

**UCR Health Outpatient Pavilion Project
Request for Offers (RFO) for Project Developer
Addendum #3**



February 1, 2018

The following information and documents, as described below, shall become part of the University of California, Riverside Request for Offers (RFO) for the Health Outpatient Pavilion Project.

I. UCR HEALTH OUTPATIENT PAVILION PROJECT, REQUEST FOR OFFERS (RFO) FOR PROJECT DEVELOPER DATED NOVEMBER 6, 2017

A. Table of Contents

Insert the following into the Table of Contents, Reference Documents:

- University Furnished Information

B. 1.1 Request for Offers and Project Approval Schedule

Revise Paragraph 1.1 Request for Offers and Project Approval Schedule revised in Addendum #2 dated January 18, 2018, as follows:

1.1 Request for Offers and Project Approval Schedule

The anticipated schedule of the RFO process is below. The University may update and revise the schedule in its sole discretion.

Anticipated RFO Milestones

| Activity | Schedule |
|--|---|
| Release of RFO | November 6, 2017 |
| Submit Questions | November 6, 2017 to March 1, 2018 |
| Submit Alternative Technical Concepts* Charrette #1 | November 6, 2017 to February 16, 2018 November 16 & 17, 2017** |
| Addendum #1 | December 18, 2017 |
| Addendum #2 | January 19, 2018 |
| Charrette #2 | February 7, 2018 |
| Addendum #3 | February 12, 2018 February 1, 2018 |
| <u>Addendum #4</u> | <u>February 12, 2018</u> |
| Approval of Alternative Technical Concepts | December 15 thru February 28, 2018 |
| Response Deadline | March 12, 2018 |
| Respondent Presentations (Optional at discretion of Reviewing Committee.) | March 19 -23, 2018 |
| Optional Clarification (Discretion of Reviewing Committee) | April 2 – 6, 2018 |
| Selection of Preferred Offeror | April 9 -16, 2018 |

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C. 3.0 OFFER REQUIREMENTS

Refer to page 16, Section 3.0, Offer Requirements, Offer Submittal Process. **Modify** paragraphs 1a & 1b as follows:

“3.0 OFFER REQUIREMENTS

Offer Submittal Process

1. Deadline.

- a. Electronic copies are due to the University on ~~January 9~~**March 12, 2018, at 3 pm Pacific time**. Each team will be provided with instructions and individual access to a secure folder for upload. **The secure folder uses the same “OneDrive” platform and links as used for the RFAI submittals.**
- b. Delivery of hard copies also is required; however, such copies may be delivered within (3) business days of the due date listed above, ~~by January 12~~**March 12, 2018, at 3 pm Pacific time.**”

II. OUTPATIENT PAVILION – DEVELOPER RELEASE DOCUMENTS

A. RFO Appendix A – Basis of Design, Section 8 Detailed Space Requirements

1. 8.4 Detailed Space Requirements for Ambulatory Surgery and Endoscopy Procedure Suite

Delete “8.4 Detailed Space Requirements for Ambulatory Surgery and Endoscopy Procedure Suite”, issued in Addendum #2, dated January 18, 2017 in its entirety, and **Substitute** the revised “8.4 Detailed Space Requirements for Ambulatory Surgery and Endoscopy Procedure Suite” attached to this addendum (Attachment A)

[Note: The line items have been numbered and the 8.4 Sum, Summary Space Requirements for Ambulatory Surgery and Endoscopy Procedure Suite has been added to the end of this section]

2. 8.7 Detailed Space Requirements for Retail Pharmacy

Delete “8.7 Detailed Space Requirements for Retail Pharmacy” issued in Addendum #2, dated January 18, 2017 in its entirety, and **Substitute** the revised “8.7 Detailed Space Requirements for Retail Pharmacy” attached to this addendum (Attachment B)

[Note: The line items have been numbered.]

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B. RFO Reference Documents

University Furnished Information

Add the attached University Furnished Information Folder to the RFO Reference Documents folder (Attachment C)

[All University Furnished Information listed in the Table of Contents will be issued under a separate cover.]

III. DEVELOPERS QUESTIONS AND ANSWERS

| NO. | |
|------------|---|
| Q1 | In future program documents can we please number the lines, so we can reference that line? It would be easier. |
| A1 | Yes. These were sent in draft form on Wednesday January 24, 2018 |
| Q2 | What is the change in square footage for Student Health after these changes? |
| A2 | Refer to page 27. The total was 22,148. Now add the two totals for Student Health and CAPS. (5,323 +7575= approx. 13,000) but remember that Pharmacy was moved out of Student Health also. |
| Q3 | To understand better the reduction in Exam rooms by 25%. We observe they are square footage cuts with straight deductions. With a 25% deduction in the number of rooms. |
| A3 | Yes, it provides for an overall efficiency in combining the programs. |
| Q4 | This is pretty detailed. Should we design to the department level? As we work through this and we identify further changes, should we just indicate them as we go forward? |
| A4 | Yes, your submittal will be conceptual. If you have specific changes, identify them in your proposal. |
| Q5 | Could you provide a summary sheet for square footage? |
| A5 | One will be issued along with this response. |
| Q6 | Will we receive an answer to our ATC? (PMB Team Question) |
| A6 | Wednesday, January 24, 2018 |

