission and Strategic Plan: The Holden Comprehensive Cancer Center is Iowa's tertiary and quaternary referral center for cancer patients. It is designated by the NCI as one of only 40 in the country having research, clinical trials and population based educational efforts. The Center of Excellence in Image-Guided Radiation Therapy (Radiation Therapy Center) is the radiation oncology component of the cancer center and is a recognized national leader in imagequided radiation treatment delivery, providing more than 19,000 treatments per year. The Radiation Therapy Center is the only radiation treatment facility in Iowa with both a 3T MR and respiratory gated CT/PET for treatment planning and is the only institution providing significant respiratory gated therapy and MR-quided brachytherapy. One of six strategic goals for UI Health Care is to provide world class healthcare, which is clearly supported by the proposal to initiate proton beam radiation therapy. Protons have unique physical properties that cannot be duplicated without specialized equipment and facilities that are only available in lowa at the Radiation Therapy Center. It is clear that significant numbers of academic centers have recognized the importance of these features and are investing in this technology. Due to the increasing number of proton beam therapy services throughout the country, lowa residents are beginning to leave the state to be treated with this technology. Without available services in lowa this is likely to continue at an increased rate. Hence providing proton therapy in the Center of Excellence in Image Guided Radiation Therapy is becoming an important element in meeting UI Health Care's goal to provide world class service for Iowans.

The potential of protons has not been fully realized as there are implications with their interactions that require more research into shaping and optimizing how they are administered to patients – specifically in regard to image-guidance. The Radiation Therapy Center's physicists have significant expertise and national prominence in the area of image-guidance and this group's research and clinical knowledge will enable them to advance the uses of proton therapy nationally and internationally. This is consistent with a second core strategic goal of UI Health Care, to "advance world class discovery through excellence and innovative biomedical research." Additionally, the financial viability for proton therapy is quite positive using business analysis and current reimbursement models. In fact, they have been positive where devices at substantially higher cost were installed. This supports a third UI Health Care core strategic goal, to "optimize a performance-driven business model that assures financial success." Finally, to be a premier educational institution implies that there is the ability to educate future physicians, physicists and staff in the best cancer care. This requires that such resources are available. This fulfills a fourth UI Health Care goal, to "develop world class health professionals and scientists through excellent, innovative and humanistic educational curricula for learners at every stage."

Hence, the project strongly and directly supports four of the six core goals in UI Health Care's strategic plan that are co-incident and supported in the cancer programs. The Holden Comprehensive Cancer Center and Center of Excellence in Image-Guided Therapy will both benefit from and contribute to the development of a world class proton therapy center for the State of lowa and the citizens of lowa will be the beneficiaries of a comprehensive spectrum of cost effective and accessible radiation therapy services

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<u>Alternatives Explored</u>: The main alternative is to not pursue proton therapy at this time. Because the development of a proton beam therapy service is likely to take approximately 3 years, not undertaking this initiative may lead to the Radiation Therapy Center falling behind other academic medical/cancer centers in its therapeutic offerings and have a negative impact on the Center's ability to continue in its leadership role in patient care, education and research consistent with its mission and role as an NCI-designated comprehensive cancer center. While delaying will likely not have immediate consequences it will ultimately result in more lowans not receiving the therapy that would be most effective for treating their cancer or they will have to travel to out of state centers to receive their therapy.

A second alternative would be to consider installation of a system that uses heavy ions as the tumor killing agent rather than protons. Such an installation now exists at a center in Heidelberg, Germany. These heavy particles may have similar, but some suggest preferred capabilities, to protons. These same units may also produce protons. Unfortunately, these heavy particle facilities are likely to cost on the order of \$250 million. No program in the country has currently committed to pursue this form of therapy. At the present time the use of heavy ion therapy is substantially less studied and more research oriented.

A third and final alternative would be to pursue a larger proton facility at an offsite location at a cost of \$120 million dollars or greater. While in many ways this is more proven technology (Harvard, MD Anderson, University of Florida, Loma Linda, University of Pennsylvania), a large patient base is required and it could prove to be less cost effective.

