97:14

Ralph J. Stephenson, P. E., P. C. Consulting Engineer 323 Hiawatha Drive Mt. Pleasant, Michigan 48858-9096 ph 517 772 2537 April 25, 1997

Dale R. Lostetter, P.E. P.J. Dick, Inc. P.O. Box 98100 Pittsburgh, Pa. 15227-0100

Re: Project Partnering Charter revisited, for V. A. Hospital, Ann Arbor, Michigan

Dear Mr. Lostetter:

Enclosed is a copy of my recently published partnering book that I discussed with you by phone on Friday, April 25, 1997. It contains most of the material I provided you in loose note form at the original partnering session for the Ann Arbor, Michigan project.

As you are aware, the charter should be used in close conjunction with a well thought out evaluation system, and a workable issue resolution system. We will concentrate on revisiting and, as appropriate, updating the charter in our meeting on Tuesday, May 6, 1997. I shall prepare the workbook to be used in this workshop and mail it to you early the week of April 28, 1997 for reproduction.

For more up-to-date information about evaluation and issue resolution see Chapters 12 and 13 in the enclosed Project Partnering for the Design and Construction Industry book. Our second workshop should concentrate on these subjects relative to the project as it stands now. We should plan to utilize comments of the current project team to make desired revisions for reissue of the charter. The evaluation sheets being gathered by the VA should materially help the participants work well in the conference.

I'm looking forward to again working with you and your project staff. It will be an opportune time to revisit the charter and to plan for maintaining good performance by the project team. Thank you for calling.

Singerely your

Ralph J. Stephenson, P. E.

enclosure: partnering book

Ralph J. Stephenson, P. E. Consulting Engineer

PARTNERING CHARTER SESSION #2

Clinical Addition and Renovation - Veterans Administration Medical Center Partnering Charter Meeting Ann Arbor, Michigan

- Date: Tuesday, May 6, 1997
- Location: Ypsilanti, Michigan
- Time: 8:00 A. M. to 12:00 noon & 1:00 P. M. to 4:30 P. M.

Ralph J. Stephenson, P. E. Consulting Engineer

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PARTNERING CHARTER WORK BOOK PARTNERING #2

Clinical Addition and Renovation - Veterans Administration Medical Center - Tuesday May 6, 1997

Ypsilanti, Michigan

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Veterans Administration Medical Center Clinical Addition and Renovation Phase III Clinical Addition Building 1 East

Arbor, Michigan

<u>Charter for Clinical Addition Phase III, Building 1 East - VAMC Ann Arbor,</u> Michigan

A. Mission.

We commit to achieve the safe and efficient construction of a quality, state-of-the-art, clinical addition, meeting the health care needs of our veterans through a profitable and satisfying partnership following the principles of mutual trust, integrity and personal pride.

B. Objectives: In furtherance of their mission, the stakeholders on the VAMC Ann Arbor, Michigan. Clinical Addition shall endeavor to:

- 1. Regularly monitor and discuss, all anticipated outages with utility company and subcontractor input and provide maximum possible notice to the user of anticipated outages.
- 2. Provide reasonable FCO and COCO budgets and identify insufficient budgets promptly.
- 3. Accurately price changes to the project in a timely, reasonable and fair manner.
- 4. Approve changes in a timely manner including formal issuance of supplemental agreements.
- 5. Maintain a clean, secure, accessible and well-planned job site.
- 6. Prepare and respond promptly to requests for information and clarifications of contract documents.
- 7. Prepare, distribute and regularly monitor and discuss, with VA and subcontractor input, a master project schedule, and update the schedule as required.
- 8. Fulfil their respective responsibilities and commitments to permit on-time completion of the project.
- 9. *Prepare and publish an issue resolution policy which stresses the timely resolution of conflict at the originating or lowest possible management level and seeks to avoid litigation.
- 10. Close out the project in a proper and timely fashion avoiding:
 - a) Premature requests for punch list inspection.
 - b) Inclusion of non contractual requirements.
 - c) Multiple punch lists of the same area.
- 11. Communicate effectively in an open, honest manner with all appropriate stakeholders.
- 12. Communicate the conditions and disruptive circumstances inherent in the demolition and construction activities, to the operations staff of the hospital.
- 13. Prepare, package, and process submittals in a timely, fair, and considerate manner consistent with the priorities of the contractors, designers, and the VA.
- 14. Respect and treat others' work as you wish your work to be treated; accept responsibility for damage to others' work.
- 15. Provide complete and unencumbered access to needed work areas in accordance with the project schedule.
- 16. *Prepare, publish and implement a partnering evaluation system.
- 17. Treat others as you would have them treat you.
- 18. Make decisions in a timely manner and stand by the agreements you have made.
- 19. Prepare well for progress meetings and make them brief and productive.

