**Project Management Plan I.**

1. **General Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Entity: |  |  | Campus/Location: |  |
| Project Name: |  |  | Building Name: |  |
| EA Number: |  |  | Level/Wing: |  |
| Phase : |  |  | PMP Prepared By: |  |

1. **Objectives**

|  |
| --- |
| Project Goals: |
| *(Insert here)* |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Project Specific Goal | Primary | Secondary |  | Critical Factors | Primary | Secondary |
| Volume/Capacity Adjustment | [ ]  | [ ]  |  | Initial Cost | [ ]  | [ ]  |
| Patient Safety | [ ]  | [ ]  |  | Life-cycle Cost | [ ]  | [ ]  |
| Patient Satisfaction | [ ]  | [ ]  |  | Schedule | [ ]  | [ ]  |
| Staff Efficiency | [ ]  | [ ]  |  | Performance | [ ]  | [ ]  |
| Physician Recruitment | [ ]  | [ ]  |  | Aesthetics | [ ]  | [ ]  |
| Codes/Compliance | [ ]  | [ ]  |  | Functionality | [ ]  | [ ]  |
| Repair | [ ]  | [ ]  |  |  |  |  |

1. **Project Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Building Type | Total Area: |  | SF |
| [ ]  Hospital (“I” Occupancy) | [ ]  Ambulatory Surgery (ACS) |  |
| [ ]  Medical Office (“B” Occupancy) | [ ]  Office/Administrative (“B” Occupancy) |  |
| [ ]  Parking Structure | [ ]  Other: |  |

|  |  |
| --- | --- |
| Project Type |  |
| [ ]  Interior Renovation | [ ]  Freestanding Building | [ ]  Site |
| [ ]  Tenant Fit-out | [ ]  MEP Infrastructure | [ ]  Interior Demolition |
| [ ]  Building Addition | [ ]  Medical Equipment | [ ]  Exterior Demolition |
| [ ]  Other: |  |  |

|  |
| --- |
| Hospital Zone(s)/Department(s) *(select all that apply)* |
| Inpatient | Diagnostic and Treatment | Clinical/Building Support |
| [ ]  Acute | [ ]  Emergency | [ ]  Pharmacy |
| [ ]  ICU | [ ]  Invasive | [ ]  Dietary |
| [ ]  Obstetric | [ ]  Non-Invasive | [ ]  Central Sterile |
| [ ]  Psychiatric | [ ]  Laboratory | [ ]  Materials Management/Linen |
| [ ]  Oncology | [ ]  Imaging | [ ]  Housekeeping |
| [ ]  Other: | [ ]  Other: | [ ]  Facility Engineering |
|  |  | [ ]  Other: |

1. **Scope**

|  |
| --- |
| Architectural Scope: |
| *This project involves the [Installation, interior renovation, tenant fit-out, repair, replacement, construction, demolition] of the [existing, new] [insert size] [insert building type] [building, equipment] for [insert Owner name] at [insert campus/location].* |
| Interior Scope: |
| *(Insert here)* |
| MEP/FP Engineering Scope: |
| *(Insert here)* |
| Clinical Asset Management (CAM): |
| *(Insert here)* |
| Information Services (IS): |
| *(Insert here)* |
| Exclusions: |
| *(Insert here)* |
| Structural Engineering Scope: |
| *(Insert here)* |
| *Civil Engineer Scope:* |
| *(Insert here)* |

1. **Financials**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Funding Source: |  |  | Capital Cycle: |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Budgets |  | Amount |  | Date |  | Comments |
| Multi-Year Model: | $ |  |  |  |  |  |
| Revised MYM: | $ |  |  |  |  |  |
| Capital Planning | $ |  |  |  |  |  |
| Scrubbers Approved | $ |  |  |  |  |  |
| Board Approved | $ |  |  |  |  |  |