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| | |
|------------|--|
| Q7 | Have the site studies/surveys referenced in <u>1.2.2 Project Site</u> been issued through an addendum? If not, will these documents (including soils/Geotech, etc.) be made available? |
| A7 | The University provided information will be issued in the addendum along with the RFI questions. |
| Q8 | Please confirm UCR is requesting two proposals regarding the parking: <ul style="list-style-type: none"> a. Development team owns and finances the garage and includes it in the overall project costs and rent. b. UCR owns and finances the garage and its costs are not included in the developer’s overall project costs and rent. Developer’s scope of work would be the fee development manager of the garage |
| A8 | There are multiple options available in your response. One option would provide the terms available in utilizing the University’s Century Bond funds. Another option would provide an answer with lease terms if the University Operates. A third option would provide the ground rent that would be provided if the Developer Operates. |
| Q9 | The RFO requests a modified gross lease structure. What is UCR’s expectation on expenses to be included within the MG structure? Will UCR consider a triple-net lease structure (NNN)? |
| A9 | Treat the ground lease as a triple net lease. |
| Q10 | Section <u>3.6 Project Financial Proposal and Financial Pro Forma Models</u> notes the following: <i>“There could be infrastructure costs payable by the Developer to the University or other entities, in addition to the utility connections to services provided by the Developer and fees relating to Riverside Public Utilities (“RPU”) and other utilities normally encountered in such a development as defined in the BOD.”</i> Has UCR identified specific infrastructure costs that will be payable beyond customary municipality and utility on- and off-site scopes of work? Is there a specific cost that we should account for in our pro forma? |
| A10 | We are not aware of any non-customary public utilities fees at this time. It is the responsibility of the Developer to determine what other costs or fees there may be. |
| Q11 | What is the status of the “UC System Fee” that will be allocated to the project? Is there a specific cost that we should account for in our pro forma? |
| A11 | Currently use an amount of \$3 million for the UC System Fee. This does not cover inspection, plan check, fire marshal or any other special inspection costs. |

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| | |
|------------|---|
| Q12 | Given that UCR is the AJH relative to CEQA, land use and permitting, does UCR have a specific fee schedule relating to development impact fees, traffic mitigation fees, school fees, etc. that are to be included in the pro forma? |
| A12 | The University anticipates an amount of \$150,000 for CEQA. Any fees that are required beyond CEQA are not known and therefore are not included in a fee schedule. |
| Q13 | What will be included in Addendum 3 scheduled for distribution on February 12 th ? |
| A13 | The content of the addendum issued on February 12 depends on questions developed during the charrettes and over the time between this addendum and then. |
| Q14 | On the conference call on January 22, it was indicated that an overall Program Summary tabulation sheet would be distributed. When will this summary be made available? |
| A14 | The summary tabulation will be issued along with this addendum. |
| Q15 | Delivery of Hard Copy: Based on RFO page 16, item 3.1.b – is the new hard copy delivery date changed to March 15 to correspond to the Electronic Submission date of March 12 |
| A15 | Both the Electronic Copy and the Hard Copy are due on March 12, 2018. |
| Q16 | Per the Addendum # 2 PDF document: Program note per Page 21 for Student Health Waiting: “Reduce ASF by 25% and add 75% of original ASF to UCR Health Program.” Question: Please clarify intent. Should the Student Health Waiting now to be 25% smaller than it was? In addition, should 75% of the original Student Health Waiting SF be added to the UCR Health Waiting SF (effectively increasing the total SF)? |
| A16 | The waiting area square footage for Student Health is reduced by 25 percent and the remaining 75 percent of program space is added to the UCR Health Waiting square footage. The intent is to decrease the overall waiting space by combining the square footage of UCR Health and Student Health. |
| Q17 | Per the Addendum # 2 PDF document: Program note per Page 21 Student Health Exam Rooms: “Reduce ASF by 25% and add 75% of original ASF to UCR Health Program.” Question: Please clarify intent. Should 75% of the original Student Health Exam Rooms SF be added to UCR Health Exam Rooms SF (effectively increasing the total SF)? Or should 75% of the number of exam rooms to be added to the number of UCR Health Exam Rooms currently shown in the program (effectively increasing the total UCR Health Exam Rooms and SF)? |

