

# The MetroHealth System Board of Trustees

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## FACILITIES AND PLANNING COMMITTEE

January 24, 2024

12:30-2:00 p.m.

The Board Room K107 or Zoom (<https://us02web.zoom.us/j/89588680299>)

### Meeting Minutes

Committee Members Present: Inajo Chappell-I, Harry Walker, M.D.-I

Other Trustees Present: J.B. Silvers, Ph.D.-I

Staff: Aricia Steed, Ed.D.-I, James Bicak-I, Laura Black-I, Karen Dethloff-I, David Fiser-I, Joseph Frolic-R, Eileen Hayes-I, Derrick Hollings-I, William Lewis, M.D.-I, Ishmael Olusegun, M.D.-R, Brian Rentschler-I, Sonja Rajki-I, Tamiyka Rose-I, Greg Zucca-I

Ms. Chappell called the meeting to order at 12:30 p.m., in accordance with Section 339.02(K) of the Ohio Revised Code. Ms. Chappell noted that a quorum is present.

(The minutes are written in a format conforming to the printed meeting agenda for the convenience of correlation, recognizing that some of the items were discussed out of sequence.)

#### I. **Approval of Minutes**

The minutes of the November 20, 2023, Facilities and Planning Committee meeting were approved as submitted.

#### II. **Information Items**

##### ***Facilities Management Update – Karen Dethloff, Vice President, Facilities Management***

Ms. Dethloff presented an update on the Facilities Management major accomplishments since October. The Facilities team supported several department projects within the main campus facilities. Currently, the staff is working to prepare space in Bell Greve for relocation of the Heart and Vascular clinic. The new location is much closer to the entry and improves patient access. The Facilities team continues to work with design and construction professionals to address open issues in both the Glick Center and Behavioral Health Hospital buildings.

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Ms. Dethloff provided an update on year-end staffing and departmental metrics. Ms. Dethloff noted that there were 18 open positions as of year-end 2023. Ms. Chappell questioned the reason for such a high number of vacancies. Ms. Dethloff responded that some vacancies were due to staff retirements, a couple of employees moved out of state and one employee was terminated. The Facilities department completed over 130,000 work orders, 73% of which were preventative maintenance. The goal for 2024 is to get to 80% preventative maintenance and 20% for reactive and service work orders. As a result of the move to Glick and the on-going operations of the legacy buildings, the work orders for egress and fire extinguisher preventative maintenance (approximately 10% of the total work orders) were outsourced because of staffing issues. Ms. Dethloff noted that once the legacy buildings are demolished, staffing will align within the remaining buildings.

Ms. Dethloff provided an update on the system utility interruptions for all locations owned and leased in 2023. A majority of the interruptions were due to elevator malfunctions at buildings throughout the system. The elevator vendor was changed in February 2023 and has not been performing as expected. Facilities is working to have corrections made and is in the process of assessing the elevator issues to develop an improvement plan.

Ms. Dethloff provided an update on the facilities capital projects that were initiated in 2023. There were 132 major and minor projects valued at \$9,063,245. This is the largest number of capital projects, by volume, initiated in a single calendar year. These projects primarily address equipment and component failures due to wear and tear, age, and damage.

## ***Campus Transformation Status – Jim Bicak, SVP, Facilities, Construction and Campus Transformation***

Mr. Bicak provided a status update on the Campus Transformation (CT) 2.0 activities. The presentation began with an overview of the objectives which included: maximizing space in the Glick Center for clinical and educational functions; maintaining current main campus outpatient services and incorporating planned growth on campus; establishment of a new space model for clinical and non-clinical administrative functions; designation of Rammelkamp for research and academic functions; identification of additional ambulatory enabling projects that align with the growth strategy; improvement to patient, visitor and staff parking on the main campus; and identifying which of the legacy buildings on the main campus are to be re-used, and which are to be vacated and demolished.

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Mr. Bicak provided an update on the Campus Transformation (CT) 2.0 major initiatives. The interim parking plan was implemented as of January 18<sup>th</sup>. The patient/visitor parking was relocated to the Valentine Garage (P4). The employee parking was shifted to the View Garage (P2) and the Apex Garage (P1). The interim walkway for employees from the P1 garage to the temporary entry into Glick through the cafeteria was completed. Employees were receptive of the parking change.

Mr. Bicak gave an update on the Glick Center close-out. The helipad activation and emergency decontamination tank installation were completed. The installation of the morgue redundant compressor was completed with some testing work remaining. The warranty work to eliminate air pockets in the flooring throughout Glick and replacement of the counter at the pizza station in the cafeteria were completed. Installation of the smoke detectors at the smoke doors and the electrical room sprinklers have been completed. The installation of the 5<sup>th</sup> emergency power generator was completed. The final documentation and payment applications are projected to be completed in Q2 2024.