In conclusion, the single treatment room proton beam therapy system that is now being proposed is believed to be the most fiscally prudent method to ensure lowan's have ready access to this form of cancer therapy.

<u>Abandoned/Transferred/Demolished Space</u>: No space will be abandoned or demolished. The need to transfer space will be determined during project planning.

Available Financial Resources and Source of Funds: The project will be funded through University Hospitals Building Usage Funds acquired from depreciation allowances of third parties underwriting the cost of patient care plus hospital net earnings from paying patients. Additionally, hospital revenue bond proceeds and gift funds may be utilized. No state capital appropriated dollars will be involved. The estimated internal rate of return over the life of this project is 7%.

<u>Available Operating and Maintenance Resources</u>: The source of funds to cover the associated operating and maintenance costs of the new facilities will be University Hospital operating revenues derived from providing patient care services.

External Forces Justifying Approval: A detailed analysis of national trends shows a rapidly increasing number of proton therapy centers, especially those making use of the newer generation single-room systems. A similar trend is being seen in other countries. A challenge to the applicability of proton technology to prostate cancer was recently upheld by the Department of Health and Human Services, resulting in Medicare continuing to support the cost of the proton treatments. Because these facilities take significant time to plan and construct and because the market is rapidly embracing the single-room proton therapy systems which enable proton therapy

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to be available at regional centers, it is important that the University of Iowa establish the ability to deliver this treatment so that Iowa cancer patients continue to have the most advanced therapy available to treat their disease and to enable UI Health Care to fulfill its teaching and research missions.

Cardiovascular Intensive Care Unit Renovation and Expansion <u>Evaluation Criteria</u>

Fulfillment of Mission and Strategic Plan: Completion of this project will contribute to UI Hospitals and Clinics' efforts in meeting all elements of its tripartite mission. It will greatly enhance the UI Hospitals' capabilities for fulfilling its patient care mission by providing necessary space to generate future growth in patient admissions. The educational and research missions will also be enhanced through development of the necessary space to enable students, residents and fellows to gain clinical experience in accord with accrediting body standards; and by providing the type of facilities required to conduct innovative research directed toward more clinically efficacious diagnosis and treatment of disease. The project is also supportive of each of the six major goals that have been established in UI Health Care's Strategic Plan for FY 2010-2012 by providing the facilities that are required to assist UI Health Care's efforts 1) to provide world class healthcare services to optimize health for everyone, 2) to advance world class discovery through excellence and innovation in biomedical and health services research, 3) to develop world class health professionals and scientists through excellent, innovative and humanistic educational curricula for learners at every stage, 4) to foster a culture of excellence that values, engages and enables our workforce, 5) to create an environment of inclusion where individual differences are respected and all feel welcome, and 6) to optimize a performance-driven business model that assures financial success.

<u>Alternatives Explored</u>: Several alternatives were explored as a means to develop a combined medical and surgical cardiovascular intensive and intermediate care unit, including:

- Gaining intensive care beds by extending the current CVICU into existing rooms on the adjacent 4 JCW medical cardiology intermediate care unit. This alternative was determined not to be viable due to inadequacies in the size and design of the 4 JCW rooms and the fact that only half (6) of the current CVICU rooms are large enough to accommodate cardiovascular surgery patients.
- Combining the cardiovascular patients on the SICU. This alternative was ruled out due to the lack of sufficient beds to meet the need without impinging on the on-going need for beds to accommodate the surgical patient population. This location is also remote from other UI Heart and Vascular Center treatment units and services.
- 3. Constructing a new, ninth floor on John Pappajohn Pavilion to accommodate a consolidated medical-surgical CVICU patient population. This alternative was determined not to be practical due to its high cost and its location, as with the second alternate, would be remote from other UI Heart and Vascular Center treatment units and services.

Abandoned/Transferred/Demolished Space: This project will not result in the abandonment, transfer or demolition of existing facilities. The beds that become available in the Surgical Intensive Care Unit as the result of this project will be used to accommodate the present demand and planned for growth in surgical admissions for patients with neurological conditions, patients requiring transplantation of solid organs, other than heart or lung, and for other high acuity surgical patient populations.