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|------------|---|
| A17 | The number of exam rooms for Student Health are reduced by 25%, the remaining 75% of rooms are added to the number of UCR health exam rooms. |
| Q18 | <p>Per the Addendum # 2 PDF document:</p> <p>Program note per Page 22 Student Health Alcove/Weigh-In: “Reduce ASF by 25% and add 75% of original ASF to UCR Health Program.”</p> <p>Question: Please clarify intent. Should 75% of the original Student Health Alcove/Weigh-in SF to be added to UCR Health Patient Intake/ Assessment Station SF (effectively increasing the total SF)?</p> |
| A18 | Increase the ASF for Patient Intake/Assessment Station in UCR Health Patient Intake/Assessment Stations by 75% of the Student Health Alcove/Weigh-in ASF. |
| Q19 | <p>Per the Addendum # 2 PDF document:</p> <p>Program note per Page 23 Student Health Nurse Workstations: “Reduce ASF by 25% and add 75% of original ASF to UCR Health Program.”</p> <p>Question: Please clarify intent. Should 75% of the original Student Health Nurse Workstations SF to be added to UCR Health Patient Intake/ Assessment Station SF (effectively increasing the total SF)?</p> |
| A19 | Yes. That is correct. |
| Q20 | <p>Per the Addendum # 2 PDF document:</p> <p>Program note per Page 23 Student Health Restrooms: “Reduce ASF by 20% and add 80% of original ASF to UCR Health Program.”</p> <p>Question: Please clarify intent. Should 80% of the original Student Health Restroom SF to be added to UCR Health Restrooms SF (effectively increasing the total SF)?</p> |
| A20 | Yes. That is correct. |
| Q21 | <p>Per the Addendum # 2 PDF document:</p> <p>Program note per Page 23, Option A: “Student Health waiting will be integrated with UCR Health. SH assumed to be 50% of number and then reduced 50% for integration with UCR Health. CAPS will need their own waiting if in separate building.”</p> <p>Question: Please clarify the SF required for waiting for each of the following services: Student Health, CAPS, and UCR Health. Also, is it preferred for CAPS to have a separate waiting room?</p> |
| A21 | Refer to the Program Space summary spread sheet, which is part of this addendum. |

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| | |
|------------|--|
| | <p>UCR Health, Student Health and CAPS can all share waiting. (There are sub waiting rooms as appropriate for services.) It is up to the developer to determine the most efficient and effective location for CAPS. The identification of separate waiting space for CAPS was to provide flexibility for locating CAPS on the site but in a separate structure.</p> |
| Q22 | <p>Per the Addendum # 2 PDF document: Page 23, Program note for Director of SHS shows 0 SF with a note to verify. Question: Please verify if this office is required.</p> |
| A22 | <p>The office is not required</p> |
| Q23 | <p>Per the Addendum # 2 PDF document: On page 26, General Storage is shown zeroed out, but the note states “Reduced 50% for efficiency with UCR Health CAPS will require some storage.” Question: Please clarify the storage SF requirements each of the following services: Student Health, CAPS, and UCR Health.</p> |
| A23 | <p>The storage space required for Student Health and CAPS totals 100 square feet with the intent that CAPS be allocated 75 square feet of that space for storage and Student Health allocated the remaining 25 square feet.</p> |
| Q24 | <p>Is the request for the demand loads relating to the CEQA application?</p> |
| A24 | <p>It will be needed for CEQA and discussions with Riverside Public Utilities.</p> |

IV. ATTACHMENTS

- A. 8.4 Detailed Space Requirements for Ambulatory Surgery and Endoscopy Procedure Suite
- B. 8.7 Detailed Space Requirements for Retail Pharmacy
- C. University Furnished Information

End of Addendum

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ATTACHMENT



8.4 Detailed Space Requirements for Ambulatory Surgery and Endoscopy
Procedure Suite

8.4 DETAILED SPACE REQUIREMENTS FOR AMBULATORY SURGERY AND ENDOSCOPY PROCEDURE SUITE

It is essential that the selected developer/architect follow all applicable standards regarding proper workflow when designing the surgical suite. Proper workflow is crucial to maintaining an aseptic environment. The key factor is the controlled flow of patients, staff and materials from unrestricted to semi-restricted to restricted areas.

