

Approved 8/24/21
MINUTES
County Health Committee
June 8, 2021
@ 10:30 a.m.

MEMBERS PRESENT: Sharon Williams - Chairperson, Betty Duncan - Vice Chairperson; Jennifer Groves Allison, Eden Blair, Brandy Bryant, Linda Daley, Kate Pastucha (<i>via teleconference</i>), Rachel Reliford, Rob Reneau, Steve Rieker, Phillip Salzer

MEMBERS ABSENT:

OTHERS PRESENT: Scott Sorrel - County Administrator; Greg Siepel - State's Attorney's Office; Brian Gulley – Health Department; Elizabeth Crider – Regional Office of Education; Dr. Francesca Armmer – Board of Health
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Call to Order

Chairperson Williams called the meeting to order at 10:34 a.m.

Discussion

- Health & Human Services Campus
 - Funding Options

Mr. Sorrel summarized an estimated timeline for the project, with appropriation for design team expense in December 2020 and start of construction in late 2022/early 2023. He stressed that the timeline is flexibly and highly dependent on process. He further explained the timelines for the five phases of the project and the responsibilities of the Policy Maker, Management, and Design Teams within each phase.

Mr. Sorrel remarked that the project is currently in Phase I, in which this committee is tasked with selecting a Project Delivery Method, providing feedback on desired scope of work items for the design team in Phase II, and in which the County Board contracts for design team services. He stated that the Phase I responsibilities of the Management Team include providing analysis of various delivery models, take feedback from the County Health Committee and integrate into design team scope of work, and recommending a design team for County Board approval.

Ms. Pastucha asked if a portion of the design and architecture scope of work would include a public health expert who could prepare a compilation and analysis of data in the event a decision is made to replace the facility as opposed to renovation. Mr. Sorrel advised that GIS mapping and customer data information already collected by the Health Department would be primary drivers in assisting in driving that discussion. He further added that funding options will become part of the conversation in later stages of the process, as the estimated cost of construction for either option continue to be refined.

Ms. Reliford inquired as to analyzing data on customers who currently utilize the services of the Health Department and those who could benefit from, but don't currently utilize those services. Mr. Sorrel agreed that data would be a valuable tool, although further review is necessary to determine how to best model and collect that specific set of data.

Ms. Daley reiterated her stance that the utilization of an owner's representative be considered for this project. Mr. Sorrel remarked that although the project may be best suited for an owner's representative, any evaluation and definitive decision would be made at a later point in the project, mostly likely within either Phase II or Phase III.

Ms. Daley asked for a general synopsis of the selection of the design team, and Mr. Sorrel advised that the evaluation process would entail a detailed set of evaluation criteria and questions to be asked of respective respondents of the RFP process in each of the disciplines. He remarked that architectural and engineering are professional services, meaning that a selection is made dependent on the most qualified and best fit for the project, and a discussion of the cost of the contract comes after final decision. Ms. Williams asked that these processes be added to the project timeline.

Ms. Pastucha stated her concern that a Construction Manager at Risk model may emphasize up-front short-term cost savings as opposed to long-term cost effectiveness, and stressed the importance of being conscious of short-term savings vs. long-term. Mr. Sorrel commented that it is an unwritten policy of Peoria County that a project of this size and scope be LEED Silver certified or better, and added that LEED is well integrated into current construction methodologies and consideration of long-term operating costs are a requirement of LEED.

Mr. Gulley commented that expenses related to a design team have been budgeted within the FY2021 budget.

Committee Action

➤ Project Delivery Model

A motion to approve was made by Dr. Blair and seconded by Ms. Duncan. Mr. Sorrel advised that staff recommends moving forward with the use of a Construction Manager at Risk (CMaR) for the project, with the Integrated Project Delivery overlaid. He stated that this method of delivery affords the greatest opportunity to impact cost and function capabilities early in the project while cost of the changes are low.

Mr. Sorrel stated that there are multiple benefits of the CMaR model such as faster delivery, financial certainty, collaborative environment, improve quality, scope of work and budget alignment, fewer changer orders, and input on project subcontractors and suppliers. He listed the few disadvantages, including a limited pool of general contractors providing construction management at risk services, and more work from the owner up-front.

The motion to approve carried unanimously (11-0).

Adjournment

The meeting was adjourned by Chairperson Williams at 11:23 a.m.

Recorded and Transcribed by: Jan Kleffman