<u>Available Financial Resources and Source of Funds</u>: The project will be funded through University Hospitals Building Usage Funds acquired from depreciation allowances of third parties underwriting the cost of patient care plus hospital net earnings from paying patients. No state capital appropriated dollars will be involved.

<u>Available Operating and Maintenance Resources</u>: The source of funds to cover the associated operating and maintenance costs will be hospital operating revenues derived from providing patient care services.

External Forces Justifying Approval: The renovation and expansion of this unit is an important element in enabling the UIHC to meet all components of its tripartite mission. Patient care will be enhanced through expanded facilities and the design of these facilities will be focused on providing a more comfortable and patient-friendly environment. The design will meet all building codes and standards, as well as the most recently published 2006 Edition of the Guidelines for Design and Construction of Hospital and Healthcare Facilities, published by the American Institute of Architects and the Facility Guidelines Institute, which recommend private patient rooms for new hospital construction. These guidelines are used by Iowa and 41 other states to regulate hospital licensing and construction; and, will also be used by Medicare and the Joint Commission to develop new regulations and standards. The design will also meet Health Insurance Portability and Accountability Act (HIPAA) requirements for patient privacy and confidentiality.

University Housing – Construct New Residence Hall <u>Evaluation Criteria</u>

<u>Fulfillment of Mission and Strategic Plan</u>: The mission of University Housing is to provide clean, safe and healthy housing and dining programs designed to meet the diverse developmental and educational needs of students living in a multicultural community. The University is committed to house the first year class in the residence halls. In order to do that within the current housing capacity, the University must limit the number of returning students to the halls. This project will allow University Housing to increase the capacity of the residence halls, thus providing more space for first year and returning students who choose to live in the residence halls and participate within living-learning communities.

Alternatives Explored: The University of Iowa has residence hall facilities that house approximately 5,600 students. Most of the facilities are clustered in two locations associated with major dining facilities: the West Campus near Hillcrest and the East Campus near Burge Hall. Other sites for residences not associated with dining facilities include the Mayflower Residence Hall on North Dubuque Street and the Parklawn Residence Hall at the corner of Park Road and Riverside Drive. In addition, there are approximately 600 apartment units organized in two neighborhoods which primarily serve families and graduate students on the Hawkeye Campus.

The UI Housing System has been at full capacity for more than a decade. The University has not constructed a new residence hall since 1968 - Slater Hall. (Note – the University did begin renting floors in the Mayflower "Apartments" in 1981 and bought the building in 1983.) This has created a stress on the availability of on-campus housing. In addition, the design of modern residence halls have advanced over time, and the University must advance to meet the housing desires of its students. To simply maintain the existing halls without construction of new and modernized spaces will impact UI efforts to recruit and retain top students and will be a hindrance in achieving UI student services goals.

In examining various siting options for the proposed residence hall, convenient access to food service facilities is critical. While there are sites that might effectively host a residence hall, few are adjacent to existing food service facilities. While the Burge dining facility is at full capacity, the Hillcrest dining facility has capacity for an additional 400 residents. In recent year the University has conducted two studies that concluded that the Hillcrest area could meet the housing needs as proposed in Phase 1 and likely Phase 2 as well. As the site is UI-owned, it will also allow immediate progress and a shorter period of time to occupation – an important factor given the growing enrollment pattern.