| 1 | ROOM / AREA | UNIT | ASF | TOTAL ASF | COMMENTS |
|----|--|------|-----|--------------|---|
| 3 | Patient Intake | | | | |
| 5 | Reception | 1 | 120 | 120 | Assumes imaging patients will use central registration; includes clerical. |
| 6 | Registration Cubicle | 2 | 80 | 160 | Not included in this program; assumes located w/central registration. |
| 7 | Check-out/Discharge Cubicle | 1 | 80 | 80 | Acoustic, visual and computer screen privacy; space for patient and family member; confirm # of check-out staff. |
| 8 | Office Equipment/Supply Storage Alcove | 1 | 80 | 80 | Printer/copier/fax equipment/office supplies. |
| 9 | Patient/Visitor Waiting | 1 | 300 | 300 | For ASC, endo, minor; consider separate waiting for pediatric patients and families. Reduced. |
| 10 | Child Play Area | 1 | 100 | 100 | Locate adjacent to peds waiting; visible from reception. |
| 11 | Visitor Toilet Room | 0 | 0 | 0 | Assumes public toilet rooms can be shared with other services and walking distances are reasonable; not included in this program. |
| 12 | Wheelchair Alcove | 1 | 40 | 40 | Shared at OPV entrance; not included in this program. Alcove is generally needed for quick access to discharge. |
| 13 | Refreshment Center | 1 | 80 | 80 | Counter with sink and wall cabs; for coffee/tea and refreshments; contiguous to waiting. |
| 14 | Education Station/Display Area | 0 | 20 | 0 | Assumes located w/central registration; not included here. |
| 15 | Consult/Multipurpose Room | 1 | 120 | 120 | Family consultation; accessible for surgeons and anesthesiologists. Locate behind door, away from waiting for privacy. |
| 17 | Subtotal ASF | | | 1,080 | |
| 19 | Pre-Op Care & Post Anesthesia Care Unit (Phase I, Phase II Recovery and Minor Procedures (Some spaces have been combined to create a unit that can swing depending on demand.)) | | | | Unrestricted area; consider sharing support space (and reducing SF) with phase I recovery (PACU) where permitted. |
| 21 | Pre-surgical Testing | 0 | 0 | 0 | Include? |
| 22 | Minor Procedure Room | 2 | 180 | 360 | May be accessed from semi- and un-restricted corridors; share for exams. |
| 23 | Outpatient Changing/Locker Space: | | | | |
| 24 | Changing Booth (Standard) | 0 | 25 | 0 | Depends on operational concept; not included. |
| 25 | Changing Booth (Handicapped) | 1 | 50 | 50 | Depends on operational concept; not included. Added since generally required by licensing/OSHPD. |
| 26 | Patient Belongings Holding | 1 | 80 | 80 | Determine need and process for holding patients' belongings. |
| 27 | Gowned Patient Waiting Area | 0 | 60 | 0 | Depends on operational concept; not included. Having gowned patients in a waiting room is not considered a best practice. |
| 28 | Patient Toilet Room | 0 | 60 | 0 | |
| 29 | Injection/Block Room | 0 | 120 | 0 | For regional blocks or line placement prior to surgery; depends of scope of services; not included. |
| 30 | Patient Care Space: | | | | Design for "swing" use between pre-op and stage 2 recovery; minimum 4 pre-op; consider potential accommodation of PACU overflow? Share support space with minor/endo. |
| 31 | Pre-operative Cubicle | 3 | 130 | 390 | Semi-enclosed w/partitions on 3 sides, curtain on corridor side. Provide Sinks |

| | | | | |
|----|---|----|--------------|-------|
| 32 | Pre-operative Room | 1 | 160 | 160 |
| 33 | Phase I & II Recovery Bay | 11 | 130 | 1,430 |
| 34 | Phase I & II Recovery Room | 1 | 160 | 160 |
| 35 | Recliner Chair (Discharge Lounge) | 0 | 0 | 0 |
| 36 | Patient Toilet Room | 2 | 60 | 120 |
| 37 | Hand Gel/Foam Stations | 8 | 5 | 40 |
| 38 | Nurse Station: Pre-op/Phase I & II Recovery | 2 | 280 | 560 |
| 39 | Medication Preparation Room | 1 | 120 | 120 |
| 40 | Nourishment Station | 1 | 80 | 80 |
| 41 | Automated Medication Dispensing Unit | 2 | 30 | 60 |
| 42 | Staff Toilet Room | 4 | 60 | 240 |
| 43 | Clean Supply | 1 | 140 | 140 |
| 44 | Soiled Holding | 2 | 120 | 240 |
| 45 | Equipment Storage Room | 1 | 160 | 160 |
| 46 | Environmental Services Room | 2 | 80 | 160 |
| 47 | Emergency Equipment Alcove | 2 | 15 | 30 |
| 48 | Mobile Equipment Alcove | 2 | 30 | 60 |
| 49 | Stretcher/Wheelchair Alcove | 2 | 30 | 60 |
| 51 | Subtotal ASF | | 4,700 | |

Quiet room for pediatrics, etc.. **Provide Sink**
Provide Sinks
 Quiet room for pediatrics, etc.. **Provide Sinks**
 Lounge-type setting with recliner chairs; depends on operational concept; not included.
 For use by pre-op and stage II recovery patients; 2 minimum.
8 minimum; distributed.
 Direct visualization of and access to pre-op/phase II recovery; also access to endo/minor. **Design entire area to swing. 2 nurse stations identified here. Area has also been increased to accommodate endoscopy nurses.**
 Depends on operational concept; locate at nurse station; reduce if alcove. **Needs to be centrally located for ease of use or provide 2 rooms.(Pyxis, IT, worksurface and interface with EPIC in addition to operational and code requirements.)**
 Locate at Pre-op/phase II recovery nurse station.
 Self-contained fixed or mobile unit; depends on operational concept.

Distribute in unit and provide POC testing area.