Footnotes:

*indicates item to be prepared by stakeholders () indicates responsibility for an item

PN

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Clinical Addition and Renovation - Veterans Administration Medical Center Ann Arbor, Michigan

PARTNERING WORKSHOP #2 MEETING AGENDA

Tuesday May 6, 1997 Ypsilanti, Michigan

• <u>07:30 to 08:00 a.m.</u> - Coffee for attendees

• 08:00 to 08:15 a.m. - Introduce participants

• <u>08:15 to 08:40 a.m.</u> - Review project as of May 5, 1997 - VA project team with partnering stakeholders

Project progress in field Outstanding issues Issue resolution system being applied Evaluation system being applied Current evaluation of project

• <u>08:40 to 09:15 a.m.</u> - Review current partnering and partnering methods, and procedures - Ralph J. Stephenson, chair.

• <u>09:15 to 09:45 a.m.</u> - Review construction partnering meeting #1 workshop and results.

Workshop #1 - "What actions do others take during design, construction, and move-in that create problems for us?"

Workshop #2 - "What actions do we take during design, construction, and move-in that create problems for others?"

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Workshop #3 - Attendees write individual mission statements.

Workshop #4- "Considering your team's comments in Workshops #1 and #2, what can all of us do to help promote good relations and excellent performance on the VA Ann Arbor hospital project design, construction, and move-in?"

• <u>09:45 to 10:00 a.m.</u> - Break out work sessions to review current charter mission and suggest recommendations for improvement - comments to be recorded by team secretaries on flip charts.

Mission statement workshop

• How well does the current mission statement fit the project mission as you view it?

• What are the strong features of the current mission statement?

• How well does the current mission statement define the single most important result to be obtained for you and your company by the project being successfully completed?

- What changes do you recommend be made to the mission statement?
- As a team rewrite the mission statement in 25 words or less. Note: The team mission statements will be used by the project mission task force to revise the project mission as may be desired.
- <u>10:00 to 10:20 a.m.</u> Coffee break
- <u>10:20 to 10:45 a.m.</u> Complete mission statement workshop

• <u>10:45 to 11:50 a.m.</u> - Charter objectives workshops - consider the following two questions:

"What actions do others take during design, construction, and move-in that create problems for us?" -- and

"What actions do we take during design, construction, and move-in that create problems for others?"

• How well do the current charter objectives define what must be accomplished if the project is to be successfully completed?

• What are the features of the current charter that are critical to project

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success?

• What are the features of the current charter that should be strengthened?

Note: As a starting point you might consider the following alphabetical listing of subjects within which many current planning, design and construction problems are found to originate. The list below was distilled from approximately 2,,800 problem statements, prepared in 23 charter writing sessions.

- 01. Approval processes apv
- 02. Backcharges bch
- 03. Constructibility cbl
- 04. Construction document quality cdq
- 05. Cost growth cgr
- 06. Closing out the project clo
- 07. Contract interpretation coi
- 08. Communicating with others cwo
- 09. Decision making dma
- 10. Documents and documentation doc
- 11. Equipment and materials emp
- 12. Financial matters fin
- 13. Issue, conflict, and problem resolution ire
- 14. Inspecting and testing ite
- 15. Job management jma
- 16. Labor conditions lab
- 17. Legal matters leg
- 18. Maintaining project evaluations mpe
- 19. Organization, authority, and responsibility oar
- 20. Being a good off-site neighbor ofn
- 21. Being a good on-site neighbor onn
- 22. Planning and scheduling pas
- 23. Paper and administrative work pas
- 24. Project cost structure pco
- 25. Policies and procedures pop
- 26. Payment processing ppr
- 27. Personnel quality and problems pqp
- 28. Procurement of materials and equipment prc
- 29. Program conditions prg
- 30. Quality management qma

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- 31. Regulatory agency matters reg
- 32. Revision processing rev
- 33. Safety saf
- 34. Substitutions and alternates sal
- 35. Staff morale and attitudes sma
- 36. Submittal processing spr
- 37. Staffing and manpower stf
- 38. Timely action tac
- 39. Time growth tgr
- 40. Training tng
- 41. User group interaction ugi
- 42. Value engineering ven
- 43. Warranty conditions war
- 44. Weather conditions wea
- 45. Work site conditions wsc

• What changes do you recommend be made to the current charter objectives that will improve the partnering process, and the project performance?

• <u>11:50 to 12:00 a.m.</u> - Appoint project mission task force to redraft mission statement as needed

• <u>12:00 noon to 01:00 p.m.</u> - Lunch

• <u>12:45 to 01:20 p.m.</u> - Project mission task force redraft the current project charter mission statement as may be felt needed.

• <u>1:00 to 01:20 p.m.</u> - Table groups complete discuss recommended changes to the current charter

• <u>01:20 to 01:35 p.m.</u> - Full group discuss suggestions for changes to the project partnering mission, as recommended by the project mission task force.

• <u>01:35 to 02:50 p.m.</u> - Full group suggest and review possible revisions to the project charter as discussed in break out sessions.

- 02:50 to 03:10 p.m. Refreshment break
- 03:10 to 03:30 p.m. Complete discuss revisions to mission and charter and prepare

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final draft for review of stakeholders.

• <u>03:30 to 04:00 p.m.</u> - Review future evaluation of project partnering performance and set procedures for review.