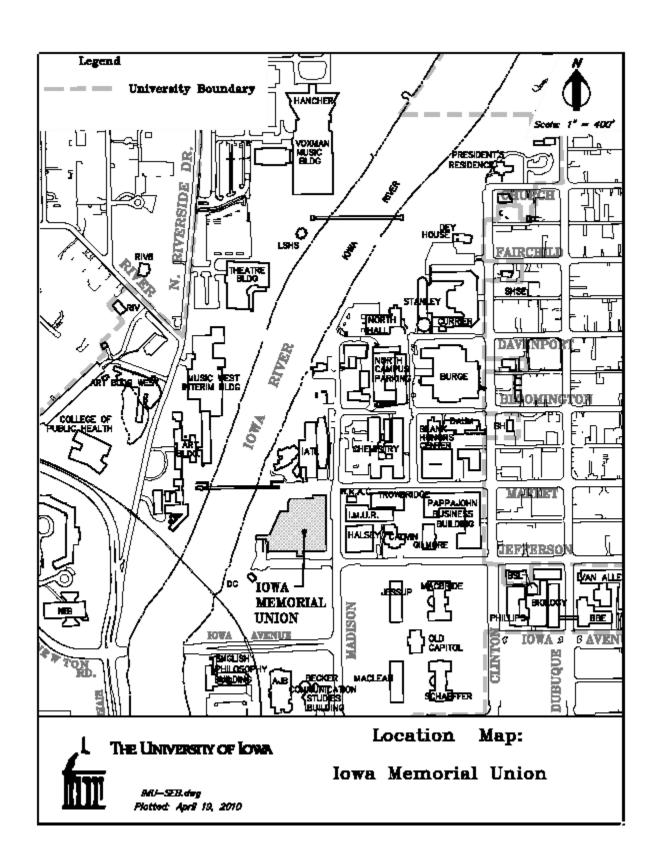
<u>Abandoned/Transferred/Demolished</u> Space: Any potential abandonment or demolition of existing space would be determined as part of the early phases of site and building design. The proposed Hillcrest area has a collection of newer (1960's) and older (pre-1940) residence halls, open space and surface parking. Initial studies indicate that a 250 to 400 bed residence hall would not require removal of existing space. However, specific placement will be determined by accounting for all site-related planning issues, and any potential demolitions would be reviewed with the Board during early planning.

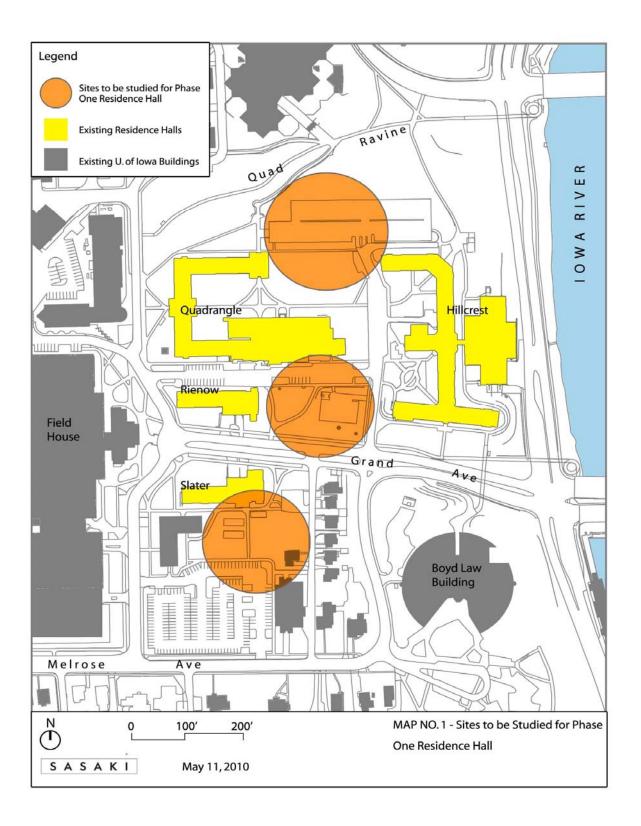
<u>Available Financial Resources/Anticipated Source of Funds</u>: Residence System Revenue Bonds

