

## 7 keys to implement integrated project delivery (IPD) on healthcare projects

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In 2006, a group of healthcare stakeholders met at the University of California, Berkeley, to explore ways to improve the design and permitting processes for hospital projects in California and to address costs, which were spinning out of control for many hospital projects in the state.

Dr. Glenn Ballard, a professor at the Project Production Systems Laboratory (P2SL) at UC Berkeley, led the group, which included representatives from Kaiser Permanente, St. Joseph's Hospital, Sutter Health, Stanford Medical Center, the state's Office of Statewide Health Planning and Development (OSHPD), the design firm HGA, and construction firms Unger and DPR.

Ballard also did a study of the integrated delivery process on the Sutter Roseville Acute Rehabilitation Institute. Ballard and his design study team noted seven key elements used by the integrated team (beyond the five that HGA and Unger used on all the Sutter Roseville projects), as summarized here by HGA vice president Bonnie Walker, AIA:

- 1. Establish a baseline/project definition.** Do a feasibility study integrated with a detailed budget to provide the basis for understanding the project's scope, schedule, and budget.
- 2. Change the traditional relationships.** Include everyone who will affect the project from the very start and build those relationships.
- 3. Set a schedule.** Ensure that it is one that all team players will stick to. Set all appropriate meetings and get them on the calendar, then stick to the schedule.
- 4. Communicate clearly.** Use tools that communicate clearly the direction and intent of the project. Use room data sheets in design development to clearly articulate the needs of each space.
- 5. Target costing.** Do cost estimates during the design process to weigh the dollar impact of each decision.
- 6. When collaboration breaks down, build on it.** Breakdowns in understanding can provide opportunities for the team to resolve more underlying problems and thus optimize the project.
- 7. Be willing to say no to the owner.** Ask the client: Is the request a must-have or a want? If the former, what are you willing to give up? If the latter, are you willing to increase the budget?

As a result of its participation, OSHPD has made useful changes to its review processes. Instead of requiring designs to be submitted all at once, they can now be submitted and reviewed in phases as the design progresses. This helps catch and fix errors and omissions in the initial design process and significantly reduces plan review time for complicated healthcare projects.

Phased plan review was first used in the structural design of the \$496 million Palomar Medical Center in Escondido, an 11-story, 300-bed, 765,000-sf hospital that is scheduled to open in 2011.

For more on IPD and BIM, read BD+C's April 2009 feature "[BIM + IPD: Three Success Stories.](#)"