AGENDA ITEM 19a

MEMORANDUM

To: Board of Regents
From: Board Office
Subject: Register of University of Iowa Capital Improvement Business Transactions for Period of September 16, 2004, Through November 4, 2004
Date: December 1, 2004

Recommended Actions:

1. Take the following actions for the major capital projects, as defined by Board policy adopted in June 2003.

   a. West Campus Tennis-Recreation Center and Sports Activity Fields project (formerly Hawkeye Recreation/Athletic Facilities Complex, Phase 2—Tennis, Recreation and Sports Activity Fields project) (see pages 4 through 10).

      1. Acknowledge receipt of the University’s final submission of information to address the Board’s capital project evaluation criteria (pages 8 through 10);

      2. Accept the Board Office recommendation that the project meets the necessary criteria for Board consideration; and

      3. Approve the schematic design and project description and budget ($12,000,000) with the understanding that this approval will constitute final Board approval and authorization to proceed with construction.

   b. University Hospitals and Clinics—Nursing Clinical Education Center project (see pages 11 through 17).

      1. Acknowledge receipt of the University’s final submission of information to address the Board’s capital project evaluation criteria (pages 14 through 17);

      2. Accept the Board Office recommendation that the project meets the necessary criteria for Board consideration; and

      3. Approve the schematic design and project description and budget ($3,707,000) with the understanding that this approval will constitute final Board approval and authorization to proceed with construction.
c. **East Campus Recreation Center/Field House Renovation** project (see pages 20 and 21).

   1. Approve the selection of RDG, Inc., to provide design services for the project.

d. **University Hospitals and Clinics—Magnetic Resonance Imaging (MRI) Center Renovation and Systems Installation—Phase 2** project (see pages 22 through 23).

   1. Approve the architectural agreement with Durrant Architects, Dubuque, Iowa, in association with PDC Midwest, Hartland, Wisconsin ($246,000) to provide design services for the project.

e. **University Hospitals and Clinics—Ambulatory Surgery Center and Procedure Suite and Replacement Ambulatory Care Clinic Development** project (see pages 24 through 31).

   1. Acknowledge receipt of the University’s submission of information to address the Board’s capital project evaluation criteria for the expanded project scope (pages 27 through 31);

   2. Accept the Board Office recommendation that the project meets the necessary criteria for Board consideration; and

   3. Approve Amendment #1 ($375,000) to the architectural agreement with Herbert Lewis Kruse Blunck, Des Moines, Iowa.

2. Approve the remainder of the items on the Register of Capital Improvement Business Transactions for the University of Iowa.

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**Executive Summary:**

**Requested Approvals**  
Schematic design and project description and budget ($12,000,000) for the **West Campus Tennis-Recreation Center and Sports Activity Fields** project (formerly Hawkeye Recreation/Athletic Facilities Complex, Phase 2—Tennis, Recreation and Sports Activity Fields project); this major capital project would develop modern facilities to serve the needs of recreation, physical education instruction, and men's and women's intercollegiate athletics (see page 4).

- The schematic drawings are included with this memorandum in a separate booklet.
Schematic design and project description and budget ($3,707,000) for the **University Hospitals and Clinics—Nursing Clinical Education Center** project which would renovate space in the General Hospital to consolidate the College of Nursing Learning Resource Center and the UIHC Nursing Education Center (see page 11).

- The schematic drawing is included as Attachment B to this memorandum.

Project description and budget ($2,066,000) for the **Kinnick Stadium—Lot 43 Improvements** project which would reconstruct the parking area west of the stadium, and incorporate new parking spaces into the plaza area to be developed south of the stadium, to increase the parking capacity in these areas (see page 18).

Architectural selection of RDG, Inc., Des Moines, Iowa, to provide design services for the **East Campus Recreation Center/Field House Renovation** project which would construct an indoor recreation facility and renovate Field House recreation facilities to improve the University’s recreational offerings for students, faculty and staff (see page 20).

- The Master Plan for Student Services presented in September 2004 noted that an additional student building fee of approximately $165 per student per academic year in future years would be needed to support debt service payments for the project; the University also plans to implement a building operations and maintenance fee for the facility in future years of $44 per student per academic year.

Architectural agreement with Durrant Architects, Dubuque, Iowa, in association with PDC Midwest, Hartland, Wisconsin ($246,000) for the **University Hospitals and Clinics—Magnetic Resonance Imaging (MRI) Center Renovation and Systems Installation—Phase 2** project which would complete the renovation of the MRI Center to accommodate the installation of state-of-the-art MRI systems, improve the function of the Center’s support facilities, and upgrade building systems (see page 22).

Expanded project scope and architectural Amendment #1 with Herbert Lewis Kruse Blunck, Des Moines, Iowa ($375,000) for the **University Hospitals and Clinics—Ambulatory Surgery Center and Procedure Suite and Replacement Ambulatory Care Clinic Development** project which would finish space on the third and fourth floors of the Pomerantz Pavilion to consolidate the UIHC Ambulatory Surgery Center, surgical and ambulatory functions of the Department of Obstetrics and Gynecology, the Department of Dermatology, Internal Medicine Subspecialty Clinic, and Pulmonary Diagnostics procedure rooms and laboratories (see page 24).

**Background and Analysis:**
### Project Summary

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<tr>
<th>Permission to Proceed</th>
<th>May 2003</th>
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### Background

In September 2004, the Board received the University’s report on the Master Plan for Student Services which outlined the University’s plan for improved student service facilities. One of the components of the Plan is the **West Campus Tennis-Recreation Center and Sports Activity Fields** project, which would develop modern indoor and outdoor facilities to serve the needs of recreation, physical education instruction, and men’s and women’s intercollegiate teams for tennis and other sports on the far west campus.

The Master Plan report was provided in response to Board action in April 2004 when the University presented the Campus Recreation Facility Planning and the West Campus Master Plan, and its request for approval of the program statement for the project.

- At that time, the Board directed the University to return with a comprehensive recreation facility plan, to include development of an **AGENDA ITEM 19a**
east campus recreation facility, before a proposed west campus tennis/recreation project would be further considered. The Board also requested that the outdoor tennis courts be sited in a way that would not require removal of the existing Housing Services Building at the site.

Based on the September 2004 Master Plan report, the Board approved at that time the program statement for the **West Campus Tennis-Recreation Center and Sports Activity Fields** project.

- The program statement includes construction of a facility with eight indoor and 12 outdoor tennis courts; indoor recreation activity space for field activities and organized recreation and fitness classes; associated support space (locker rooms, restrooms, office and storage areas); and space to house the Touch the Earth Program, an outdoor recreation and education program of University Recreational Services. The project also includes the development of two outdoor sports activity fields to meet recreational and athletic needs for soccer, field hockey, and other outdoor sports; and parking areas.

**Site Plan**

The placement of the building at the site has been modified since presentation of the Master Plan in September 2004; the current plan still preserves the Housing Services building at the site (see the site maps included with the schematic drawings).

- The former Hawkeye Power Plant building (now a storage facility) located north of the Housing Services building will be demolished. (The demolition was approved by the Board in September 2002.)