• <u>04:00 to 04:10 p.m.</u> - Review issue resolution processes and revise as needed.

• <u>04:10 to 04:20 p.m.</u> - Make final review of charter mission statement and objectives.

• <u>04:20 to 04:30 p.m.</u> - Print charter and stakeholders sign.

• <u>04:30 p.m.</u> - Adjourn

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Clinical Addition and Renovation - Veterans

Administration Medical Center

Ann Arbor, Michigan

Tuesday May 6, 1997

Partnering Reference Material

Purpose of meeting:

To revise and update the partnering construction charter for the guidance of the Veterans Administration Ann Arbor Clinical Addition and Renovation project team.

Definitions:

• Alternative dispute resolution

A method of resolving disputed construction claims outside the courtroom.

• Issue resolution

A method of reaching agreement and closing out disputes at the originating management level, in the shortest possible time, and with the lowest potential for residual hard feelings.

• Mission

The single most important goal to achieve by being successful in the project organization's principal efforts.

• Must list

Those items that must be included in the scope of work to make the project a go. If any of the items in the must list are not able to be included the project is abandoned.

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• Objectives

Quantified targets derived from the established mission and goals.

• Partnering

A way of achieving an optimum relationship between a customer and a supplier. A method of doing business in which a person's word is their bond, and where people accept responsibility for their actions.

Partnering is not a business contract, but a recognition that every business contract includes an implied covenant of good faith - from AGC definition

• Partnering

A method of conducting business in the planning, design, and construction profession without unnecessary, excessive, or disruptive external party involvement.

• Partnering charter

The basic manual for operating a partnering system. Contains the mission statement of the project team, and their objectives for the project. Usually is signed by all those writing the document.

The charter is an agreement in principle and must not supersede or supplant the design and construction contracts in place or to be written.

Resolution

A course of action determined or decided upon that can result in clearing conflict or dispute.

• Task force

A temporary grouping of forces and resources designed to achieve a specific objective.

• UDM

Ultimate decision maker - the individual or group at the lowest management level that has the authority to make a final binding decision in any job related matter.

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• Want list

Those items that are wanted and can be included in the scope of work, over and above the must list items, since they provide a definable and acceptable rate of return on their cost.

• Wish list

Those items that the owner and the user wish they could include but might not be able to due to budgetary or other reasons. Wish list items are best added, not deleted, as the project moves into construction.

• Workshop

The meeting structure through which table or full partnering discussions are conducted. Usually participation is required of all attending.

Workshop Reference information:

• <u>Workshops #1 and 2</u> - "What actions do others take that create problems for us?", and "What actions do we take that create problems for others?"

Examples of specific answers within the above categories to these questions are listed below. These are sample responses taken from actual charter meeting.

- Giving directions to proceed without a timely change order.
- Failing to establish clear chain of command.
- Lack of timely acceptance of work.
- Lack of timely responses.
- Slow payment.
- Closed mind (preconceived solution).
- Failure to solicit subdesign expertise.
- Design without feedback.
- Failure to understand goals.
- Not thinking hard enough; using easy choice instead of best choice.
- Lack of support for value engineering, sometimes fail to seek out value.
- Inaccurate estimated.
- Inaccurate schedules.
- Clear definition of must, wants, and wishes.
- Challenge too late.
- Clear definition of what approval means.
- Thoughtful/meaningful review and participation in design/program process.

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- Timely delivery information on owner supplied equipment.
- Be available.
- Surprises.
- Sharing goals and vision at early stage.
- Firm budget (proforma).
- Space squeeze.
- Clear understanding of design criteria.
- Second guessing after decisions.
- Lack of understanding of owner's goals.
- Weak or late code research.
- Willingness to consider constructibility.
- Must be candid in our review and assessment of design information.
- Give equal consideration to all design disciplines.

• <u>Workshop #3</u> - Example of responses to the question -" What is the single most important goal to be achieved by my organization and me by the VA Ann Arbor project being successfully completed?" (Edited samples from actual charter meetings.)

- To build a quality project with the total commitment of all involved from owner to tradesperson, and finish the project with pride and satisfaction to all.

- To complete the project within budget, on time, to the quality standards desired by the owners. To develop a prequalified team that can be used on future projects.

- Our *mission* is to complete the project safely, on time, and within budget, working in a spirit of cooperativeness & respect for all parties involved.

- We seek to work together as a team to produce a quality project on time, safely, and within budget, with a fair profit realized by all parties involved.

- We recognize the common goal to finish this project with the highest quality, on time, and within budget, & agree to work together safely, as a team with trust and cooperation.

- Complete the project with the highest level of quality, on time, and within the budget so that all of the team members want to do the next project together.

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- To provide a quality building within the budgeted time & cost - earning a fair profit & having fun doing it.

- To work in harmony with all team players to provide a project that everyone can be proud of.

- Work together as a team to build a quality building in a safe and cost effective way.

- To furnish to the owner a quality installed system in a timely manner, considering all people involved, at a profit.

