

DESCRIPTION OF INTERIM CAPITAL PROJECT FOR CONSIDERATION

April 5, 2017

MEDICAL UNIVERSITY OF SOUTH CAROLINA

PROJECT NAME: Hollings Cancer Center 3rd Floor Renovations

REQUESTED ACTION: Establish Project (Phase I)

REQUESTED ACTION AMOUNT: \$67,500 (1.5%)

Internal Projected Cost: \$4,500,000

BOARD APPROVAL: August 2017

PREVIOUS CHE ACTIONS: N/A

DESCRIPTION:

MUSC requests to establish a project to renovate 14,500 SF on the 3rd floor of the Hollings Cancer Center. The project will renovate lab space to create a central core lab facility to be used by all researchers housed on the 3rd Floor and encourage collaboration. Currently, the space is compartmentalized into small enclosed lab spaces and individual equipment rooms. The update will incorporate open lab bench space with shared equipment spaces to allow more investigators to utilize the same amount of space. In addition, new lab equipment will be purchased. The updated central lab space will support 12-15 faculty and 22-30 staff at the conclusion of the renovation. Medical students also participate in research. In order not to disrupt research activities, the project will be completed in multiple phases. Further, MUSC will be renovating additional lab spaces on the 5th and 6th floors in subsequent CPIP years. Approximately \$8.5M is planned to be invested in renovating the research space on the 3rd, 5th, and 6th floors between fiscal years 2018-2022.

The Hollings Cancer Center is the only National Cancer Institute-Designated Cancer Center in South Carolina and is a leader in cancer research and patient care. It is home to more than 120 scientists, including researchers from leading institutions who are conducting research in the community, laboratory and clinic. Research programs center around cancer biology, cancer immunology, developmental cancer therapeutics, and cancer control.

The source of funds for both the A&E and construction phases will be clinical revenues generated from hospital patient services. Currently, the uncommitted balance is \$2,548,000, which is net of the balance committed to this project. This project was identified as priority three of four for Year One on the 2017 CPIP.

Maintenance of the facility is split between E&G, which is allocated from the operating budget, and clinical programs, which is allocated from a portion of rent charged for the space. Renovations and upgrades are charged to Clinical Operations as requested.

E&G MAINTENANCE NEEDS:

The overall building score in 2017 was 88. Approximately 103,233 SF, 48%, of the total 214,050 SF is dedicated to E&G, which includes research space. The project will address portions of various building systems to include HVAC, plumbing, and electrical in addition to cosmetic and space utilization needs for research efficiency.

ADDITIONAL ANNUAL OPERATING COSTS/SAVINGS:

No additional annual operating costs or savings were identified with this project.

Institution Name:	<u>MUSC</u>	Respondent:	<u>Antonio</u>
Building Number:	<u>925</u>		<u>Name</u>
Building Name:	<u>Hollings Cancer Center</u>	Telephone:	<u>792-9664</u>
Location:	<u></u>	E-Mail:	<u>whianto@musc.edu</u>
Gross Square Feet:	<u>214,050</u>		
Year Const / Renov:	<u>1993</u>		<u>2005</u>
Replacement Cost:	<u>\$123,453,737</u>		

Comments:

Owned Fee Simple

Please do not enter data in the cells below this line. Begin data entry on Page 2.

	System Avg. Score	Multiplier		System % of Building	=	Current % Value Bldg.
Foundation	1.000	1.000	x	0.13	=	0.1300
Exterior Walls	1.500	0.900	x	0.13	=	0.1170
Floor	1.833	0.833	x	0.07	=	0.0583
Roof	2.167	0.750	x	0.07	=	0.0525
Interior Walls	1.833	0.833	x	0.03	=	0.0250
Windows	2.000	0.800	x	0.02	=	0.0160
Doors	1.000	1.000	x	0.01	=	0.0100
Ceiling	1.500	0.900	x	0.03	=	0.0270
Heating	1.500	0.900	x	0.10	=	0.0900
Cooling	2.000	0.800	x	0.10	=	0.0800
Plumbing	1.333	0.933	x	0.08	=	0.0747
Electrical	1.250	0.950	x	0.08	=	0.0760
Elevators	1.667	0.867	x	0.01	=	0.0087
Safety	1.333	0.933	x	0.05	=	0.0467
Design Standards	2.000	0.800	x	0.09	=	0.0720
Agency Rating:				1.00		0.884

Replacement Cost:	<u>\$123,453,737</u>
Building Condition:	<u>88</u>
Maintenance Need Over 20 Years:	<u>\$7,110,935</u>

Bldg. Avg. Grade	Condition Code	Condition Multiplier	Difference
1	Satisfactory	1.00	
2	Remodel A	0.8	-0.2
3	Remodel B	0.5	-0.3
4	Remodel C	0.2	-0.3
5	Replace	0.00	-0.2