The indoor facility would be constructed south and west of the Housing Services Building, parallel to Prairie Meadows Drive and north of the intersection with Hawkeye Drive. The 12 outdoor tennis courts would be located immediately north of the indoor facility and west of the Housing Services Building.

The main parking area (for 50 vehicles) for the Tennis-Recreation Center would be located to the south, and smaller parking areas would be located east of the outdoor tennis courts.

The two outdoor sports activity fields would be located southeast of the indoor facility near the existing Roy G. Karro Hall of Fame.

- The field hockey field would be located in the western half of this site, and the soccer practice field in the eastern half of the site.

- A field hockey structure with bleachers, press box and restrooms would be constructed along the west side of the field, subject to the receipt of favorable construction bids. (The structure would be bid as an alternate.)

**Schematic Design**

The following are highlights of the interior building design.

The building consists of three components:
• The eight indoor tennis courts would be located in the western wing of the building.

• The recreational turf area and the Touch the Earth program would be housed in the eastern wing of the building.

• The fitness center and support functions would be centrally located to serve the tennis courts and field activities.

  • This central space would provide the entrances to the facility along the north and south walls; an outdoor spectator/patio area at the north entrance would connect the building with the outdoor courts.

  • The fitness center would be located along the south wall near the main entrance and reception area. Locker rooms for use by the general public would be located directly to the north of the fitness center.

  • The remainder of the space would house the intercollegiate athletic support areas including locker and team rooms, coaches’ locker rooms and offices, training room and office, conference room, and storage space.

The following are highlights of the exterior building design.

• The east and west wings of the building would consist of pre-engineered gable framed structures with metal siding and a standing seam metal roof, the most cost-effective roofing option available for this type of structure. The exterior colors would be selected to complement the existing site and environment.

• The central area of the building would feature glass curtain walls along the north and south elevations; these would provide natural light into this area and views of the outdoor tennis courts to the north.

• This section of the building would feature a low-slope rubber membrane roofing system, which was selected based on its high degree of reliability on other campus buildings.
The square footages in the schematic design, which are identical to those presented with the building program, are outlined below.

**Detailed Building Program and Schematic Design**

<table>
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<tr>
<th>Facility (Indoor Areas)</th>
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<tbody>
<tr>
<td>Tennis Courts (8)</td>
<td>50,960</td>
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<tr>
<td>Recreational Turf Area</td>
<td>24,000</td>
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<tr>
<td>Locker Rooms and Support Areas</td>
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<td>Touch the Earth</td>
<td>3,800</td>
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<tr>
<td>Fitness Center</td>
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Total Net Assignable Space: 93,678 nsf
Total Gross Square Feet: 105,000 gsf
Net-to-Gross Ratio = 89.2 percent

<table>
<thead>
<tr>
<th>Outdoor Areas</th>
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<tr>
<td>Tennis Courts (12)</td>
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<tr>
<td>Competition Field Hockey Field (1)</td>
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</tr>
<tr>
<td>Soccer Practice and Recreation Field (1)</td>
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</table>

Schedule

The University anticipates beginning construction of both the indoor facility and the outdoor tennis courts and fields in the spring of 2005.

The anticipated completion date for the outdoor areas is July 1, 2005; the anticipated completion for the facility is June 1, 2006.

Funding

Recreation building fees, Athletic Department gifts and earnings, and parking revenues.

Since the revenue from the building fee would still need to be collected after construction has been completed, the University plans to utilize income from Treasurer’s Temporary Investment funds to provide bridge financing.

The use of revenues from the current building fee was outlined for the Board in August 2004. It is planned that the revenue from the building fee would shift to support the debt service for the East Campus Recreation project in 2008.

**Project Budget**

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<th>Amount</th>
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<td><strong>TOTAL</strong></td>
<td><strong>$12,000,000</strong></td>
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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.

**Institutional Mission/Strategic Plan**

This project is in keeping with the University’s intent to develop modern facilities that serve the needs of recreation, physical education instruction and men’s and women’s intercollegiate teams. The west campus area (just west of Finkbine Golf Course) has been identified as the best location for such facilities. The project is in accord with the Master Plan for the west campus area most recently reviewed and approved by the Campus Planning Committee in April 2004. A study completed by Brailsford & Dunlavey in 2000 found that the University of Iowa has one of the smallest amounts of recreation space per student when compared with peer, competitive institutions in the Midwest including ISU and UNI. The development of new and improved recreation facilities is a component of the University’s strategy to maintain and improve our competitive position in the recruitment and retention of students.

**Other Alternatives Explored**

The Kinnick Stadium improvement project will result in the removal of the 16 outdoor tennis courts located at that facility that are used for recreation, instruction and competition. The original Hawkeye Recreation/Athletic Facilities Complex - Phase 2 project, approved by the Board in December 2000, identified the west campus area as the optimal location for these courts. Due to continued development and the value of on-campus land, open areas on the main campus are no longer readily available. In addition, the five tennis courts within the 30 year old Recreation Building do not meet recreational needs or intercollegiate athletics standards in regard to quality or number. The Recreation Building space has been redeveloped for other indoor recreation that is in high demand from students, faculty and staff, most particularly running, jogging and track. The west campus area will be programmed intensely to satisfy the needs of recreation, physical education and intercollegiate play but will not solve the current problem of providing swimming facilities as was originally envisioned within this phase.

This project is also in keeping with the University’s overall recreation plan. The proposed new east campus recreation center will emphasize “drop-in” fitness activities - aquatics and individual fitness/wellness programs. The Field House will continue to focus on court sports, team sports and intramural activities. The west campus tennis and recreation center will focus upon “destination” activities such as soccer, rugby and tennis; activities which require a large expanse of land not available on the central campus.

**Impact on Other Facilities and Square Footage**

The sixteen outdoor courts at Kinnick Stadium are no longer available and will be replaced by the courts within this proposed west campus project. The tennis facility will have 12 outdoor courts and 8 indoor courts. Grant Field, the current field hockey venue located northwest of the Recreation Building will be available for recreational use after the completion of the new Hawkeye Area sports activity fields. Grant Field will require a complete turf replacement for continued use as an intercollegiate field hockey site. However, the existing turf will be an
appropriate venue for intramural activities (flag football, soccer, ultimate frisbee) as well as club sports such as lacrosse that are sponsored by Recreational Services.

Financial Resources for Construction Project

The estimated cost of the proposed west campus tennis–recreation center and sports activity fields project is $12 million, reduced from the Phase 2 project budget of $27 million originally envisioned and approved. It has now been tailored to what can be accomplished utilizing only the existing building fee, Athletic Department gifts and earnings, and parking revenues (for that portion of the project).

Financial Resources for Operations and Maintenance

Current Athletic Department maintenance staff will maintain the outdoor field hockey and soccer practice fields as is done now. The new tennis and recreation center will be maintained by the Facilities Services Group Operations and Maintenance staff and will be managed by the Department of Recreational Services. Any operations and maintenance costs beyond those presently budgeted will be prorated to Recreation Services and the Department of Athletics. The Recreational Services component will be met by user fees – court fees and rental of the indoor turf area. Faculty, staff and the public will be charged for access to this facility.