Mr. Bicak provided an update on Glick Center projects. The Blood & Bone Marrow Transplant Unit (BMT) will move from Floor 3E to the existing medicine unit on Floor 9W. The medicine beds will then be relocated to 3E, and the capacity of the unit will increase by 10 beds through use of the semi-private rooms. The Floor 9W BMT and Oncology unit will be a 19-bed closed unit with upgraded ventilation, patient support functions and family space. The schematic design was completed by LaBella Architect and Osborn Engineering, and schematic level pricing was received on January 18, 2024. The design development and construction documents phases are expected to take 12-14 weeks. In addition, modest renovations to the Burn Unit on 3E will support the existing program and family space.

Design of the Executive Administration offices within the Business Services (K&M Building) is completed. The contractor is completing pricing and construction planning. The projected completion date of this phase is May 2024. The furniture selection has been completed and orders will be placed with the manufacturer in early February. The design of the Town Hall phase of the project will begin in February. Options to utilize the space vacated on the 2<sup>nd</sup> floor of the Glick Center for teaching, Graduate Medical Education and clinical programs will be reviewed with Senior Management in February.

Mr. Bicak gave an update on the existing facility condition and engineering assessment of the legacy buildings. The scope of work includes all MetroHealth facilities five years old and older. The first phase of work is the analysis for the existing legacy buildings on the main campus. Work begins in February, and a draft report is expected from the consultant during Q2 of 2024. The proposed legacy building plan consists of keeping Rammelkamp and Bell Greve for Research, Education and GME. The Business Services Building will consist of Administration and Support Functions. The existing Outpatient

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Pavilion will consist of administrative offices and support functions. Ms. Chappell inquired about the completion date of the facilities assessment, asking if it will be completed by the end of Q2 2024. Ms. Dethloff replied that it will take approximately eight months to complete the full assessment of the main campus facilities. Mr. Bicak stated the intention is vacate and demolish Core A, Center Core, Tower B, Tower C, Hamann, South, Gannon and the original Power Plant.

Mr. Bicak then provided an update on the ambulatory enabling projects. The Renovation Projects completed in Q4 2023 and Q1 2024 consist of the following: Parma Surgical Clinic was completed October 6, 2023; Parma Cardiac Rehab was completed November 29, 2023; Parma OB/GYN and Pediatrics Clinic were completed January 15, 2024, and the Parma Internal Medicine and Medical Specialties are to be completed January 29, 2024. The close-out of Turner Construction Design/Build Contract is planned during February 2024.

The Design – Bid – Build Delivery method will be used for the remaining projects in 2024. The design for the Parma Heart & Vascular Clinic was approved by the stakeholders. The Parma Pain Management will be relocated to its former space with refresh plans to be developed. The design for the Parma Breast Center will need to be developed. The Beachwood Express Care is ready for permit and bidding. The Beachwood Pain Clinic & Medical Specialties redesign is near completion.

Mr. Bicak provided an update on the progress of the Outpatient Health Center (APEX). The second round of stakeholder reprogramming meetings was completed earlier in January. The first round of meetings began in early November and was completed in mid-December 2023. The basis for reprogramming and diagrammatic design are the patient volumes planned for 2024 with projected growth. The meeting process included twenty-four separate stakeholder groups comprised of providers, clinical staff, and support staff to validate the volumes and work with the design team on a revised conceptual design. The types and quantities of rooms were identified for each clinic and/or service, including exam space, procedure rooms, provider and staff workspace and support spaces. Ms. Chappell asked if the staff who will be working in the building have had the opportunity to provide input and be able to validate the concept. Mr. Bicak stated the participation and feedback of the caregivers has been excellent, and the design team has made modifications to incorporate the ideas that have been raised. The design team is completing the conceptual design this month and the contractor will provide an updated cost estimate and project schedule by the end of February.

Ms. Chappell asked what the next group of activities will be and when they are planned to be completed. Mr. Bicak responded by stating that depending on the size and complexity of the department, there will be two to three more rounds of design meetings with the stakeholder groups. The focus of those will be on incorporating all detail information such as electrical outlet and switch locations, location of plumbing fixtures,

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size and components of cabinetry and the locations of all equipment in each room and within the department. A complete inventory of current equipment will be done to determine what can be relocated, what needs to be replaced and what will need to be purchased new for the facility. At the conclusion of this process in May the stakeholder groups will approve the final plan. The stakeholder groups will then shift their focus from design and begin planning for the relocation and activation of operations within the new space. The consultant design team will then create the construction documents needed to obtain permits and for the contractor to provide final pricing and build the project.