Building Name: Hollings Cancer Center

Building Number: 925

Foundation	
1 - 2 - 3 - 4 - 5	Rating
Cracked Walls	1
Foundation Settlement	1
Foundation Deterioration	1
Design Load	1
Average	1

Exterior Wall System	
1 - 2 - 3 - 4 - 5	Rating
Physical Condition	2
Waterproofing	1
Caulking	1
Pointing	2
Code Compliance	1
Insulation	1
Maintainability	2
Painting	2
Average	1.5

Floor System	
1 - 2 - 3 - 4 - 5	Rating
Structural Condition	1
Maintainability	2
Floor Finish	2
Vibration	2
Fire Rating	2
Design Load	2
Average	1.8333

Roof System	
1 - 2 - 3 - 4 - 5	Rating
Physical Condition	2
Leaks	2
Drainage	3
Insulation	2
Fire Rating	2
Design Load	2
Average	2.1667
Age of Roof Cover:	13
Type of Roof Cover:	built up
Flat:	X
Pitched:	

Interior Wall System	
1 - 2 - 3 - 4 - 5	Rating
Physical Condition	2
Strength & Stability	1
Acoustical Quality	2
Appearance	2
Adaptability	2
Maintainability	2
Average	1.8333

Window System	
1 - 2 - 3 - 4 - 5	Rating
Physical Condition	2
Appearance	2
Functional Ability	2
Infiltration	2
Maintainability	2
Average	2

Door System	
1 - 2 - 3 - 4 - 5	Rating
Door Leaf	1
Frame	1
Hardware	1
Security	1
Fire Rating	1
Average	1

Ceiling System	
1 - 2 - 3 - 4 - 5	Rating
Structural Condition	1
Accoustical	2
Accessibility	1
Appearance	2
Average	1.5

Heating System	
1 - 2 - 3 - 4 - 5	Rating
Heating Capacity	2
Temperature Control	2
Noise Level	1
Air Circulation & Vent	1
Reliability	1
Reasonable Energy Consumption	2
Filtration	1
Humidity	2
Average	1.5
Age of System:	varies
Heating Capacity-BTUs:	

Cooling System	
1 - 2 - 3 - 4 - 5	Rating
Cooling Capacity	3
Reasonable Energy Consumption	2
Temperature	2
Noise Level	1
Air Circulation & Vent	2
Reliability	2
Filtration	2
Humidity	2
Average	2
Age of System:	varies
Cooling Capacity-Tons:	

Plumbing System	
1 - 2 - 3 - 4 - 5	Rating
Water Pressure & Supply Quantities	2
Sanitation Hazards or Cross Functions	1
Drain & Waste Function	2
Fixture Quantities	1
Fixture Types & Cond.	1
Wheel Chair Fixtures	1
Restroom Facilities	1
Roof Drainage	1
Site Drainage	2
Average	1.3333

Electrical System	
1 - 2 - 3 - 4 - 5	Rating
Safety Conditions	1
Service Capacity	1
Panel Capacity	1
Convenience Outlets	2
Light Levels	1
Fixtures	1
Emergency Power	2
Exit Lighting	1
Average	1.25

Elevator System	
1 - 2 - 3 - 4 - 5	Rating
Size & Number	2
Maintainability	2
Code Compliance	1
Average	1.6667

Safety Standards	
1 - 2 - 3 - 4 - 5	Rating
Means of Egress	1
Fire Ratings	2
Extinguishing Systems	1
Detection & Alarm Sys.	2
Lighting Systems	1
Handicap Access	1
Average	1.3333

Design Standards	
1 - 2 - 3 - 4 - 5	Rating
Flexible Design	2
Suitable for Present Use	2
Gross to Assignable Area	2
Average	2

FOR DEPARTMENT USE ONLY

CHE _____
 JBRC _____
 SFAA _____
 JBRC Staff _____
 ADMIN Staff _____
 A-1 Form Mailed _____
 SPIRS Date _____
 Summary _____

(For Department Use Only)

SUMMARY NUMBER

FORM NUMBER

PERMANENT IMPROVEMENT PROJECT REQUEST

1. AGENCY Code H51 Name Medical University of South Carolina
 Contact Person Philip S. Mauney Phone 843-792-2490

2. PROJECT Project # _____ Name Hollings Cancer Center 3rd Floor Renovations
 Facility # 925 Facility Name Hollings Cancer Center

County Code	10 - Charleston
New/Revised Budget	\$67,500.00

Project Type	3 - Repair/Renovate Existing Facilities/Systems
Facility Type	2 - Program/Academic