External Forces

The Kinnick Stadium improvements project will replace the deteriorating South End Zone seating. With necessary increases in the stadium footprint to allow for this replacement, and with the staging and construction activities expected in the area, the adjacent Klotz tennis courts will be demolished and removed. Ongoing challenges in maintaining the aging courts (constructed in 1968) also support their replacement. A replacement tennis facility is needed for recreation, instruction and competition.

The University’s indoor tennis courts, as well as the UI track and field programs have been housed in the Recreation Building since 1969. Increasing conflicts between the uses and surface needs of the two programs, increasing recreation demand for other activities, and a need to replace the 30-year-old flooring resulted in dedicating the Recreation Building to track and field competition, recreational jogging and general student recreation activities. The new west campus tennis-recreation center will, for the first time, permit the consolidation of the indoor and outdoor components of the program and will be located in an area that has been identified for University recreation-based student activity.

The artificial playing surface of Grant Field is the original surface and has been in use since 1989. The seams on the field are failing as well as the tufted part of the artificial carpet has been reduced down to the backing in many areas as a result of play over the years. These conditions, especially the seams, preclude the continued use of this field for intercollegiate field hockey competition. Additionally, this relocation would allow this area near Carver-Hawkeye Arena to be programmed for recreational purposes. This turf will be an appropriate venue for intramural activities (flag football, soccer, ultimate frisbee) as well as club sports such as lacrosse.
A study completed by Brailsford & Dunlavey in 2000 and updated in 2004 found that the University of Iowa has one of the smallest amounts of recreation space per student when compared with peer, competitive institutions in the Midwest including ISU and UNI. The development of new and improved recreation facilities is a component of the University's strategy to maintain and improve our competitive position in the recruitment and retention of students.

A presentation on the proposed west campus tennis-recreation center and sports activity fields was made to the full UI Student Senate in the fall of 2003. The project has been reviewed in greater detail with the UI Student Government Executive Board which has endorsed the project. The University's Charter Committee on Recreational Services has likewise endorsed this west campus area project.
University of Iowa Hospitals and Clinics—Nursing Clinical Education Center

Project Summary

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<td>Aug. 2004</td>
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<td>Dec. 2004</td>
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<td>Project Description and Total Budget</td>
<td>3,707,000</td>
<td>Dec. 2004 Requested</td>
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Background

The College of Nursing operates a nursing student Learning Resource Center in the College of Nursing Building on the Health Sciences Campus.

- The Center provides a central location where nursing students learn and practice physical and psychological assessment techniques and clinical procedures, and develop the necessary communication skills.

The UIHC’s Department of Nursing Services and Patient Care operates a Nursing Education Center in scattered locations throughout University Hospitals.

- This Center provides orientation and in-service programs for all departmental staff, continuing education programs, and proficiency testing for hospital, community, and regional nursing staff.

The existence of two separate Centers, which provide similar services and have similar facility requirements, results in the duplication of services, and is inefficient and costly.

The development of a single Nursing Clinical Education Center would consolidate the functions of the two existing Centers and provide more efficient use of resources.
Consolidation Savings

With the presentation of the building program in August 2004, the Board raised questions regarding the cost savings associated with the consolidation of the two Centers in one location.

The University anticipates programmatic improvements for both the College of Nursing students and UIHC nursing staff, as well as cost savings by avoiding duplicate facilities for the two programs.

The University estimates annual savings of approximately $41,000 with the availability of space in the College of Nursing Building to relocate research activities from leased space.

Additional information from the University is included as Attachment A.

Project Scope

The project would renovate approximately 20,000 gross square feet (14,368 net square feet) of space on the fourth level of the General Hospital to house the new Center.

- This space previously housed patient care and support functions for the UIHC Labor and Delivery Suite and Neonatal Intensive and Intermediate Care Units, which have relocated to the Pappajohn Pavilion.

The Center would house classrooms, clinical simulation laboratories, information technology training facilities, and provide office and support space for nursing staff associated with the Center’s educational programs.

The project will result in approximately 3,300 gross square feet of space in UIHC and approximately 6,000 square feet of space in the College of Nursing Building becoming available for reassignment to other functions.

Schematic Design

The schematic drawing is included as Attachment B to this memorandum.

The following are highlights of the schematic design.

- The western portion of the space would house three classrooms, two conference rooms, a computer training room, and the library.

- This area would also house the Center’s offices, restrooms, and support areas.

- The clinical simulation laboratories would be located in the northern portion of the space. This area would consist of open bays and patient rooms for various levels of patient care, and a robotic patient simulator room.
Square Footage Table

The following table compares the detailed square footages for the schematic design with the square footages in the approved building program.

### Detailed Building Program

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<td>Classrooms/Conference Rooms</td>
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<td>Clinical Simulation Laboratories</td>
<td>4,400</td>
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<td>Restrooms</td>
<td>470</td>
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<td><strong>Total Net Assignable Space</strong></td>
<td><strong>13,650</strong></td>
<td><strong>14,368</strong> nsf</td>
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Program/Schematic Comparison

The schematic design reflects an increase of 718 net square feet from the approved building program. The increase is primarily the result of space increases for the classrooms/conference rooms and library.

Schedule

The University plans to begin construction in the spring of 2005, with completion anticipated in the spring of 2006.

Funding

University Hospitals Building Usage Funds and Income from Treasurer's Temporary Investments. (The furniture and equipment would be funded by UIHC Volunteer Program Gift Funds and the College of Nursing.)

### Project Budget

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<th>Item</th>
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<td><strong>TOTAL</strong></td>
<td><strong>$ 3,707,000</strong></td>
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</table>
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.

Institutional Mission/Strategic Plan

The UIHC’s Department of Nursing Services and Patient Care operates a Nursing Education Center (NEC), with facilities scattered throughout the hospital, in providing orientation and in-service programs for all departmental staff, providing continuing education programs as an Iowa Board of Nursing Approved Provider, and in providing proficiency testing for nursing staff from the hospital, community and region. The College of Nursing (CON) operates a student Learning Resource Center (LRC) in the College of Nursing Building on the University of Iowa’s health science campus. The LRC’s facilities serve as the central location where nursing students learn and practice physical and psychological assessment and clinical procedures and develop the necessary skills to interact and communicate effectively with patients and other members of the health care team. The presence of two facilities on the health science campus with similar facility requirements and providing a similar service is both inefficient and costly. The development of a Nursing Clinical Education Center at the UIHC will address these deficiencies and provide a single facility to be shared by students, faculty and staff from both the College of Nursing and UIHC. The development of this center will result in the more efficient use of common resources, including space, equipment and education staff. The project will result in the freeing-up of space within the College of Nursing and UIHC that will be used to meet other space needs. This project is in concert with the UIHC’s missions of serving as the primary teaching hospital for the University and in providing a base for innovative research to improve health care. Additionally, this project fulfills multiple strategic goals of the hospital, including but not limited to: fostering the recruitment and retention of high quality staff while enhancing their diversity; excelling in all aspects of service to patients and their families by providing thorough staff training; implementation of interdisciplinary interaction and collaboration to enrich patient care through the advance of nursing enterprises; utilization of proper interdisciplinary mix of resources; optimizing operational efficiencies by integrating and centralizing standard practices; and optimizing clinical efficiencies by continuing development of care maps based upon outcomes, variance analyses and evidence-based medicine drawn upon the expertise of various departments, including the Department of Nursing.