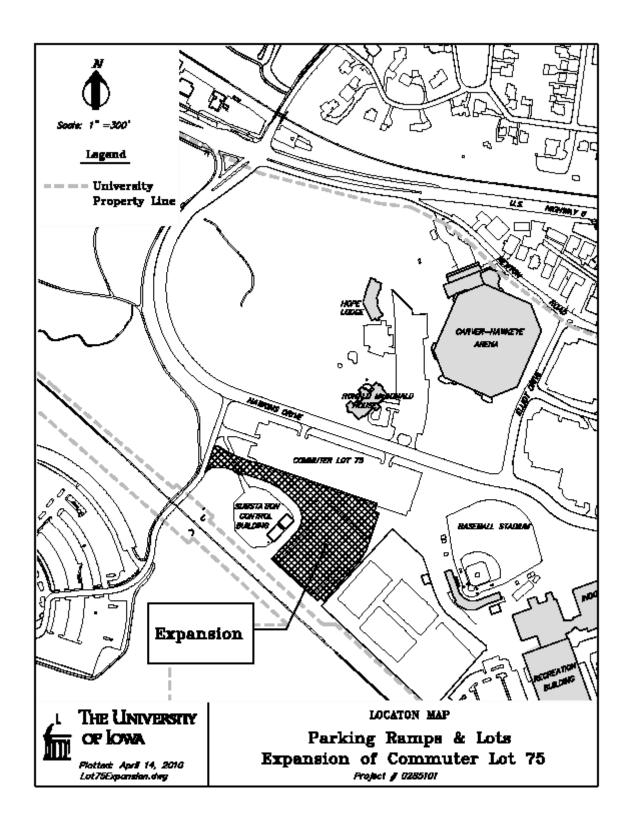
<u>Available Operating and Maintenance Resources</u>: Operating and maintenance funding, as is the case for all UI Housing facilities, will be provided by revenues generated by the Housing system. As the new residence hall will be built to current UI standards, including construction as a LEED-Silver (minimum) Certified building, energy savings as compared to others halls is expected.

External Forces Justifying Approval: The University proposes a phased approach for this development in order to address both short and long-term UI housing needs. In addition to the Phase 1 project, the University is now developing alternatives for housing the expected increase in students enrolling at the University over the next 2-3 years. These interim solutions may include use/lease agreements with local and proximate apartment owners, and potential use of portions of the Iowa House Hotel in the Iowa Memorial Union. The Iowa House would continue hotel operations and would be available to host important outside visitors; but, it could also be used to address a portion of the most pressing student housing needs before 2013. In addition to satisfying critical short-term housing needs, these interim options will also allow the UI to advance the benefits of living-learning communities, where students studying in a particular academic field can live together, sharing experiences and common interests.

The University has carefully examined the benefit of adding additional residence halls, and where these halls might be located to be of the greatest benefit to future UI students. Adding capacity will also allow existing halls to be taken partially off-line so that the halls can be modernized to meet student needs and demands.







Clinical Cancer Center Clinic and Infusion Therapy Suite Development <u>Evaluation Criteria</u>

Fulfillment of Mission and Strategic Plan: Completion of this project will be of significant benefit to the UIHC in meeting its patient care mission by providing space to assist in accommodating the continued growth in annual ambulatory clinic visits. As noted above, over the past decade these visits have increased by over 34% in the Clinical Cancer Center. UIHC's ambulatory care clinic visits are projected to grow by a comparable rate over the next 10 years. The UIHC's educational and research missions will also be enhanced through development of the necessary space to effectively teach and train students, residents and fellows in the art and science of providing compassionate patient care, and by providing the type of facilities required to conduct innovative research directed toward more clinically efficacious cancer diagnosis and treatment. The project also supports several of the UIHC's Strategic Plan goals, most notably identification of the Clinical Cancer Center as one of UIHC's clinical services that will be a leader in the state and national market by offering cutting edge clinical services, robust clinical research and strong training opportunities; by providing facilities that enhance a patientcentered experience; by providing design features required to streamline patient throughput and to improve the patient's healthcare experience; and, by providing a continuously improving, safe environment for all patients and staff at all times.

Alternatives Explored: In 2003, the UIHC engaged a national space planning and management consulting firm, Meaghan Jared Partners, Inc., to assist in determining the optimal plan for meeting the UIHC's needs for additional ambulatory care clinic and procedure unit space for several clinical services, including the Clinical Cancer Center clinic and infusion therapy service. After evaluating three possible sites to meet these needs, including space adjacent to the Clinical Cancer Center on the fourth level of the UIHC, shell space on either the third or fourth level of the Pomerantz Family Pavilion, and shell space that was then under construction as the West Addition to the Pomerantz Family Pavilion, it was ultimately decided that space be committed to the Clinical Cancer Center on the first and second levels of the West Addition. Not only will the level of space on these two floors meet the Clinical Cancer Center's needs, but its location directly above the Center of Excellence in Image-Guided Radiation Therapy will make it possible to serve all adult ambulatory cancer patients in one location. Relocating the Clinical Cancer Center from the fourth level of the Pappajohn Pavilion will also facilitate the expansion of two other clinical centers that are now located on the fourth level of the UIHC. The Center for Digestive Diseases, in Colloton Pavilion, and UI Heart and Vascular Center, in Carver Pavilion, will each be provided much needed expansion space on the fourth level after the Cancer Center has relocated. There are no other viable alternatives available that will as optimally meet the multiple objectives realized by undertaking this project.