3. CPIP PROJECT APPROVAL FOR CURRENT FISCAL YEAR
 CPIP priority number 3 of 4 for FY 18.

4. PROJECT ACTION PROPOSED (Indicate all requested actions by checking the appropriate boxes.)

Establish Project	<input checked="" type="checkbox"/>	Decrease Budget	<input type="checkbox"/>	Close Project	<input type="checkbox"/>
Establish Project - GPIP	<input type="checkbox"/>	Change Source of Funds	<input type="checkbox"/>	Change Project Name	<input type="checkbox"/>
Increase Budget	<input type="checkbox"/>	Revise Scope	<input type="checkbox"/>	Cancel Project	<input type="checkbox"/>

5. PROJECT DESCRIPTION AND JUSTIFICATION
 (Explain and justify the project or revision, including what it is, why it is needed, and any alternatives considered. Attach supporting documentation/maps to fully convey the need for the request.)

This project will renovate approximately 14,500 sf of existing lab space on the 3rd floor of the Hollings Cancer Center. The renovation will create a central core lab facility consisting of lab spaces to be used by all research investigators housed on the 3rd floor. The renovation will rearrange the existing lab space to provide for increased investigator capacity and increased efficiencies of lab operation. The project will be implemented in two or three phases to limit disruption to the ongoing research operation. The current lab layout is outdated and does not lend itself to the research operation required by the new HCC Director nor the number of personnel expected to join existing and newly recruited principal investigators. The goal of the project is to realize research operational efficiencies and collaboration by consolidating the core lab functions into one centralized space. This request is for approval to proceed with Phase 1 schematic design.

6. OPERATING COSTS IMPLICATIONS
 Attach Form A-49 if any additional operating costs or savings will result from this request. This includes costs to be absorbed with current funding.

7. ESTIMATED PROJECT SCHEDULE AND EXPENDITURES
 Estimated Start Date: October 2017 Estimated Completion Date: December 2019
 Estimated Expenditures: Thru Current FY: \$67,500.00 After Current FY: _____

8. ESTIMATES OF NEW/REVISED PROJECT COSTS

PROJECT #	
------------------	--

- | | | | |
|---------------------|---------------------------------------|------------------------|-------------------|
| 1. _____ | Land Purchase ----> | Land: _____ | Acres |
| 2. _____ | Building Purchase ----> | Floor Space: _____ | Gross Square Feet |
| 3. <u>67,500.00</u> | Professional Services Fees | | |
| 4. _____ | Equipment and/or Materials ----> | Information Technology | _____ |
| 5. _____ | Site Development | | |
| 6. _____ | New Construction ----> | Floor Space: _____ | Gross Square Feet |
| 7. _____ | Renovations - Building Interior ----> | Floor Space: _____ | Gross Square Feet |
| 8. _____ | Renovations - Utilities | | |
| 9. _____ | Roofing - _____ Roof Age | | |
| 10. _____ | Renovations - Building Exterior | | |
| 11. _____ | Other Permanent Improvements | | |
| 12. _____ | Landscaping | | |
| 13. _____ | Builders Risk Insurance | | |
| 14. _____ | Other Capital Outlay | | |
| 15. _____ | Labor Costs | | |
| 16. _____ | Bond Issue Costs | | |
| 17. _____ | Other: _____ | | |
| 18. _____ | Contingency | | |

\$67,500.00 TOTAL PROJECT BUDGET

ENVIRONMENTAL HAZARDS	
Identify all types of significant environmental hazards (including asbestos, PCB's, etc.,) present in the project and the financial impact they will have on the project.	
Type:	_____
<u>Cost Breakdown</u>	
Design Services	\$ _____
Monitoring	\$ _____
Abate/Remed	\$ _____
Total Costs	\$ _____ 0 00

9. PROPOSED SOURCE OF FUNDING

Source	Previously Approved Amount	Increase/Decrease	Original/Revised Budget	Transfer to/from Proj. #	Rev Object Code	Treasurer's ID Number	Rev Sub Fund	Exp Sub Fund
(0) CIB, Group			0.00 0.00		8115		3043	3043
(1) Dept. CIB, Group			0.00 0.00		8115		3143	3143
(2) Institution Bonds			0.00 0.00					3235
(3) Revenue Bonds			0.00 0.00					3393
(4) Excess Debt Service			0.00 0.00					3497
(5) Capital Reserve Fund			0.00 0.00		8895		3603	3603
(6) Appropriated State			0.00 0.00		8895	68800100	1001	3600
(7) Federal			0.00 0.00			78800100		5787
(8) Athletic			0.00 0.00			88800100		3807
(9) Other (Specify) Clinical Revenue		67,500.00	67,500.00 0.00 0.00		7201	98800100	3035	3907
TOTAL BUDGET	\$0.00	\$67,500.00	\$67,500.00					

10. SUBMITTED BY: 
 Signature of Authorized Official and Title

February 22, 2018
 Date

11. APPROVED BY: _____
 (For Department Use Only) Authorized Signature and Title

 Date

**ADDITIONAL ANNUAL OPERATING COSTS / SAVINGS
RESULTING FROM PERMANENT IMPROVEMENT PROJECT**

1. AGENCY Code H51 Name Medical University of South Carolina

2. PROJECT Project # _____ Name Hollings Cancer Center 3rd Floor Renovations

3. ADDITIONAL ANNUAL OPERATING COSTS / SAVINGS. (Check whether reporting costs or savings.)

COSTS SAVINGS NO CHANGE

4.