Other Alternatives Explored

In an effort to meet the growing need for nursing services and provide nursing staff and students with the technology and training required in the ever-changing health care industry, no practical alternatives were available for consideration. Both the UIHC and CON view this project as a great opportunity to combine resources and meet common requirements for training staff and students. It is well recognized that the estimated half-life of technological knowledge is approximately eighteen months and ongoing education is essential for nursing practice, especially in a nationally recognized health science center. Currently, neither the UIHC or CON has a distance learning facility to serve off-site
students and staff or to download educational programs at the patient care unit level to eliminate the need for nurses to leave the unit to access these programs. Neither the LRC nor the NEC have library facilities that provide either hard copy or on-line access to the most recent clinical nursing research. Neither facility has a communications laboratory in which students and staff can practice therapeutic communication. This is of critical importance since communication proficiency is at the heart of assessment and therapeutic relationships and the single most important skill in reducing clinical errors. Given all these needs, it has been evident that a combined education center would be of great benefit. While the CON had no facilities in which such a center could be developed, the UIHC had the opportunity to provide the necessary space following completion of the new Perinatal Care Center in the John Pappajohn Pavilion and then using the space vacated by these units in the General Hospital. The selection of the UIHC site was thus the only feasible option for developing the center.

Impact on Other Facilities and Square Footage

No facilities will be abandoned, transferred or demolished. The project will result in approximately thirty-three hundred gross square feet of space in UIHC and approximately six thousand gross square feet in the College of Nursing Building becoming available for reassignment to other functions. The Nursing Clinical Education Center (NCEC) will occupy approximately twenty thousand gross square feet of space on the fourth level of General Hospital. This space was vacated in the spring of 2004 with the relocation of the Labor and Delivery Suite, Neonatal Intensive and Intermediate Care units, and newborn nursery to the Pappajohn Pavilion and is now used as temporary offices for staff in several departments. These staff will be relocated prior to initiating the project.

Financial Resources for Construction Project

Up to $3 million of the project’s construction cost 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. The remainder will be funded by the General University using Income from the Treasurer’s Temporary Investments. No state capital appropriated dollars will be involved. The services to be provided as the result of this project are not ones that generate a significant level of revenue. Accordingly, it is not appropriate or meaningful to consider a return on investment for this specific project. The UIHC costs associated with the development of this project, as with other similar non-revenue generating services, will be supported by all UIHC revenue centers.

Financial Resources for Operations and Maintenance

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

This project is important in meeting the strategic mission of the Department of Nursing and also the UIHC’s related to nursing education and support for nursing in the practice setting. Currently there are over 126,000 nursing positions unfilled in America’s hospitals. In addition to this, there are approximately 21,000 fewer nursing students today than in 1995. It is estimated that by 2020 there will be a shortage of at least
400,000 RNs in the United States (JCAHO, 2003). This unparalleled nursing shortage requires that new, collaborative efforts, such as the Nursing Clinical Education Center, be developed to attract students and train experienced, competent, professional, registered nurses.

This project will provide the foundation for nursing education and competency within the Department of Nursing at UIHC and will serve as an updated learning resource center for the University of Iowa College of Nursing. A unique education and competency driven environment will be provided within this space, which will include state-of-the-art simulation laboratories to provide hands-on opportunities for nurses who are being trained for positions at the UIHC and for students and registered nurses to master skills and competencies needed to provide care for acutely ill patients, conference and lecture rooms for classes and continuing education programs, and a library and computer laboratories for use in obtaining the most recent information on clinical nursing research and for developing the necessary skills in the use of computers for research and the provision of patient care.

A second strategic effort under way at the UIHC is the Magnet Hospital initiative. The purpose of this initiative is to retain and recruit professional registered nurses. Magnet is based on a hospital's commitment to a high level of professional practice and education within the hospital setting. An essential element of magnetism is the development of a strong workforce of competent nurses. This is a strategic goal for both the Department of Nursing and UIHC and will be enhanced by the Nursing Education Center.

Lastly, recruitment and retention efforts are continually underway through the Human Resources Office within the Department Nursing. A recent survey conducted in 2002 demonstrated that nurses value competent peers and coworkers. This Nursing Education Center will enhance this nurse retention goal by providing a venue for high level competency attainment, practice of new clinical skills, and serve as a catalyst to retain professional nurses at the UIHC.

The College of Nursing regards this project as critical to its educational mission. The NCEC is crucial to contributing to a productive organization. It will serve as a strong tool to recruit highly qualified high school students to pursue their education at the University of Iowa. The College of Nursing is ranked as one of the top nursing programs in the country. In addition, the Nursing Service Administration graduate program is first in the country and a gerontology graduate program second in the country as ranked by U.S. News and World Reports. This resource center will enable the College of Nursing to become a greater educational force within nursing. Approximately 650 students of the current enrollment of 717 students will use this facility.
The College of Nursing also produces a disproportionate number of nurses nationally who are placed in executive nursing positions. At last count, the College of Nursing listed over 750 of its 9,300 graduates as either CEO’s of hospitals, CFO’s, COO’s, chief nursing officers, directors of nursing, or deans.

The American Association of Colleges of Nursing (AACN) has recently accredited the College of Nursing. The Essentials document, which provides direction for accreditation has core competencies as a part of the criteria. One key competency is the acquisition and use of technical skills required for delivery of nursing care. Graduates must approach their understanding and use of skills in a sophisticated theoretical and analytic manner. This state-of-the-art facility will support the attainment of this core competency.

The College of Nursing, through the new program Professional Master's in Nursing and Healthcare Practice (MNHP), constitutes a significant response to the state and national shortage of nurses by preparing greater numbers of nurses in less time. Also, experience indicates that men who opt for nursing tend to come through the second-degree route and may also be persuaded by the more gender-neutral term of “healthcare practice” in the title. These students will be educated in this updated resource environment.

Other programs within the College respond to the shortage of nurses. The College currently has four nurse practitioner programs. The content of these programs defines the essentials of advanced practice roles in which practitioners practice independently and interdependently. When preparing graduates, the educational programs must provide students. The NCEC will enable nurse practitioner students to gain the critical experience. As students graduate from the College of Nursing they will see UIHC’s dedication and commitment to nursing, and will choose to stay with an institution with such values.
Kinnick Stadium—Lot 43 Improvements

Project Summary

<table>
<thead>
<tr>
<th>Project Description and Total Budget</th>
<th>Amount</th>
<th>Date</th>
<th>Board Action</th>
</tr>
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<tr>
<td></td>
<td>$2,066,000</td>
<td>Dec. 2004</td>
<td>Requested</td>
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Background

As outlined to the Board with the Kinnick Stadium Renovation project in March 2004, a number of site improvements will be made to the area surrounding the stadium.