 Includes equipment, supplies, floor sink; share and reduce?

Post-Anesthesia Care Unit (Phase I Recovery)

See change above

| | | | | |
|----|---|--------------|----------------|----------------|
| 53 | | | | |
| 54 | | | | |
| 55 | Phase I Recovery Bay (PACU) | 0 | 130 | 0 |
| 56 | Phase I Recovery Room (PACU) | 0 | 160 | 0 |
| 57 | Handwashing Station | 2 | 10 | 20 |
| 58 | Nurse Station: PACU | 0 | 120 | 0 |
| 59 | Staff Toilet Room | 4 | 60 | 60 |
| 60 | Medication Preparation Room | 4 | 80 | 80 |
| 61 | Automated Medication Dispensing Unit | 0 | 20 | 0 |
| 62 | Clean Workroom | 4 | 100 | 100 |
| 63 | Soiled Workroom | 4 | 80 | 80 |
| 64 | Equipment Storage Room | 4 | 100 | 100 |
| 65 | Environmental Services Room | 4 | 80 | 80 |
| 66 | Emergency Equipment Alcove | 4 | 15 | 15 |
| 67 | Mobile Equipment Alcove | 4 | 80 | 80 |
| 68 | Stretcher/Wheelchair Alcove | 4 | 30 | 30 |
| 70 | Subtotal ASF | | 645 | |
| 71 | Subtotal ASF | | 0 | |

Unrestricted area; minimum of 1 entrance from semi-restricted surgical corridor w/o crossing public corridor; separate pediatric from adult with space for parents; 6 positions minimum; consider accommodation of PACU overflow into pre-op? Also consider sharing support space (and reducing SF) with pre-op/phase II recovery where permitted.

Bay with cubicle curtains.
 For isolation and/or pediatrics.
 2 minimum; distributed.
 Direct visualization of and access to PACU patients. **Added nurse station above.**
 Provide minimum of one within working area.
 Depends on operational concept; locate at nurse station; reduce if alcove.
 Self-contained fixed or mobile unit; depends on operational concept; not included.

 Includes equipment, supplies, floor sink; share and reduce?
 One per post-anesthesia care unit; crash cart.

Total now -0-

73 Operating Rooms

75 General Operating Room

| | | |
|---|-----|-------|
| 4 | 650 | 2,600 |
|---|-----|-------|

Sized for general and specialty cases; flexibility in use.

Shell Operating Rooms

76

| | | |
|---|-----|-------|
| 2 | 650 | 1,300 |
|---|-----|-------|

Two shell Operating Rooms that can be used for interim function if planning and design allow for future conversion. Locate shell OR's in a manner that they could be accessed from another corridor without going through the sterile zone. (They may be used for procedure rooms in interim period.)

77 Scrub Station (Two Sinks)

| | | |
|---|----|-----|
| 4 | 50 | 200 |
|---|----|-----|

One per each one or two operating rooms depending on configuration. Plan for additional due to shell ORs.

78 Stretcher Alcove

| | | |
|---|----|-----|
| 4 | 30 | 120 |
|---|----|-----|

One outside each OR patient entrance. Plan for additional due to shell ORs.

80 Subtotal ASF

4,220

82 Operating Room Support

84 Control Station

| | | |
|---|-----|-----|
| 1 | 100 | 100 |
|---|-----|-----|

Positioned to control access into the semi-restricted area.

85 Scheduling Office

| | | |
|---|-----|-----|
| 1 | 110 | 110 |
|---|-----|-----|

Assumes this function is located in central reception/registration. Scheduling Office is required, generally needs to have good proximity to related team functions.

86 PACS Viewing Office

| | | |
|---|-----|-----|
| 1 | 160 | 160 |
|---|-----|-----|

Depends on scope of operations; not included.

87 Staff Toilet Room

| | | |
|---|----|-----|
| 2 | 60 | 120 |
|---|----|-----|

Provide minimum of one within each "pod" or working area.

88 Clean Core

| | | |
|---|-----|-----|
| 4 | 100 | 400 |
|---|-----|-----|

100 ASF per operating room; depends on operational concept; not included. Changed to included. Shell ORs will need same sterile core.

89 General Equipment Storage

| | | |
|---|-----|-----|
| 1 | 250 | 250 |
|---|-----|-----|

90 Specialty Equipment Storage

| | | |
|---|-----|-----|
| 1 | 120 | 120 |
|---|-----|-----|

91 Anesthesia Workroom/Storage

| | | |
|---|----|-----|
| 4 | 75 | 300 |
|---|----|-----|

92 Medical Gas Storage Room

| | | |
|---|----|----|
| 1 | 30 | 30 |
|---|----|----|

93 Medication Station

| | | |
|---|---|---|
| 0 | 0 | 0 |
|---|---|---|

For daily back-up.

Automated Medication Dispensing Unit

| | | |
|---|----|----|
| 2 | 20 | 40 |
|---|----|----|

Share.