- To have the customer delighted with the project at its completion.

- To achieve the highest quality building possible for the owner that satisfies their needs and objectives, within budget and schedule parameters.

• <u>Workshop #4</u> - Example of responses to the question - "Considering your team's mission and the objectives you have, what can all of us do to encourage good relations and excellent performance on this specific project?" (below are listed some edited samples from an actual charter meeting)

- Exhibit less defensiveness/more openness.
- Resolve disputes fast.
- Don't take issues personally.
- Be willing to propose/suggest solutions.
- Prioritize submittals.
- Recognize owner's need to eventually occupy, operate and maintain the facility and systems.
- Recognize the importance of paper work.
- Allow necessary contract time for training.
- Prepare & publish FFE budget.
- Prepare & publish preconstruction guidelines.
- Make decisions promptly.
- Prepare & publish payment policy.
- Prepare, publish and update schedule for entire project.
- Maintain an effective mode of communication on project.
- Provide approvals promptly from proper management level.
- Provide forum for periodic total project review by entire preconstruction team.

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- Do it right the first time.
- Define community image to be projected by project team and the facility.
- Establish an issue resolution process.
- Resolve issue promptly at originating level.
- Strive to avoid litigation.
- Generate and maintain high levels of project morale.
- Exhibit and expect others to exhibit good partnering practices.

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DESTRUCTIVE CONFLICT

Animosity or disagreement which results in lowering the potential for an individual or organization to succeed.

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PEOPLE

Most people are honest, concerned, desirous of challenge, need attention, and welcome help in times of turmoil.

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POSITIVE CONFLICT

Hostility that is managed so that its resolution raises the potential for individuals or organizations to succeed at being excellent.

WHAT IS PARTNERING?

• 1. Partnering is a **system of conducting business** that maximizes the potential for:

- a) Achievement of project *intent*.
- b) Obtaining specified **quality**.
- c) Encouraging healthy, ethical customer/supplier <u>relationships</u>.
- d) Adding value.
- e) Improving <u>communication</u>.

f) Providing methods of project condition <u>measurement & feedback</u>.

g) Providing methods of quickly <u>resolving conflicts</u> by non destructive means at optimal levels of management.

2. Partnering provides the basis for <u>preventive</u> methods of <u>dispute</u>
 <u>resolution</u>.

• 3. Partnering is an agreement in **principle**, and **must not supersede** or supplant the planning, design, and construction **contracts** in place or to be written and executed.

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PARTNERING

A way of achieving an optimum relationship between a customer and a supplier. A method of doing business in which a person's word is their bond and where people accept responsibility for their actions.

Partnering is not a business contract, but a recognition that every business contract includes an implied covenant of good faith.

Associated General Contractors of America

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Partnering systems in use today

• Project partnering

A method of conducting business in the planning, design, and construction profession without the need for unnecessary, excessive and/or debilitating external party involvement. Mainly used project-by-project, and tailored to specific job conditions. It addresses a moral agreement in non contract matters.

• Strategic partnering

A formal partnering relationship specifically designed to enhance the success of multi-project experiences on a long term basis. Just as each individual project partnering system must be maintained, strategic partnerships must also be maintained by periodic review of all projects currently being performed.

• Organizational partnering

A system of internal relationships established when the spirit of project partnering is incorporated into the total operating mode of an organization. Organizational partnering, well done, is designed to improve the probability of short and long term operating success. Often organizational partnering is applied with little awareness of it being in use. Organizational partnering should be made an integral part of project and strategic partnering applications for it to add its full value to the organization.

<u>COMPONENTS OF A PROJECT</u> <u>PARTNERING SYSTEM</u>

<u>Charter</u> - Defines the mission and the partnering goals and objectives of the project team

Evaluation System - Describes how the project partnering status will be measured, evaluated and maintained.

Issue Resolution System - Defines steps to be taken to resolve project disputes as they occur on the job.

MISSION

The most important result to be achieved by this project being successfully completed?

<u>GOALS</u>

Unquantified desires of individuals or an organizations expressed without time or other resources assigned.

OBJECTIVES

Quantified targets derived from established goals.

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MISSION

A statement of the most important result to be achieved by this project being successfully completed.

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• The eight most frequently mentioned design & construction problems. From a total of 2,855 responses to the question "what job difficulties are caused by us and by others?"



Problem Type

05/10/95



Sample Charter

I. Charter for new Detroit, Michigan Post Office, Area P

A. Mission

This partnering team commits to deliver a quality project on time, within budget, safely, profitably for all, and of the intended quality, through mutual cooperation among the participants.