Improvements include the creation of a South Plaza stadium entrance area, and replacement of Parking Lot 43 (located west of Kinnick Stadium) to increase the number of parking spaces. (The lot currently provides parking for 534 vehicles.)

The University initially estimated the cost of the parking improvements at $2.5 million to be funded outside of the Kinnick Stadium project budget.

Project Scope

The project would reconstruct Parking Lot 43 west of the stadium, and incorporate new parking spaces into the plaza area to be developed south of the stadium. (A map showing the project area is included as Attachment C.) This would increase the parking capacity in these areas to accommodate a total of 626 vehicles, an increase of 92.

The project would also relocate a portion of Stadium Drive from the center of Lot 43 to the western edge, install a new storm water drainage system, and provide landscape improvements.

Replacement of the parking lot would be undertaken following the extension of underground utility lines through the site from the West Campus Chilled Water Plant; the utility extension is being undertaken as part of the stadium renovation project.

Additional Information

Design services, construction administration, and bidding of the construction contract for the parking improvements would be provided as part of the Kinnick Stadium Renovation project; the existing contracts with Neumann Monson and Mortenson under this project include the site work for the parking improvements to foster the necessary coordination required throughout the design.

- The consultant services line item in the Kinnick Stadium—Lot 43 Improvements project represents the share of the consulting fees for the overall Kinnick project being paid by Parking System Improvement and Replacement Funds.

The parking improvements are scheduled to bid in February 2005, with an anticipated completion date of August 2006.
Funding: Parking System Improvement and Replacement Funds.

### Project Budget

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<tr>
<th>Item</th>
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East Campus Recreation Center/Field House Renovation

Project Summary

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<th>Amount</th>
<th>Date</th>
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<tbody>
<tr>
<td>Initial Review and Consideration of Capital Project Evaluation Criteria</td>
<td>Sept. 2004</td>
<td>Received Report</td>
</tr>
<tr>
<td>Permission to Proceed</td>
<td>Sept. 2004</td>
<td>Approved</td>
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</table>

Background

In September 2004, the Board received the University’s report on the Master Plan for Student Services which outlined the University’s plan for improved student service facilities. One of the components of the Plan is construction of an east campus Recreation Center, and renovation of portions of the Field House recreation facilities, to serve the campus recreational and wellness needs.

- The Master Plan for Student Services noted that an additional student building fee of approximately $165 per student per academic year ($132 for the Recreation Center and $33 for the Field House renovations) would be needed to support debt service payments for the project.

- Subject to Board approval, the University plans to begin implementing the first one-half of the Recreation Center fee ($66) in academic year 2008-2009, the second one-half of the fee ($66) in academic year 2009-2010, and the Field House fee ($33) in academic year 2011-2012.

- The University also projects a building operations and maintenance fee for the Recreation Center of $44 per student per academic year.

- Subject to Board approval, the University plans to begin implementing this fee in academic year 2010-2011.

Background

As indicated with the Master Plan for Student Services, the amount of the University’s indoor recreation space is significantly below the national and regional averages. In addition, the existing facilities do not correspond with the current student demand for recreational services.

The University wishes to increase the availability of campus recreation facilities so that the amount and quality of the spaces are more consistent with its peer institutions. Additional facilities would improve students’ quality of life, as well as student recruitment and retention.
Project Scope

Two components of the proposed project are:

- Construction of an east campus, multi-level indoor recreation facility of approximately 150,000 gross square feet which would provide aquatic and fitness activities to complement the existing activities at the Field House and at other campus recreation locations; and

- Partial renovation of the Field House.

The proposed location for the east campus facility is at the southwest corner of Burlington and Madison Streets, directly south of the Library. (A site map is included as Attachment D.)

Anticipated Cost/Funding

The estimated cost for both the construction of the east campus Recreation Center and the renovation of the Field House is between $50 million and $55 million; this estimate would be further refined during project planning with the assistance of the design consultant.

Design Services

Expressions of interest to provide design services for the project were received from 14 firms. Four firms were selected for interviews with an institutional Architectural Selection Committee, in accordance with Board procedures for projects of $1 million or more.

Based on the Committee’s recommendation, the University requests approval of the selection of RDG, Inc., Des Moines, Iowa, to provide design services for the project.

- The firm was selected based on its strong understanding of the project and its experience with similar recreation projects throughout the United States.

Subject to Board approval of the architectural selection, the negotiated agreement would be forwarded to the Board Office for Executive Director approval in accordance with the capital project thresholds approved by the Board in November 2004.
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University Hospitals and Clinics—Magnetic Resonance Imaging (MRI) Center Renovation and Systems Installation—Phase 2

Project Summary

<table>
<thead>
<tr>
<th>Amount</th>
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Magnetic Resonance Imaging (MRI) Systems Installation (Phase 1)

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<tr>
<td>Feasibility Study Agreement (HDR, Architects, Des Moines, IA)</td>
<td>$99,310</td>
<td>Nov. 2002</td>
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<td>June 2003</td>
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<td>Architectural Agreement—Design Development through Construction Phase Services (HDR, Architects, Des Moines, IA)</td>
<td>92,530</td>
<td>June 2003</td>
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<td>Program Statement</td>
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<td>Oct. 2003</td>
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<td>Schematic Design</td>
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<td>Oct. 2003</td>
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<td>Oct. 2003</td>
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<td>Construction Contract Award (Knutson Construction Services Midwest)</td>
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<td>Feb. 2004</td>
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Magnetic Resonance Imaging (MRI) Center Renovation and Systems Installation—Phase 2

| Initial Review and Consideration of Capital Project Evaluation Criteria | Sept. 2004 | Received Report |
| Permission to Proceed with Project Planning | Sept. 2004 | Approved |
| Architectural Agreement (Durrant Architects, Dubuque, IA, in association with PDC Midwest, Hartland, WI) | 246,000 | Dec. 2004 | Requested |

Background

The current patient volume of the UIHC Magnetic Resonance Imaging (MRI) Suite, located in the lower level of Colloton Pavilion, exceeds its capacity; over the past two decades, the growth in patient volume has exceeded 700 percent.

The increasing demand for MRI services has created significant scheduling backlogs, which delay the receipt of diagnostic information for patient treatment and disrupt research studies.

The UIHC MRI Suite currently houses three MRI units which were installed in 1988, 1993 and 1998; the oldest unit was upgraded in 1995.

The 1993 unit is technologically obsolete and lacks the image quality of newer generation systems; it can no longer be upgraded which precludes its use for a number of state-of-the-art procedures.
Phase 1 Project
The Phase 1 project has renovated approximately 6,000 gross square feet of space in the MRI Suite to accommodate two new MRI units to replace the existing obsolete 1993 unit and provide a fourth unit for the Suite.

