Agency: Commerce, Community and Economic Development
Grants to Named Recipients (AS 37.05.316)
Grant Recipient: Kenai Peninsula Borough

Project Title: Kenai Peninsula Borough - Central Peninsula General Hospital Radiation Oncology Center

State Funding Requested: $1,000,000
One-Time Need

House District: Kenai Areawide (33-35)

Brief Project Description:
Phase 1, Radiation Oncology Center for the Central Peninsula General Hospital

Reappropriation Bill Language:
Crooked Creek, Tustemena, Johnson Lake Roads Paving, 2008 appropriation, SLA 29, 2008, Page 79

Funding Plan:

<table>
<thead>
<tr>
<th>Total Project Cost:</th>
<th>$4,337,108</th>
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<tr>
<td>Funding Already Secured:</td>
<td>($0)</td>
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<td>FY2013 State Funding Request:</td>
<td>($1,000,000)</td>
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<td>Project Deficit:</td>
<td>$3,337,108</td>
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Detailed Project Description and Justification:
The first phase Oncology Center will include approximately 2993 square feet of clinic area and 1,123 square feet that houses a linear accelerator. As part of the phase one construction, an approximately 2,160 square foot arctic entry and vestibule that serves as a connector to the existing hospital shall be constructed. The Oncology Center will utilize the existing CPGH Radiology equipment to facilitate their clinic until such time that the Medical Office Building is completed.

Project Timeline:
April, 2013

Entity Responsible for the Ongoing Operation and Maintenance of this Project:
Central Peninsula General Hospital

Grant Recipient Contact Information:
Name: John Hedges
Title: Project Manager
Address: 144 North binkley
Soldotna, Alaska 99669
Phone Number: 714-2150
Email: 

Contact Name: Tom Wright
Contact Number: 465-6618

For use by Co-chair Staff Only:
$1,000,000
Approved
3:18 PM 5/2/2012
Has this project been through a public review process at the local level and is it a community priority? ☑ Yes ☐ No
January 24, 2012

Rick Davis, Chief Operating Officer
Central Peninsula Hospital
250 Hospital Place
Soldotna, Alaska 99669

Reference: Central Peninsula Hospital
Radiation Oncology Center and Future Medical Office Building

Dear Rick,

As requested, we have developed a construction budget for the proposed Phase 1 Radiation Oncology Center allowing provisions for the future Medical Office Building (MOB) adjoining it. We have consulted Estimation’s Inc. and incorporated items discussed in our January 19th teleconference. The following budget includes future MOB building related cost and contingency:

Parking & Drive Access: 39,000 S.F. x $7/S.F. = $273,000
1 Story Oncology Center Admin Area: 2,993 S.F. x $450/S.F. = $1,346,850
Arctic Entry & Connecting Vestibule: 2,160 S.F. x $300/S.F. = $648,000
Accelerator Concrete Construction: 3,827 S.F. x $115/S.F. = $440,105
Accelerator Interior Construction: 1,123 S.F. x $150/S.F. = $168,450
Medical Office Building Adjoining Foundation: 100 L.F. x $700/L.F. = $70,000

Construction Budget Subtotal: $2,946,405
15% Contingency: $441,961
Construction Budget Total: $3,388,366

11% Borough Administration Fees: $372,720
17% Professional Design and Construction Administration: $576,022
Total Project Construction Budget: $4,337,108

The above professional fees increased due to breaking the oncology clinic out as a separate phase. One would have to develop the MOB schematically and perform a lateral analysis to design the adjoining foundation. The above construction budget includes a fifteen percent contingency in light of the preliminary nature of this design. All budgetary numbers utilize Davis Bacon wages. We have not included the cost of the accelerator or FF&E for the clinic in our budget. Feel free to contact me if you have any questions or need additional information.