- B. Objectives
 - 1. Maintain a clean and well maintained work site
 - a) Experience no lost time from accidents.
 - b) Be a good neighbor.
 - c) Use good construction site housekeeping practices.
 - 2. Effectively administer the project
 - a) Prepare & publish an acceptable payment procedure.
 - b) All parties submit complete, accurate & timely billings.
 - c) Prepare & publish an acceptable submittal processing procedure.
 - d) Treat each other fairly
 - 3. Close out the project in a proper & timely fashion
 - a) Prepare & publish acceptable close out guidelines.
 - b) Establish clearly defined punch out procedures and standards early in the project.
 - 4. Maintain effective lines of communication.
 - a) Recognize the need for quality information.
 - b) Minimize response times in all matters.
 - c) Maintain an appropriate level of documentation.
 - d) Be available.
 - 5. Resolve problems effectively
 - a) Develop, approve, and implement a responsive conflict resolution system
 - b) Resolve disputes and conflicts at the originating level if at all possible.
 - c) Resolve disputes and conflicts as quickly as possible.
 - d) Eliminate the need for third party legal involvement
 - 6. Limit cost growth
 - a) Maintain objective attitude toward constructability.
 - b) Develop cost effective measures to apply to all job related activities.
 - c) Recognize owner's needs in occupation and operation of project.
 - 7. Maintain technical excellence in all program, design & construction work.
 - a) Owner abate promptly as required
 - b) Define and clearly communicate quality standards expected
 - c) Maintain constructability of the project.
 - d) Properly plan and schedule the work.
 - e) Do it right the first time.
 - 8. Maintain good job morale & attitudes
 - a) Promote partnering attitudes at all levels of contract administration.
 - b) Have pride in your work.
 - c) Have fun.
 - 9. Maintain partnering effectiveness
 - a) Prepare and publish a partnering effectiveness measurement system.
 - b) Meet on a scheduled, regular bases and formally evaluate the partnering effectiveness.
 - c) Take prompt steps to correct any deterioration of partnering effectiveness on the project.

II. Issue resolution

A. Policy

It is the objective of the Area P Post Office project team management to first and foremost avoid unnecessary disputes and conflict on the job. It is the intent to do this by achieving the objectives of the charter, particularly to resolve an issue promptly and at the level at which it originates. If this is not possible the issue will be referred promptly to the next highest level for resolution.

In all cases, individuals who are involved in a difference should be businesslike and not resort to personal attack. The principles outlined in the Partnering Charter mission and charter should be followed at all times in resolving differences.

Upon request, site meetings will be convened to discuss any unresolved issue and to attempt to reach resolution. Any issue presented should be clearly defined and alternative solutions suggested. The resolution process is to work through open communication and looking at the other side's point of view. In addition, issues are to be kept in the forefront to ensure resolution in a timely manner. A log of unresolved issues will be maintained from meeting to meeting.

if resolution cannot be reached at the job site, the principals of the involved firms or agencies should attempt to reach resolution through informal discussion before the formal process outlined in the contract documents is used.

In seeking resolution to an issue, involved parties will attempt to:

- Thoroughly understand the issues.
- Maintain empathy for the other point of view.
- Communicate thoughts openly and clearly.
- Clearly document the issue resolution.

B. Methodology

Goal - To encourage and provide a forum for resolution of issues at the lowest possible level, but to provide a mechanism to elevate the issue if needed.

If resolution is not achieved at the lowest level forum, the principals in the firms in conflict will attempt to reach resolution thorough informal discussion.

III. Partnering evaluation

Each objective in the Charter is to initially be given a par weight as indicated below. The par weight indicates how important the item is in relation to achieving the project mission. Weights are assigned from 1 to 5. A weight of 5 indicates that the objective is of critical importance in achieving the project mission. A weight of 1 indicates that the objective is of least importance when evaluated against the highest weighted objectives.

The weight of the objectives remains constant throughout the project. Therefore care must be taken in assigning them properly at the onset of the evaluation process.

The quality of the project performance in relation to the Partnering Charter objectives is to be measured once per month by representatives of all organizations participating in writing the Charter. Partnering performance quality ratings are to be from 1 to 5.

Ralph J. Stephenson P. E., P. C. Consulting Engieer

A quality rating of 1 indicates very poor performance and little adherence to the standards set out by the objective. A quality rating of 5 indicates high and excellent adherence to standards set by the objectives.

The total evaluation of the objective is the constant weight multiplied by the quality for each objective for each evaluation. The total partnering performance is measured at each evaluation.

E.

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Total partnering performance = total of the (objective weights x the objective quality) for the period.

1 - objective	2 - par weight (w)	3 - par quality (q)	4 - par (w) x (q)	current quality	current (w) x (q)
01. Maintain a clean and well arranged work site	3.00	2.50	7.50	2.25	6.75
02. Effectively administer the project	4.50	3.75	16.88	3.50	15.75
03. Close out project in a proper and timely fashion	4.00	3.50	14.00	2.00	8.00
04. Maintain effective lines of communication	4.25	3.75	15.94	3.00	12.75
05. Resolve problems effectively	4.50	4.00	18.00	4.00	18.00
06. Limit cost growth	2.50	2.25	5.63	2.25	5.63
07. Maintain technical excellence in all program, design and construction work	3.50	3.00	10.50	3 . 2 5	11.38
08. Maintain good job morale and attitudes	2.50	2.25	5.63	2.00	5.00
09. Maintain partnering effectiveness	4.00	3.75	15.00	3.25	13.00
A v e r a g e :	3.64	3.19	12.12	2.83	10.69