Proposed Phase 2 Project
To fully address the scheduling difficulties of the MRI Center, UIHC reports that it is also necessary to replace the two remaining older generation MRI units with state-of-the-art systems with improved scanning capabilities.

The Phase 2 project would address the remaining 9,000 gross square feet of space in the MRI Center and would include the following:

- Renovation of the existing MRI scanning areas to support the replacement of two existing MRI systems and the installation of a new MRI system.

- Upgrade of the existing MRI Center patient and support facilities to enhance the overall functionality of the facility.

- Improvements to building systems that serve the area.

The University anticipates that Phase 2 construction would begin in July 2005.

Anticipated Cost/Funding
$3.8 million, excluding the cost of the new MRI equipment, to be funded by University Hospitals Building Usage Funds.

Design Services
Expressions of interest to provide design services for the project were received from eight firms. Two firms were selected for interviews with an institutional Architectural Selection Committee, in accordance with Board procedures for projects of $1 million or more.

Based on the Committee’s recommendation, the University requests approval of the selection of Durrant Architects, Dubuque, Iowa, in association with PDC Midwest, Hartland, Wisconsin (MRI design consultant) to provide design services for the project.

- The design team was selected based on its strong understanding of the key project issues, and PDC Midwest’s extensive experience in MRI design.

The agreement with Durrant Architects would provide for a fee of $246,000, including reimbursables.
University Hospitals and Clinics—Ambulatory Surgery Center and Procedure Suite and Replacement Ambulatory Care Clinic Development

Project Summary

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<tr>
<th>AMOUNT</th>
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<th>BOARD ACTION</th>
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<tr>
<td>Initial Review and Consideration of Capital Project Evaluation Criteria</td>
<td>Dec. 2003</td>
<td>Received Report</td>
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<tr>
<td>Permission to Proceed with Project Planning</td>
<td>Dec. 2003</td>
<td>Approved</td>
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<tr>
<td>Architectural Agreement (Herbert Lewis Kruse Blunck, Des Moines, IA)</td>
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<td>March 2004</td>
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<td>Ambulatory Surgery Center and Procedure Suite and Replacement Ambulatory Care Clinic Development</td>
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<td>Expanded Project Scope</td>
<td>Dec. 2004</td>
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<tr>
<td>Architectural Amendment #1 (Herbert Lewis Kruse Blunck, Des Moines, IA)</td>
<td>$375,000</td>
<td>Dec. 2004</td>
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The **Ambulatory Surgery Center and Procedure Suite Development** project, for which the Board granted permission to proceed in December 2003, would finish approximately 62,000 gross square feet of space on the fourth level of the Pomerantz Family Pavilion to house the UIHC Ambulatory Surgery Center (ASC), and surgical functions of the Department of Obstetrics and Gynecology In Vitro Fertilization Program and the Department of Dermatology.

- The ASC would relocate from the Colloton Pavilion to better accommodate projected patient growth.
- The Department of Obstetrics and Gynecology functions would relocate from the General Hospital, South Wing and Medical Research Facility, and the Department of Dermatology functions would relocate from the Boyd Tower; the consolidation of these surgical functions would provide a number of functional and operational efficiencies.

The project cost was estimated at $22.5 million, to be funded by University Hospitals Revenue Bonds and Building Usage Funds.
UIHC now wishes to expand the scope of the ASC project to include two projects for which the Board previously granted permission to proceed, and two new functions.

In February 2001, the Board authorized permission to proceed with project planning and the selection of HLM Design USA, Iowa City, Iowa, for the **UIHC—Replacement of Obstetrics and Gynecology Clinic and Support Facilities** project.

- As described with permission to proceed, this project would consolidate the Department of Obstetrics and Gynecology ambulatory patient care services, clinics, and diagnostic and procedural units; faculty and support staff offices; and conference and teaching facilities in 61,000 gross square feet of completed shell space on the third floor of the Pomerantz Family Pavilion.

- These functions are presently located in several locations throughout the 1926-vintage General Hospital and the Boyd Tower; the Department’s existing decentralized locations suffer from a number of functional and spatial deficiencies which hinder opportunities for consultation among health care providers and create inefficiencies in clinic support services.

- The project cost was estimated at $11.7 million, to be funded by University Hospitals Building Usage Funds.

- The architectural agreement with HLM Design USA, in the amount of $736,100, was approved by the Board in May 2001; the design fees paid on the agreement total $129,165.

In November 2001, the Board authorized permission to proceed with project planning and the selection of HLM Design USA, Iowa City, Iowa, for the **UIHC—Development of Replacement Dermatology Ambulatory Care Clinic Facilities—Level 4 Pomerantz Family Pavilion**.

- As described with permission to proceed, the project would finish approximately 18,500 gross square feet of shell space on the fourth level of the Pomerantz Family Pavilion to provide sufficient space for the Department’s present and future patient care service requirements and new clinical initiatives.

- The project would also complete approximately 8,000 gross square feet of public circulation space on the fourth level, and in the adjoining overhead walkway to the Pappajohn Pavilion, to provide access to the Dermatology Clinic from other UIHC locations.

- The Department of Dermatology’s growth in outpatient volume, and
the development of new medical and surgical technologies, has created a need for additional treatment, laboratory, and clinical facilities, as well as offices, teaching rooms, and support space; these needs cannot be met in the Department’s existing location in the Boyd Tower.

- The project cost was estimated at $4.2 million, to be funded by University Hospitals Building Usage Funds.

- The architectural agreement with HLM Design USA, in the amount of $356,800, was approved by the Board in March 2002; the design fees paid on the agreement total $149,647.

Since the two projects would develop similar ambulatory care facilities in space adjacent to the ASC, UIHC has determined that there would be greater efficiencies by expanding the ASC to include these projects and renaming the project.

- This would allow the project to be designed for improved space utilization, the sharing of space between the two functions, and flexibility to respond to future space needs. This is also expected to provide cost savings and numerous construction efficiencies.

The expanded project scope would also incorporate two new functions, the Internal Medicine Subspecialty Clinic, which would relocate from the first floor of Boyd Tower, and the Pulmonary Diagnostics procedure rooms and laboratories which would relocate from the third floor of the General Hospital.

<table>
<thead>
<tr>
<th>Consolidated Project</th>
<th>The consolidated project would finish a total of approximately 90,000 gross square feet of space on the third and fourth floors of the Pomerantz Pavilion.</th>
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</thead>
<tbody>
<tr>
<td>Anticipated Cost/Funding</td>
<td>$39.6 million to be funded by University Hospitals Building Usage Funds; the estimated cost is $2.9 million less than the earlier estimates for undertaking the separate projects.</td>
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<td>Architectural Amendment</td>
<td>Amendment #1 with Herbert Lewis Kruse Blunck, Des Moines, Iowa, in the amount of $375,000, would incorporate schematic design through construction administration services for the Clinic components of the project; the design services for the previously authorized components had been provided under agreements with HLM Design.</td>
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</table>

- The amendment represents a savings of approximately 54 percent from the total remaining balance of the two previous design agreements with HLM Design (which totals $814,088).
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.