TOTAL ADDITIONAL OPERATING COSTS / SAVINGS				
Projected Financing Sources				
(1)	(2)	(3)	(4)	(5)
Fiscal Year	General Funds	Federal	Other	Total
1)	\$	\$	\$	\$ 0.00
2)	\$	\$	\$	\$ 0.00
3)	\$	\$	\$	\$ 0.00

5. If "Other" sources are reported in Column 4 above, itemize and specify what the other sources are (revenues, fees, etc.).

6. Will the additional costs be absorbed into your existing budget? YES NO
If no, how will additional funds be provided?

7. Itemize below the cost factors that contribute to the total costs or savings reported above in Column 5 for the first fiscal year.

	<u>COST FACTORS</u>	<u>AMOUNT</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
	TOTAL	\$0.00

8. If personal services costs or savings are reported in 7 above, please indicate the number of additional positions required or positions saved. _____

9. Submitted By:  2/22/18
Signature of Authorized Official and Title Date

**PERMANENT IMPROVEMENT PROJECT INFORMATION FORMAT
FOR PHASE I A&E PRE-DESIGN PROJECTS**

1. What is the internal projected cost of the project?

\$4,500,000

2. What is/are the source(s) of funds to be used for A&E pre-design?

Clinical revenues

3. What is your agency/institution's definition of the source(s) of funds used for the A&E pre-design?
(Please be specific for each source and if there is a statutory authority authorizing the use of the funds for capital projects for the source, please cite the code section. If a source includes any type of fee, what is the fee called, what is the fee amount and when was it put in place?)

Revenues generated from hospital patient services

4. What is the current fund balance of uncommitted funds in the source of funds for A&E pre-design?

\$2,548,000

5. What is the source(s) of funds to be used for construction?

Clinical revenues

6. What is your agency/institution's definition of the source(s) of funds to be used for construction?
(Please be specific for each if different from those in 3 above. If there is statutory authority authorizing the use of the funds for capital project, please cite the code section and if a source includes a fee, what is the fee called, what is the fee amount and when was it put in place?)

Revenues generated from hospital patient services

7. What is the current fund balance of uncommitted funds in each source to be used for construction?

\$2,548,000

8. Will the use of any funds for A&E pre-design or for construction require an increase in any student fee or tuition?

No

9. If the use of any funds for A&E pre-design or construction will require any student fee or tuition increase, please explain and include the amount of the fees annually or by semester, what the fee is called and when it was put in place.

No

10. What is the total square footage of the building to be renovated or constructed?

214,037

11. If a portion of the building is to be renovated, what is the square footage of the portion that will be included in the renovation?

14,332

12. What program(s) will use the space to be renovated/constructed?

Research

13. What is the current age of the building to be renovated?

24 years old

14. What is the current age of the building system(s) to be renovated or replaced?

24 years old

15. If any new space is being added to the facility, please provide demand/usage data to support the need.

No new space is being added

16. If the A&E pre-design request is above 1.5% of the internal estimated cost of the project, what is the reason the amount exceeds 1.5%?

Not Applicable

17. What are the estimated numbers of students, faculty, staff and/or clients that are expected to use the space affected by the project or for the entire building? (Answer for as many as are applicable.)

Estimated usage post renovation is 12-15 faculty and 22-30 staff.

18. Has the project been included in a previous year's CPIP? If so, what was the last year the project was included and for which year, 1-5?

Yes, Year 1

19. What are the economic impacts of the project, including job creation and retention? If there are none, please explain.

Renovation will impact the ability to recruit/retain high quality researchers to MUSC

20. How will your agency/institution address and fund maintenance of this facility construction/renovation?

The maintenance support structure is already in place for this existing area.

21. If your agency/institution has a deferred maintenance account, what is the name of the account and what is its current uncommitted balance?

Yes, the name of the account is "Investment Fund-Deferred Maintenance." All funds in the account were committed to deferred maintenance projects during the FY18 capital budget process.

22. If how maintenance will be addressed and funded for this facility construction/renovation has not been determined yet, what steps are in place to begin to address how your agency/institution will fund maintenance to this and other agency/institution facilities?

Not Applicable.