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Veterans Administration Medical Center

Clinical Addition and Renovation Phase III Clinical Addition Building 1 East Ann Arbor, Michigan

7. Table assignments

- 1. Table #1- Veterans Administration Project Management.
 - 1. George Cox
 - 2. Robert Hellman Veterans Administration Resident Engineer BHE
 - 3. Swen Householder Veterans Administration Resident Engineer SHO
 - 4. George Karaboyias Resident Engineer
 - 5. Randy McMasters Veterans Administration Senior Resident Engineer RMC
 - 6. Frank Romania
- 2. Table #2 Harley Ellington Design.
 - 1. Dave Carpenter HED Lead Architect DCA
 - 2. Dan Hoey HED_Project Architect DHO
 - 3. Don Rowe
 - 4 Ron Siehda Lead Electrical Engineer
 - 5. Jeff Zokas HED Project Manager JZO
- 3 Table #3 P.J. Dick Company
 - 1. Barry Bandura P. J. Dick Project Manager BBA
 - 2 John Berkebile P. J. Dick Project Engineer JBE
 - 3. Tim Hanna P. J. Dick Project Manager
 - 4. Dale Lostetter P. J. Dick Vice President Operations DLO
 - 5. Gary Mizla P. J. Dick
 - 6. Neil Mutschler P. J. Dick
 - 7. Eric Stephenson P. J. Dick

4. Table #4 - Mechanical and electrical subcontractors

- 1. Bill Underwood Controls contractor Landis and Gyr Powers BUN
 - 2. Dave Botbyl Kent Electric Services, Inc.
 - 3. Dave Murphy Kent Electric Services, Inc.
- 4. Doug Walz Kent Electric Services, Inc.

5. Table #5 - Close in subcontractors

- 1. Cletus Adkins Cooperative Roofing Systems
- 2. Gary Alden Huron Valley Glass Company
- 3. Sal Biundo Giannola Masonry Company
- 4. Mike Crawford Giannola Masonry Company
- 5. Earl Waldrop Superior Siding & Decking
- 6. Table #6 Interior work subcontractors

7. Unassigned- to be placed

- 1. John Appruzese Ornamental Ironwork Co,
- 2. James Brunelle Robert Irsay Company (RICO)
- 3. Len Friedman S.A. Comunale Co.
- 4. Bill Gelina Robert Irsay Company (RICO)
- 5. Dave Holland S.A. Comunale Co.
- 6. Jeff Lange Robert Irsay Company (RICO)
- 7. Bruce Lawrence Delta Construction Associates
- 8. Bill Maur Lasco Contractors, Inc.
- 9. Don Meyer Automated Construction Technologies
- 10. David Norris Lasco Contractors, Inc.
- 11. Al Simmons S.A. Comunale Co.
- 12. Wade Sylvester S.A. Comunale Co.

Veterans Administration Medical Center

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Clinical Addition and Renovation Phase III Clinical Addition Building 1 East Ann Arbor, Michigan

7	. Table assignments
	1. Table #1- Veterans Administration Project Management
	1. George Cox
	2 Robert Hellman - Veterans Administration - Resident Engineer - BHE
	✓3. Swen Householder - Veterans Administration - Resident Engineer - SHO
	✓4. George Karaboyias - Resident Engineer
	5. Randy McMasters - Veterans Administration - Senior Resident Engineer - RMC
	10 Frank Romania CHAI KYRGOS - DROJ. MGR. DC
	2 Table #2 - Harley Ellington Design.
	1. Dave Carpenter - HED - Lead Architect - DCA
	-2-Dan Heay HED_Projed Architect - DHO VACADON R. C. C.
	3. Don Rowe
	🖌 🖟 Ron Siehda - Lead Electrical Engineer
	V_5 . Jeff Zokas - HED - Project Manager - JZO
	3. Table #3 - P.J. Dick Company
	1. Barry Bandura - P. J. Dick - Project Manager - BBA
	2 John Barkobilo P. J. Diak Project Engineer JBE JOS
	 Tim Hanna - P. J. Dick - Project Manager
	74. Dale Lostetter - P. J. Dick - Vice President Operations - DLO
	- Gary Mizla P. J. Dick JOS
	6. Neil Mutschler - P. J. Dick
	✓ 7. Eric Stephenson - P. J. Dick
	4. Table #4 - Mechanical and electrical subcontractors
	 Bill Underwood - Controls contractor - Landis and Gyr Powers - BUN
	V2 Dave Botbyl - Kent Electric Services, Inc.
	3. Dave Murphy - Kent Electric Services, Inc.
	4. Doug Walz - Kent Electric Services, Inc.
	5. Table #5 - Close in subcontractors
	1. Cletus Adkins - Cooperative Rooning Systems
	2 Gary Alden - Huron Valley Glass Company
	 Sai Bundo - Giannola Masonry Company A Mile Consultant Company
	4 Mike Grawking Grannica Maschry Company
	6 Table #6 Interior work subcontractor
	7. Unassigned to be plaged
	1. John Annauzese - Ornamental Ironwork Co
	2 James Brunelle - Robert Irsay Company (RICO)
	/3 Len Friedman - S.A. Comunale Co. A & C.
	4 Bill Gelina - Robert Irsay Company (RICO) M& E
	E Dave Holland - C A Commele Co
	V6 Jeff Lange - Robert Irsay Company (RICO)
- ALA	$5 \rightarrow 7$ Bruce Lawrence - Delta Construction Associates
Jun.	8 Bill Maur - Lasco Contractors Inc. TARIE. (0
	>9. Don Meyer - Automated Construction Technologies TARIE 3
	10. David Norris - Lasco Contractors, Inc. TASLE 6
	-11- Al-Simmons S.A. Comunalo Ga-
	12. Wade Sylvester S.A. Comunate Co. MIE