The combined Replacement Ambulatory Care Clinic Development and Ambulatory Surgery Center and Procedure Suite Development project will fulfill the UIHC’s mission and aid in achieving Strategic Plan goals in the following ways:

**Replacement Ambulatory Care Clinics:**
Completion of this portion of the combined project will be of significant benefit to the UIHC in providing the necessary space to accommodate continuing growth in ambulatory patient visits and procedures. Representative of this increase in patient volume is the 13% increase in clinic visits that has taken place over the past five years in the three clinics that will be provided with replacement facilities as part of this project. These clinics’ patient visits are projected to increase by over 21% during the next five years.

This project will provide the necessary facilities to enhance the seamless delivery of care for a range of primary through highly specialized, tertiary-level services in a manner that meets patient needs and expectations. The replacement facilities will consolidate clinical functions provided by the Departments of Dermatology, Obstetrics and Gynecology and Internal Medicine that are now located on several floors of the Boyd Tower and General Hospital. This decentralization of clinics and procedure suites has been brought about by the lack of available adjacent space to accommodate growth over the years in clinic and procedure suite patient volume. Examples of this decentralization include the present Obstetrics and Gynecology clinic facilities that are located on the second and fourth floors of the Boyd Tower and in two other locations on the fourth level of General Hospital; and the physical separation of the Department of Internal Medicine’s Pulmonary Medicine specialty clinic, located on the first floor of the Boyd Tower, from this clinical service’s pulmonary diagnostics procedure rooms and laboratories, located on the third floor of the General Hospital. These decentralized locations create inconveniences for patients, hinder opportunities for consultation between specialists, and create inefficiencies in clinic support operations that must be duplicated at several sites. The new clinics and procedure units will be designed to facilitate greater collaboration between the multidisciplinary teams of health care providers and permit the shared use of examination and treatment rooms and other patient care support facilities based upon the scheduling demands of each clinical service. They will also be designed with the objective to position functions such as chart control in locations that can be readily converted to patient care functionality, such as examination and treatment rooms, as the need arises and as the requirement for hard-copy patient charts diminishes with the growth in development and use of the electronic medical record. Furthermore, as other clinical services have been relocated to newer accommodations at the south end of the University Hospitals complex it has become increasingly more difficult to provide convenient, coordinated care from
locations in the General Hospital and Boyd Tower. The consolidation of these facilities in space more proximal to such patient care service areas as pulmonary rehabilitation, the Breast Imaging and Diagnostic Center, and the Labor & Delivery Suite, all located in the Pappajohn Pavilion, and the Family Care Center, in the Pomerantz Family Pavilion, will make it more efficient and convenient for both the ambulatory care clinic patients and the physicians and other members of the health care team.

The UIHC’s educational and research missions will also be enhanced through development of the necessary space to effectively teach and train students and residents from a host of health care disciplines 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 diagnosis and treatment of disease. The project also supports several of the UIHC’s Strategic Plan goals, most notably by ensuring the hospitals’ facilities are developed with a particular emphasis on patient comfort and convenience and operational effectiveness, by differentiating the UIHC clinically, by enabling the UIHC to excel in all aspects of service to our patients and their families and referring providers, by facilitating opportunities for operational and clinical efficiencies, by making possible incremental growth in service volume and revenue, and by implementing or enhancing interdisciplinary interaction and collaboration to enrich the patient care, teaching and research missions of the UIHC.

Ambulatory Surgery Center and Procedure Suite:
Both the Ambulatory Surgery Center (ASC) and Main Operating Room (OR) Suite, which now adjoin each other on the fifth floor of the Colloton Pavilion, are functioning at an extremely high rate of usage. For example, the Main OR Suite is now operating at an effective utilization rate of approximately 90%, with some surgical services actually approaching or exceeding 100%. A number of operational enhancements have been made to maximize operating room usage and efficiency. Particularly, refinements in operating room scheduling have been made which has maximized utilization. The lack of additional operating rooms has begun to limit the ability to accommodate surgical patient growth and has necessitated using some ambulatory surgery operating rooms for performing inpatient cases. Over the last five years, case volume has grown 18% overall, 27% in the ASC and 14% in the Main OR Suite. The Main OR Suite volume is conservatively projected to grow by approximately 3% per year for the foreseeable future. It is projected that the current ASC case volume, if an adequate number of operating rooms are available, will increase from its present level of approximately 6,700 cases per year to 8,700 cases by the year 2016. This projection is based both on population statistics and predictions regarding the continued shift of surgical practice to the ambulatory setting. This project will provide the necessary space to accommodate the historical and projected future growth in ambulatory surgery and to permit the expansion and modernization of the Main OR Suite after the ASC has been relocated to its new facilities.

The In Vitro Fertilization (IVF) Program’s facilities are currently located in
two buildings, the General Hospital which houses its procedure rooms and the Medical Research Facility of the Carver College of Medicine where its special laboratories and storage facilities are located. This decentralization of facilities results in patient and staff inconvenience and functional and operational inefficiency. Also, inadequacies in IVF laboratory space are limiting the number of procedures the Program can perform. Lastly, as other clinical services have been relocated to newer accommodations at the south end of the University Hospitals complex, it has become increasingly more difficult to provide convenient, coordinated care from locations in the General Hospital and Boyd Tower. The development of these replacement facilities will overcome these spatial, functional and locational constraints and result in greater patient convenience and operational efficiency.

The UIHC’s educational and research missions will also be enhanced through development of the necessary space to more effectively teach and train medical students, residents, fellows and other health science students and trainees and by providing the type of facilities required to conduct innovative clinical research. The project also supports several of the UIHC’s current Strategic Plan goals and objectives, most notably by enabling the UIHC to excel in all aspects of service to our patients and their families and referring providers, by facilitating opportunities for operational and clinical efficiencies, by creating an environment that contributes to establishing the UIHC as the workplace of choice, by differentiating the UIHC clinically, by making possible incremental growth in service volume and revenue, and by implementing or enhancing interdisciplinary interaction and collaboration to enrich the patient care, teaching and research missions of the UIHC.

Other Alternatives Explored

Replacement Ambulatory Care Clinics:
The project is required to provide the necessary ambulatory care clinic space to accommodate the existing patient volumes and projected future patient volumes for Obstetrics and Gynecology, Dermatology, and Internal Medicine Specialties Clinics whose facilities have either exceeded their capacity or will do so within the next three to five years. The project will also permit the consolidation of clinical functions that are now located in several floors of the Boyd Tower and General Hospital as previously described and provide for the development of these replacement facilities in a location more convenient for the patients to receive their care. Given the age of the General Hospital and the fixed capacity of the Boyd Tower, it was determined in the late 1980’s that the only viable alternative to meet the need for expanding ambulatory clinical services was development of a new facility that could accommodate these growing outpatient care requirements. For this reason, the Pomerantz Family Pavilion was developed as a facility designed to accommodate the ambulatory clinics and diagnostic and therapeutic units of multiple clinical departments.