Mr. Bicak noted the capacity and capability of the Outpatient Health Center (APEX) has been significantly enhanced through this process. The major changes include converting 64,000 square feet of administrative space included in the original 2019 design/build program into patient care space. The 42% increase in clinical space expands the number of exam rooms from 189 to 267 providing capacity for an additional 114,000 in-person clinic visits per year. The plan also includes 50% more oncology infusion bays than the original plan, and the number of procedure rooms has expanded from 1 to 11 providing greater capability and capacity for outpatient services. Revisions have been made to select exam, treatment, and patient toilets to accommodate persons of size. Designated provider and resident workspaces have also been developed. A receiving dock will be added to provide adequate support for this facility. With modifications to selected corridors, the building will comply with ambulatory occupancy code and will accommodate patient stretchers.

The 2024 Q1 priorities are as follows. Complete the design revision process for the Outpatient Health Center (APEX) and confirm the impact to the budget and schedule. Complete planning for the Conference Center in the Business Services Building and continue building upgrades and relocation of the support functions. Continue planning for the relocation of the Blood & Bone Marrow Transplant Unit in The Glick Center. Proceed with design for the next phase of Ambulatory Enabling Projects and prepare to issue bid request for construction work. Begin planning for campus open space concepts and future surface parking options.

Dr. Steed asked Mr. Bicak to briefly comment about the final location for physician offices not included in the original APEX design. Mr. Bicak confirmed space for these offices is a key element of the plan being developed for use of the legacy building. Dr. Steed also asked Mr. Bicak to comment on the re-envisioned concept for green space development on the main campus. Mr. Bicak stated the concept would involve the creation of a number of smaller green spaces around campus that would provide a variety of distinctive outdoor experiences. These "Pocket Parks" would be connected by pathways and a common landscape approach across the campus. The plan will also address patient/visitor access and parking needs. The immediate objectives for Campus Transformation are to finalize the schedules for Glick, the Outpatient Health Center,

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and the Ambulatory Enabling Projects. Further development of the green space concept will continue through Q1 and Q2 of this year.

The goal for Campus Transformation 2.0 is to complete the project within a two-year timeframe setting the stage for the next iteration of the facilities master plan. That plan will be developed to respond to the strategic planning process occurring this year. Ms. Chappell asked about the critical path for the current project. The committee needs to understand when the final cost estimate information will be available. The approval for additional funding will go through Finance, but the committee needs to have a sense of the timelines. Mr. Bicap noted the critical path goes through the Outpatient Health Center project and based on completion of the concept design process, a better cost estimate and project timelines will be reviewed at the next Board meeting. Dr. Steed stated a significant portion of the cost change is accounted for in budgets set aside for the original Campus Transformation 1.0. The price change for the Outpatient Health Center (APEX) is because it is a different design than originally conceived. Funds were also set aside for demolition of the legacy buildings. Some amount could be reallocated however, the entire process needs to be consolidated and repackaged.

Ms. Chappell thanked Mr. Bicap for his detailed report, the outline of the priorities and the timelines that were provided.

Mr. Silvers asked if the total cost within the formulation, will go beyond the original forecast by large or small amounts. Dr. Steed informed Mr. Silvers that we are trying to put a figure to the total cost of the project from the original forecast amount. The project within Apex has been revised and there are many components that were not incorporated in the original body of work. There has been a significant shift in clinical services and taking away administrative services that was originally conceptualized, this being a completely different project. Mr. Hollings added the total dollar amount in terms of going back to capital markets is being considered. The market was not ready to accept us until the completion of Glick and rates have changed significantly since 2017. MetroHealth is now receptive to returning to the market and wants to know how taxpayer dollars will be spent and how we might finance the work going forward. Dr. Steed added that this plan will have a big return on investment.

### III. Executive Session

Ms. Chappell stated that the next matters are topics that are hospital trade secrets as defined by ORC 1333.61 and asked for a motion to move into Executive Session to discuss these topics. Mr. Silvers made a motion to go into Executive Session which Dr. Walker seconded. Upon unanimous roll call vote, the Committee went into Executive Session to discuss such matters at 1:30 pm.

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Following Executive Session, the meeting reconvened in open session at 1:45 pm.

There being no further business to bring before the Committee, the meeting was adjourned at approximately 1:45 pm.

Respectfully submitted,

James Bicak  
Senior Vice President, Facilities, Construction and  
Campus Transformation