94

95 Clean Workroom Supplies

| | | |
|---|-----|-----|
| 1 | 180 | 180 |
|---|-----|-----|

Self-contained fixed or mobile unit; depends on operational concept; not included. Changed to included. Large Pyxis unit w/ security, IT and power to service ASC. Case specific drugs would be in OR Pyxis on or near anesthesia cart. All data feeds into Epic system.

96 Soiled Workroom

| | | |
|---|-----|-----|
| 1 | 180 | 180 |
|---|-----|-----|

Share. Added for Neptune/or similar and other soiled materials.

97 Blood Bank Refrigerator Alcove

| | | |
|---|----|----|
| 1 | 30 | 30 |
|---|----|----|

Temporary holding of portable blood bank refrigerator.

98 Environmental Services Room

| | | |
|---|----|----|
| 1 | 80 | 80 |
|---|----|----|

For OR's; share?

99 Clean Case Cart Holding

| | | |
|---|-----|-----|
| 1 | 120 | 120 |
|---|-----|-----|

Depends on operational concept; using case cart system? ~~Need to determine if 120 SF is adequate.~~

100 Soiled Case Cart Holding

| | | |
|---|-----|-----|
| 1 | 120 | 120 |
|---|-----|-----|

Depends on operational concept; using case cart system? ~~Need to determine if 120 SF is adequate.~~

101 Blanket warmers, hypothermia cart, other

| | | |
|---|----|----|
| 1 | 75 | 75 |
|---|----|----|

Space to be distributed based on final configuration.

102 Frozen Section Laboratory

| | | |
|---|----|----|
| 1 | 50 | 50 |
|---|----|----|

Depends on operational concept; not included. Added for quick prep or quick assessment.

103 Satellite Laboratory

| | | |
|---|----|----|
| 1 | 80 | 80 |
|---|----|----|

Depends on operational concept; not included. Added for quick prep or quick assessment.

104 Satellite Pharmacy

| | | |
|---|----|----|
| 1 | 50 | 50 |
|---|----|----|

Depends on operational concept; not included. ASC Pharmacy support

105 Biomedical Work Area

| | | |
|---|-----|---|
| 0 | 120 | 0 |
|---|-----|---|

Depends on operational concept; not included.

106 Decasing Room

| | | |
|---|----|---|
| 0 | 80 | 0 |
|---|----|---|

Sending/receiving for direct purchases; depends on materials distribution system; not included.

108 Subtotal ASF

2,595

110 Endoscopy Procedure Suite

112 Endoscopy Procedure Room

| | | |
|---|-----|-----|
| 2 | 300 | 600 |
|---|-----|-----|

| | | | | |
|-----|-----------------------------------|---|-----|-----|
| 113 | Prep/recovery bay | 4 | 110 | 440 |
| 114 | Recliner Chari (discharge Lounge) | 2 | 60 | 120 |
| 115 | Handwashing Station (scrub) | 2 | 25 | 50 |
| 116 | Patient Toilet Room | 2 | 60 | 120 |
| 117 | Nurse Station | 0 | 120 | 0 |
| 118 | Staff Toilet Room | 0 | 60 | 0 |
| 119 | Medication Preparation Room | 0 | 80 | 0 |
| 120 | Clean Workroom | 0 | 100 | 0 |
| 121 | Soiled Workroom | 0 | 80 | 0 |
| 122 | Equipment Storage Room | 0 | 100 | 0 |
| 123 | Environmental Services Room | 0 | 80 | 0 |
| 124 | Emergency Equipment Alcove | 0 | 15 | 0 |
| 125 | Mobile Equipment Alcove | 0 | 80 | 0 |
| 126 | Stretcher/Wheelchair Alcove | 0 | 30 | 0 |

Locate with visual control from pre-op/phase II recovery nurse station, but separate visually and acoustically from ASC patients.

For endoscopy procedure room; reduce to 10 ASF is standard hw station.

Directly accessible from endo procedure room and pre-procedure/recovery.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

Share with pre-op/phase II recovery area.

| | | | | |
|-----|---|---|-----|-----|
| 127 | Scope Cleaning/Storage:- Locate in Sterile Processing | | | |
| 128 | Decontamination Area | 1 | 120 | 120 |
| 129 | Scope Cleaning Room | 1 | 120 | 120 |
| 130 | Scope Storage | 1 | 60 | 60 |

Enclosed room/area separate from clean work area.

Includes pass-thru from decontamination area. Accommodate 2 scope cleaning pieces of equipment

Cabinet by vendor?