Ambulatory Surgery Center and Procedure Suite:

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Due to the aforementioned need to provide an adequate level of patient treatment and support space to meet the historical and projected increases in Ambulatory Surgery Center (ASC), Main OR Suite, and In Vitro Fertilization (IVF) Program patient volume, as well as for the other reasons cited above, there are no alternatives available other than to develop expansion space for these clinical services. A number of alternatives for a new ASC were explored, including renovation of the ASC in its current location. Adequate and efficient ASC facilities cannot be provided in the current ASC location and the Main OR Suite expansion needs cannot be met unless the ASC is relocated. For these reasons other alternatives were explored that involved developing a new ASC separate from the Main OR. The various alternatives considered fall into two basic categories: building a new ASC within the UIHC or developing a new ASC in a location separate from the main UIHC complex. The option to develop an ASC off-site was determined not to be the most efficient model for the UIHC to follow at the present time due to the disruption it would create for faculty surgeons and residents who on a daily basis may undertake multiple research, teaching and other academic responsibilities within the UIHC and Carver College of Medicine besides meeting their patient care responsibilities in the operating room. Traveling between two facilities would be an inefficient use of their time. In addition, the development of an off-site ASC would also require the development of costly diagnostic radiology, clinical laboratory, and other support facilities that will not need to be duplicated if the ASC is developed within the UIHC. Building a new ASC in the location proposed in this request is the most cost effective and best meets the ASC patient care, educational and research missions, as well as meeting the needs of the IVF Program. In addition, it further consolidates services that require the provision of anesthesia at a time when anesthesiology providers are in short supply. The project is also in concert with the goals of UIHC’s Strategic Plan.

Impact on Other Facilities and Square Footage

Replacement Ambulatory Care Clinics:
On completion of this project, the space where these clinical services are now located will be reassigned to serve as temporary “swing space” while renovating and expanding the Pediatric Specialty Clinic in the Colloton Pavilion; to develop faculty offices for the Department of Pediatrics and Holden Comprehensive Cancer Center; and also to meet other hospital department office needs. The specific clinical services to be assigned this “transferred” space have been determined with assistance from a national space planning and management consulting firm. These projects are specified in the UIHC’s “Five-Year Capital Plan, FY 2006 – 2010.” As the UIHC reaches the point in time indicated for commencing the planning of these projects, detailed information will be provided to the Board in the respective requests for Permission to Proceed with Project Planning.
On completion of this project the present Ambulatory Surgery Center space, totaling approximately twenty thousand gross square feet on the fifth level of the Collotan Pavilion, will be reassigned to the Main OR Suite to meet this facility's need for additional operating rooms and support space and to provide “swing” operating rooms during the phased upgrading of the existing main operating rooms. Approximately six thousand gross square feet of space now occupied by the Department of Obstetrics and Gynecology’s In Vitro Fertilization Program laboratories and procedure rooms, that are located in several sites in the General Hospital and Medical Research Facility, will be reassigned to meet other space needs of the UIHC and the Lucille A. and Roy J. Carver College of Medicine. No space will be abandoned or demolished.

| Financial Resources for Construction Project | This 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 and gift funds. No state capital appropriated dollars will be involved. The estimated project cost is $39.6 million, which is $2.9 million less than the earlier estimates for undertaking the Ambulatory Surgery Center and Procedure Suite Development and Replacement Ambulatory Care Clinic Development as separate projects. The preliminary internal rate of return for the ASC and the clinical procedure units is 12.9%. |
| Financial Resources for Operations and Maintenance | 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 | The development of these facilities is a vital element in enabling the UIHC to meet all components of its tri-partite mission. As previously noted, the UIHC continues to experience a significant growth in ambulatory clinic visits and ambulatory and inpatient surgical procedures that have resulted in a number of clinical services now experiencing difficulties in providing timely patient services due to the lack of space. |
The Nursing Clinical Education Center (NCEC) will integrate the professional learning activities currently taking place in two separate locations – the UI College of Nursing and the University of Iowa Hospitals and Clinics (UIHC). The Center will house nursing education classes, a patient simulation laboratory for practicing clinical procedures, a library and an information resource bank, and distance nursing facilities to practice diagnosis and management of health problems telephonically and electronically.

The goal of the NCEC is to create a highly functional and adaptable learning center that
- maximizes time, space, equipment and personnel required for the education of both nursing students and practicing nurses;
- assures the currency of practice technology for both students and practicing nurses while keeping them close to the patient care units;
- captures the “art” as well as the technology required for excellence in patient care;
- assures a futuristic approach to a rapidly changing profession of nursing;
- establishes an on-site library resource for nurses at the patient care setting, promoting the use of evidence in practice;
- will promote the reduction of medical errors;
- supports the continuing education needs of the nursing community throughout the state;
- brings learners and practicing nurses together in a collegial environment;
- promotes recruitment and retention of high quality nurses; and
- is a regional and national showcase for the University of Iowa, confirming its reputation for excellence in nursing education and practice

Nursing practice laboratories are an essential component of professional education both for student and graduate nurses. It is estimated that the half life of technological knowledge is approximately eighteen months. This is particularly true in the health industry where the speed of technological research and advancement have made nursing proficiency a moving target. The capacity to limit hospital errors and to enhance the quality of the medical infrastructure is directly related to the sophistication and currency of the nursing staff. In addition, nurses increasingly must have the ability to assess, treat and educate patients and families using electronic communication as individuals move through a variety of settings including home, workplace, outpatient settings, long term care facilities and hospitals.

The current learning resources in both the College of Nursing and the UIHC Department of Nursing are inadequate to meet education needs of new nurses and the continuing education of practitioners and clinicians. The space in each is insufficient for the volume of users. Since large group education requires renting space off campus, it is costly and takes vitally needed nurses away from their patient care units. Existing equipment does not address contemporary and future nursing practice. Neither unit has sufficient personnel to keep the laboratory space open and available for nurses and nursing students on weekends and in the evening. In addition, both UIHC and the College are committed
to meeting the continuing education needs of the nursing community throughout the state but do not have the appropriate conferencing space and electronic consultation facilities to do so. Combining the two centers creates opportunities that neither of the existing centers, alone, has the capacity to provide.

Locating the NCEC in the hospital for dual use by students and clinicians is highly advantageous. The most obvious is maximizing the use of time, space, personnel and expensive equipment by both populations of learners. Combining personnel resources permits the extension of available times for learning and practice. In addition, the proposed Nursing Clinical Education Center will provide an opportunity for regular collegial exchange between practicing nurses and students, creating professional mentoring and recruitment opportunities. Moreover, by bringing education to the bedside, nurses and nursing students will be able to learn while they practice, remaining close to the patient care units that they staff.

The sharing of an educational laboratory facility by students and practicing nurses creates an ambiance of mutual respect and increases the recruitment and retention of the highest quality nurses. The presence of a state of the art learning laboratory will augment the already existing national reputation of nursing education and practice in Iowa, evidenced by UIHC’s magnet status and the U.S. News and World Report top ten ranking of the College of Nursing. Finally, the NCEC will be a statewide resource for continuing education for and consultation with Iowa’s entire nursing community.