Abandoned/Transferred/Demolished Space: As previously noted, on completion of this project the space presently occupied by the Clinical Cancer Center ambulatory care clinic, infusion therapy suite and research offices on the fourth level of the Pappajohn Pavilion will become available for reassignment. This space, which totals approximately 31,000 gross square feet, will be assigned in part to patient care and support functions associated with the Center for Digestive Diseases and UI Heart and Vascular Center to assist each of these multidisciplinary patient care services in meeting their needs for additional ambulatory care clinic and procedure unit space. The specific space allocations will be determined through future planning.

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<u>Available Financial Resources and Source of Funds</u>: The project will be funded through University Hospitals Building Usage Funds acquired from depreciation allowances of third parties underwriting the cost of patient care plus hospital net earnings from paying patients. Additionally, hospital gift funds and bond proceeds will be utilized. No state capital appropriated dollars will be involved.

<u>Available Operating and Maintenance Resources</u>: The source of funds to cover the associated operating and maintenance costs will be hospital operating revenues derived from providing patient care services.

<u>External Forces Justifying Approval</u>: The development of these facilities is a vital element in enabling the UIHC to meet all components of its tri-partite mission. As noted above, the UIHC continues to experience an increase in outpatient visits that have resulted in several clinical services now experiencing difficulties in providing timely patient services due to the lack of examination and treatment space. This project will provide the Clinical Cancer Center with the necessary space for it to meet the continued growth in patient service volume and to permit the offering of a more comprehensive array of clinical services and programs.

AirCare Hangar Replacement Evaluation Criteria

Since the project meets the Board's definition of a major capital project, the University has provided the following information in response to the Board's evaluation criteria.

<u>Fulfillment of Mission and Strategic Plan</u>: Completion of this project will contribute to UI Hospitals and Clinics' efforts in meeting its patient care mission. It will provide the necessary facilities to service and maintain the AirCare emergency helicopters and ensure they are ready and able to safely transport the sick or injured and the emergency flight personnel that care for these patients during their flight. The project also is supportive of several of the six major goals that have been established in UI Health Care's Strategic Plan for FY 2010 – 2012 by providing the facilities that are required to assist UI Health Care's efforts 1) to provide world class healthcare services to optimize health for everyone, and 2) to foster a culture of excellence that values, engages and enables our workforce.

<u>Alternatives Explored</u>: No options other than relocating the maintenance hangar to a site that meets Federal Aviation Administration requirements were available. The best available site that meets these requirements at a reasonable property cost and that is convenient to the UIHC is the site selected for this project.

<u>Abandoned/Transferred/Demolished Space</u>: On completion of this project, the existing AirCare hangar facility located on the Oakdale Campus will be demolished and the land used to meet other General University needs.

Available Financial Resources and Source of Funds: The project will be funded through a combination of income from UI Treasurer's Temporary Investments and University Hospitals Building Usage Funds. The latter are acquired from depreciation allowances of third parties underwriting the cost of patient care plus hospital net earnings from paying patients. Additionally, hospital revenue bond proceeds may also be utilized. No state capital appropriated dollars will be involved.

<u>Available Operating and Maintenance Resources</u>: The source of funds to cover the associated operating and maintenance costs of the hangar facilities will be University Hospital operating revenues derived from providing patient care services.

<u>External Forces Justifying Approval</u>: With the development of the land surrounding the Oakdale hangar and helipad, the AirCare helipad will no longer meet Federal Aviation Administration (FAA) requirements for unobstructed and safe landings and take-offs.