Sincerely,

Bill Kluge
Principal Architect

Cc: File
January 25, 2012

Rick Davis, Chief Operating Officer
Central Peninsula Hospital
250 Hospital Place
Soldotna, Alaska 99669

Reference: Central Peninsula Hospital
Radiation Oncology Center
Scope of Work

Dear Rick,

As requested, we have prepared an overview of the proposed scope of work for the referenced project based on information from Rich Davidson and our January 19th teleconference. We understand CPH desires to expedite the construction of the proposed Oncology Center. The conceptual drawings for addressing this desire were distributed to yourself, Rich Davidson, Kevin Lyons and John Hedges at our teleconference meeting. At that time we as a group discussed the schedule for initiating construction of the Oncology Center as a “phase one” approach to the mater-planned Medical Office Building (MOB) “phase two” as illustrated in our conceptual site plan.

The first phase Oncology Center shall include approximately 2,993 square feet of clinic area and 1,123 square feet that houses a linear accelerator. The accelerator equipment is not to be included in the phase one construction cost. As part of the phase one construction an approximately 2,160 square foot arctic entry and vestibule that serves as a connector to the existing hospital shall be constructed. The Oncology Center shall utilize the existing CPH Radiology equipment to facilitate their clinic until such time as the MOB is completed. At that time a direct access shall be provided for the clinic to a new CT Scan in the MOB. A lateral analysis of the proposed MOB and adjoining foundation design shall be included for construction in phase one where the phases connect.

The MOB is proposed to have three above ground floors totaling approximately 27,500 GSF plus a basement to house utilities and other non-public needs. They will include space for physician offices or other non-acute care services. The main feed for electric service for the phase two MOB shall be brought into the Oncology Center with conduit installed for pulling power to the future phase two constructions. Electricity shall be adequately sized to support future PET/CT and one general radiology room. Medical gases including oxygen and vacuum will be provided to the Oncology and Infusion Therapy areas including approximately 16 locations with the future construction. An information systems network will be fed via fiber optic lines to the hospital server room.

Emergency power will be provided from the hospital emergency power system. It will provide emergency egress lighting throughout the building, task lighting and electrical outlets in the Oncology and Infusion Therapy areas, power major equipment in the Oncology area, power heating systems, and provide minimal emergency circuits for all suites. The Oncology Center will have multiple zones to manage different heat loads. Exhaust fans will all be located on the roof. Both phases of construction shall be equipped with automatic fire sprinkler systems throughout all spaces. The sprinkler riser shall be included in the Oncology Center mechanical room with rough-ins provided for the future phase two work.

New parking areas and affected parking areas are to be reconfigured to better align spaces with the property lines and future parking accesses. Approximately 70 additional parking stalls will be required. Electricity for head bolt heaters will be provided for 1/3 of the parking spaces located furthest from the buildings. The
buildings shall also be designed and built to minimize the use of energy and take LEED concepts into consideration. All interior finishes are to be the same as, or aesthetically consistent with, the hospital finishes. The design intent of the Oncology Center shall be to compliment the newer portions of CPH and carry the interior themes into the addition.

The project schedule developed includes the following benchmarks:

• CPH Board Approval 1-26-2012
• Assembly Intro 1-30-2012
• Mayor Approval for Design RFP 2-1-2012
• Assembly Approval 2-28-2012
• Funds Available 3-6-2012
• Design RFP Issuance 2-15-2012
• RFP Due 3-7-2012
• Intent to Award Design Services 3-12-2012
• Award Design Services 3-15-2012
• Secure Lease with Oncology Practice 3-26-1202
• Construction Documents Due 6-9-2012
• Bidding Construction 6-9-2012 through 6-30-2012
• Construction Contract Award 7-12-2012
• Construction Completion 4-1-2013

The above outlined schedule allows eight months for construction of phase one work. The construction schedule is dependent on lead times for the oncology equipment. Every effort shall be made by all parties to expedite phase one construction. Please feel free to contact me if you have need of any additional information.

Sincerely,

Bill Kluge
Principal Architect

Cc: File