132 **Subtotal ASF** **1,630**

134 **Staff / Admin Support**

| | | | | |
|-----|---------------------------------|---|-----|-----|
| 136 | Office: Manager | 1 | 120 | 120 |
| 137 | Workstation: Clerical | 1 | 80 | 80 |
| 138 | Workstation: Resident/Student | 2 | 40 | 80 |
| 139 | Conference/Classroom | 0 | 0 | 0 |
| 140 | Audiovisual Room | 0 | 0 | 0 |
| 141 | Office Equipment/Supply Storage | 1 | 60 | 60 |
| 142 | Staff Lounge/Pantry | 1 | 340 | 340 |
| 143 | Male Staff Lockers/Changing | 1 | 180 | 180 |
| 144 | Male Staff Toilet/Shower | 1 | 180 | 180 |
| 145 | Female Staff Lockers/Changing | 1 | 180 | 180 |
| 146 | Female Staff Toilet/Shower | 1 | 180 | 180 |

Confirm staff.

Confirm staff.

"Off-stage" private space; confirm staff.

Share general conference room; not included.

Share.

Alcove with printer/copier/fax equipment and office supplies.

May adjust based on male/female #'s.

Includes 1 toilet, 1 urinal, 2 sinks, 1 shower; may adjust based on male/female #'s.

Includes 2 toilets, 2 sinks, 1 shower; may adjust based on male/female #'s.

May adjust based on male/female #'s.

148 **Subtotal ASF** **1,400**

150 **Sterile Processing**

Soiled and clean work areas shall be physically separated.

| | | | | |
|-----|----------------------------------|---|-----|-----|
| 152 | | | | |
| 153 | Supply Receiving/Breakdown | 1 | 120 | 120 |
| | Soiled Receiving/Decontamination | 1 | 240 | 240 |
| 154 | | | | |
| 155 | Washer/Sterilizer | 2 | 80 | 160 |

Work space for cleaning and initial washing of med/surg instruments and equipment; includes work counter, hw station(s), flushing rim clinical sink(s), washer/sterilizer(s), waste and soiled linen receptacles; soiled cart staging; pass-thru doors and washer sterilizers shall deliver items into clean processing workroom; need emergency eyewash shower?

Size will vary depending on vendor and capacity; check need for 1 or 2?

| | | | | |
|-----|-------------------------------|---|-----|---------------|
| 156 | Cart Washer | 1 | 120 | 120 |
| | Clean Assembly Workroom | 1 | 360 | 360 |
| 157 | | | | |
| 158 | Terminal Sterilizer | 2 | 100 | 200 |
| | Clean/Sterile Med/Surg Supply | 1 | 360 | 360 |
| 159 | | | | |
| 160 | Instrument Storage Area | 1 | 80 | 80 |
| | Cart Assembly/Holding Area | 1 | 100 | 100 |
| 161 | | | | |
| 162 | Supervisor Office | 1 | 100 | 100 |
| 163 | Female Locker/Change | 1 | 100 | 100 |
| 164 | Female Toilet Room | 1 | 160 | 160 |
| 165 | Male Locker/Change | 1 | 100 | 100 |
| 166 | Male Toilet Room | 1 | 140 | 140 |
| 167 | Staff Lounge/Pantry | 1 | 120 | 120 |
| 168 | Environmental Services Room | 1 | 80 | 80 |
| 169 | | | | |
| 170 | Subtotal ASF | | | 2,540 |
| 172 | Total ASF | | | 18,165 |
| 174 | ASF to RSF Factor | | | 1.55 |
| 176 | Total RSF | | | 28,156 |

Size dependent on vendor; pass-thru from decontam to clean assembly; check need?

Clean work space (pack/prep) with hw station(s) and equipment for terminal sterilization and/or high-level disinfection of med/surg equipment and supplies; includes clean cart staging; assumes reliance on an external (not in OPV) laundry/linen service.

Size will vary depending on vendor and capacity; check need for 1 or 2?

For receiving/unpacking clean/sterile supplies; adjacent to, but separate from the clean assembly workroom; includes storage for clean/sterile packs and HVAC provisions for ventilation, humidity and temperature control.

Depends on operational concept and use of case carts.

Depends on operational concept, type of cart and supply/instrument distribution system; locate adjacent to clean/sterile storage and near the primary clean cart distribution point.

60-100 ASF; depends on organization structure and staffing.

May change depending on male/female staff #'s.

2 toilets, 2 sinks, 1 shower; may change depending on male/female staff #'s.

May change depending on male/female staff #'s.

1 urinal, 1 toilet, 2 sinks, 1 shower; may change depending on male/female staff #'s.

Access to/from corridor, decontam and clean assembly.

NOTES/QUESTIONS:

1. For all data space and related requirements, see UCR IT information provided on OneDrive. For mechanical/electrical space refer to the "OPV Stacking with RSF" document as well as tk1sc engineering documents. Mechanical, electrical and data space is excluded from and incremental to the above program.
2. Developer shall provide a separate discharge exit for patient privacy.
3. Pre-surgical testing will take place in the OPV physician practices.
4. What is the plan for accommodating medical gases for the OPV?
5. Should staff and physician lockers/toilets/showers be separated?
6. The urgent care ambulance transfer access/egress will also support the transfer of internal OPV stretcher patients out of the OPV, most likely from the ASC. An elevator sized for stretcher patients shall be included in the OPV with horizontal proximity urgent care and on upper floors the ASC at a minimum.