Jeterans Administration Medical Center

Ralph J. Stephenson, P.E. Consulting Engineer

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8. Table work notes

1. Table #1- Veterans Administration Project Management.

- 1. Group members
 - 1. Robert Hellman Resident Engineer
 - 2. Swen Householder Resident Engineer
 - 3. George Karaboyias Resident Engineer
 - 4. Randy McMasters Senior Resident Engineer
 - 5. George Cox
 - 6. Chris Kyrgos
- 2. Problems others cause us
 - 1. Keep project schedule correct and realistic
 - 2. Quality control and coordination
 - 3. Errors and omissions
 - 4. Inaccurate cost proposals
 - 5. Submittals not fully coordinated
 - 6. Time extension request problems
 - 7. Lack of understanding owner's goals
 - 8. Confrontational & defensive attitudes & correspondence
- 3. Problems we cause others
 - 1. Owner/client requested changes
 - 2. Realistic completion dates for owner occupancy
 - 3. Lack of available rough-in information
- 4. Recommendations
- 2. Table #2 Harley Ellington Design.
 - 1. Group members
 - 1. Dave Carpenter Lead Architect
 - 2. Don Rowe
 - 3. Ron Siehda Lead Electrical Engineer
 - 4. Jeff Zokas Project Manager
 - 5. Lowell Hanson VA medical center
 - 2. Problems others cause us
 - 1. Late design changes.
 - 2. Timely shop drawings submittals
 - 3. Complete shop drawing submittals (must contain info specific to item)
 - 4. Time required for change order process.
 - 1. Idea --> co written --> co approved --> co quotes
 - 5. Completion of project (including punch list items) prior to start of next phase.
 - 6. Equipment provided by owner and contractor intalled
 - 1. Coordinate timing of delivery & installation
 - 2. Protection of equipment delivered early

- Timely and complete training for owner's staff for all equipment specified
 Follow up training for all equipment specified
- 8. Provide adequate advance notice to owner for power, shut downs, road closings, parking changes, etc.
- 3. Problems we cause others
 - 1. Drawing clarifications.
 - 2. Timely, accurate response to rfi's
 - 3. Shop drawing turn around time
 - 4. Station driven design modifications created by new staff
 - 5. Late delivery of owner supplied equipment
 - 6. Coordination of installation of owner contracted telecommunication system during clinical addition construction.
- 4. Recommendations
- 3. Table #3 P.J. Dick Company
 - 1. Group members
 - 1. Barry Bandura Project Manager
 - 2. Tim Hanna
 - 3. Dale Lostetter Vice President Operations
 - 4. Neil Mutschler
 - 5. Eric Stephenson
 - 6. Don Meyer
 - 2. Problems others cause us
 - 1. Design
 - 1. Untimely changes
 - 2. Undear & incomplete direction to changes made.
 - 3. Slow final resolution to design changes
 - 4. Late VV, VC information
 - 2. Construction
 - 1. Premature delivery & overstocking of material
 - 2. Lack of clean up participation by subcontractors
 - 3. Manpower -- availability & attitude
 - 4. Timely subcontractor submission of invoices
 - 5. Timely subcontractor submission of co proposals
 - 6. Not respecting the work of others
 - 7. Timely, fair & complete resolution of time related isues & costs.
 - 8. Not allowing others reasonable opportunity to do their work
 - 9. Lack of subcontractor involvement to insure an dsafe project. (ie replace handrail)
 - 3. Move in -- close out
 - 1. Receipt of complete comprehensive punch list

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- 2. Undear, inconsistant application of close-out and turn-over process
- 3. Limit of decision making authority
- 3. Problems we cause others
 - 1. Failure to police site storage
 - 2. Late submission of co proposals
 - 3. Failure to control subcontractors
 - 4. Adequate quality control
- 4. Recommendations