8.4-SUM

SUMMARY SPACE REQUIREMENTS FOR AMBULATORY SURGERY AND ENDOSCOPY PROCEDURE SUITE

| S1 | ROOM / AREA | TOTAL ASF |
|-----|---|--------------|
| S3 | Patient Intake | |
| S5 | Subtotal ASF | 1,080 |
| S7 | Pre-Op Care & Post Anesthesia Care Unit | |
| S10 | Subtotal ASF | 4,700 |
| S13 | Operating Rooms | |
| S16 | Subtotal ASF | 4,220 |
| S18 | Operating Room Support | |
| S21 | Subtotal ASF | 2,595 |
| S23 | Endoscopy Procedure Suite | |
| S26 | Subtotal ASF | 1,630 |
| S28 | Staff / Admin Support | |
| S30 | Subtotal ASF | 1,400 |
| S32 | Sterile Processing | |
| S35 | Subtotal ASF | 2,540 |
| S39 | Total ASF | 18,165 |
| S41 | ASF to RSF Factor | 1.55 |
| S43 | Total RSF | 28,156 |

**UCR Health Outpatient Pavilion Project
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8.7 Detailed Space Requirements for Retail Pharmacy

8.7 DETAILED SPACE REQUIREMENTS FOR RETAIL PHARMACY

| LINE # | ROOM / AREA | UNIT | ASF | TOTAL ASF | COMMENTS |
|--------|---|------|-----|--------------|--|
| 1 | Waiting Area | 1 | 200 | 200 | |
| 2 | Prescription Drop-Off Window | 2 | 40 | 80 | One for students, one for retail |
| 3 | Prescription Pick-up & Cashier Station | 2 | 40 | 80 | One for students, one for retail |
| 4 | Consult Cubicle | 2 | 60 | 120 | Includes patient education. |
| 5 | Consult Room | 4 | 90 | 360 | These can be used for injections, education, etc. |
| 6 | Team/Conference Room | 1 | 180 | 180 | Used for team meeting, teaching, etc. |
| 7 | Compounding, Anteroom, Sterile (Neg Pressure) | 1 | 275 | 275 | Dedicated exhaust required; Ante room 75sf, Workstation w/hood 100sf, Workroom 100 sf, Additional discussion is required. |
| 8 | Compounding, Anteroom, Non-Sterile (Neg Pressure) | 1 | 275 | 275 | Dedicated exhaust required; Ante room 75sf, Workstation w/hood 100sf, Workroom 100 sf, Additional discussion is required. |
| 9 | Narcotic Vault | 1 | 75 | 75 | |
| 10 | ASC drug processing, storage, distribution and management | 1 | 400 | 400 | Need to discuss how this works with the retail and student pharmacy. Stocking and management of Pyxis or similar. Due to type of drugs being used, this will require security access to ASC. |
| 11 | Dispensing Station | 4 | 60 | 240 | All necessary security provisions shall be provided. |
| 12 | ASC Office Management | 1 | 110 | 110 | Pharmacist managing and coordinating ASC requirements. |
| 13 | Retail Display Area related to clinical/ASC services | 1 | 400 | 400 | Need to confirm products and space required |
| 14 | Fill Area/Working Stock | 1 | 800 | 800 | Detailed configuration of space will be developed during design development |
| 15 | Handwashing Station | 2 | 10 | 20 | |
| 16 | Refrigerator/Freezer | 2 | 30 | 60 | This assumes that vaccines are delivered through the clinical offices. |
| 17 | Receiving/Breakdown Area | 1 | 100 | 100 | Receive from materials management or direct? In either case, all necessary security provisions shall be provided. |
| 18 | Bulk Storage | 1 | 300 | 300 | |
| 19 | Staff Toilet | 3 | 60 | 180 | |
| 20 | Office: Manager | 1 | 110 | 110 | |
| 21 | Office Students | 1 | 110 | 110 | |
| 22 | Office - Retail | 1 | 110 | 110 | |
| 23 | Workstation: assistant/tech | 1 | 60 | 60 | |
| 24 | Staff Locker Alcove | 2 | 85 | 170 | |
| 26 | Subtotal ASF | | | 4,815 | |
| 28 | ASF to RSF Factor | | | 1.35 | |
| 30 | Total RSF | | | 6,500 | |

NOTE:

1. For all data space and related requirements, see UCR IT information provided on OneDrive. For mechanical/electrical space refer to the "OPV Stacking with RSF" document as well as tk1sc engineering documents. Mechanical, electrical and data space is excluded from and incremental to the above program.

2. OPV Pharmacy location, hours of operation, plan and design must be reviewed and approved by UCR pharmacy and security representatives.

3. The above should be considered a "spec" program; RSF will vary depending on the ultimate pharmacy operation.

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University Furnished Information (Under Separate Cover)