4. Table #4 - Mechanical and electrical subcontractors

- 1. Group members
 - 1. Bill Underwood
 - 2. Dave Botbyle
 - 3. Dave Murphy
 - 4. Doug Walz
 - 5. James Berunelle
 - 6. Len Friedman
 - 7. Bill Gelina
 - 8. Jeff Lange
 - 2. Problems others cause us
 - 1. Material handling/storage
 - 1. Difficulty due to poor site logistics and no buck hoist
 - 2. Sequence of work / schedule revisions
 - 3. Lack of owner's responsibility to design intent or construction decisions.
 - 4. Lack of decision making/no one accepts responsibility
 - 5. Timeliness of change order approval
 - 6. Change orders and bulletins do not provide enough information to the intent of ∞
 - 7. Lack of uniform drawings
 - 8. Undear rfi responses creates more rfi's
 - 9. Untimely notice of insufficient work, after submittal has been approved.
 - 10. Dry wallis ahead of schedule
 - 3. Problems we cause others
 - 1. Work on individual agencies
 - 2. Install work out of sequence
 - 3. Lack of clean up
 - 4. Material storage location
 - 5. Late equipment delivery
 - 6. Not maintaining schedule
 - 7. Failure to coordinate
- 4. Recommendations

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5. Table #5 - Finish work subcontractors

- 1. Group members
 - 1. Cletus Adkins
 - 2. Gary Alden
 - 3. Sal Biundo
 - 4. Bill Maurer
 - 5. David Norris
 - 6. Tim Nikou
 - 7. John Appruzese
- 2. Problems others cause us
 - 1. Unrealistic schedule
 - 2. Lack of adequate material handling plan
 - 3. Timely processing of change orders
 - 4. Job site dean-up
 - 5. On site storage space
- 3. Problems we cause others
 - 1. Lack of job clean-up
 - 2. Undermanning of the job
 - 3. Constant harassment of GC/srch and/or other trades ("crybabies")
 - 4. Untimely material deliveries
 - 5. Late quotes for bulletins and changes
 - 6. Late or incomplete submittals
- 4. Recommendations

6. Unassigned- to be placed

- 1. John Appruzese Ornamental Ironwork Co,
- 2. James Brunelle Robert Irsay Company (RICO)
- 3. Len Friedman S.A. Comunale Co.
- 4. Bill Gelina Robert Irsay Company (RICO)
- 5. Dave Holland S.A. Comunale Co.
- 6. Jeff Lange Robert Irsay Company (RICO)
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Charter for Clinical Addition Phase III, Building 1 East - VAMC Ann Arbor, Michigan - as revisited Tuesday May 6, 1997

1. Mission.

We commit to achieve the safe and efficient construction of a quality, state-of-the-art, dinical addition, meeting the health care needs of our veterans through a profitable and satisfying partnership following the principles of mutual trust, integrity and personal pride.

- 2. <u>Partnering Objectives: In furtherance of their mission, the stakeholders on the VAMC</u> <u>Ann Arbor, Michigan. Clinical Addition shall endeavor tα</u>
 - 1. Accurately submit changes, be they monetary or time-related, to the project, in a timely, reasonable and fair manner.
 - 2. Recognize the importance of proper, timely, and complete training of owner's staff for all systems and equipment specified.
 - 3. Communicate the conditions and disruptive circumstances inherent in the demolition and construction activities, to the operations staff of the hospital.
 - 4. Accurately price changes to the project in a timely, reasonable and fair manner.
 - 5. Resolve changes and time related extension requests, including impact costs, in a timely manner including formal issuance of supplemental agreements.
 - 6. Maintain a clean, secure, accessible and well-planned job site.
 - 7. Prepare, distribute and regularly monitor and discuss, with VA and subcontractor input, a master project schedule, and update the schedule as required.
 - 8. Fulfill their respective responsibilities and commitments to permit on-time completion of the project.
 - 9. Close out the project in a proper and timely fashion avoiding:
 - 1. Premature requests for punch list inspection.
 - 2. Inclusion of non contractual requirements.
 - 3. Multiple punch lists of the same area.
 - 10. Communicate effectively in an open, honest manner with all appropriate stakeholders.
 - 11. Respect and treat others' work as you wish your work to be treated; accept responsibility for damage to others' work.
 - 12. Treat others as you would have them treat you.
 - 13. Prepare, package, and process invoices and submittals in a complete, accurate, timely, fair, and considerate manner consistent with the priorities of the contractors, designers, and the VA.
 - 14. Provide complete and unencumbered access to needed work areas in accordance with the project schedule.
 - 15. Make decisions in a timely manner and stand by the agreements you have made.
 - 16. Prepare well for progress meetings and make them brief and productive.
 - 17. Provide reasonable FCO and COCO budgets and identify insufficient budgets promptly.
 - 18. Prepare and respond promptly to requests for information and darifications of contract documents.

Veterans Administration Medical Clinical Addition and Renovation Phase III Clinical Addition Building 1 East Ann Arbor, Michigan Construction Partnering 2

- Ralph J. Stephenson, P.E. -Consulting Engineer
- 19. *Prepare and publish an issue resolution policy which stresses the timely resolution of conflict at the originating or lowest possible management level and seeks to avoid litigation.

20. * Prepare, publish and implement a partnering evaluation system. Footnotes: *indicates item to be prepared by stakeholders

() indicates responsibility for an item we

page 2

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