#### Department for Administrative and Information Services

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#### Clients Driving Innovation Lyell McEwin Health Service Redevelopment Stage A

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#### Lyell McEwin Health Service

- Located at Elizabeth in Adelaide's northern suburbs in lower socio-economic community
- One of South Australia's major acute hospital facilities
- There was a range of old and new buildings with 50% of the existing floor space greater than 40 years old
- The buildings were dysfunctional, costly to maintain and no longer met the health service requirements

### LMHS Redevelopment Stage A

- Project Budget was \$91.2 Million
- Stage A replaced great majority of the outdated infrastructure and provided
   ✓ New wards
  - ✓ CCU
  - ✓ Women's Health Centre
  - ✓ Administration and education
  - ✓ emergency
  - ✓ ICU, HDU
  - ✓ Operating theatres

#### What were we trying to fix?

- The characteristics of the project were:
  - ✓ Largest single building construction project being undertaken in SA
  - $\checkmark$  High strategic value for DH, the northern suburbs and government
  - Potential for providing significant economic benefits for the northern suburbs over a 5 year period
  - ✓ Required flexibility to accommodate changes in service delivery
  - ✓ Required outstanding management of program and cost

### What were we trying to fix?

#### In conventional major projects there was:

- > Lack of consultant team cohesion
- Poorly coordinated or incomplete documents
- Delays during design, documentation and tender phases
- Quality control concerns during construction
- Inadequate management of variations
- > Consultants working in a siloed, defensive culture
- Time and cost overruns

# What were our expectations of a relationship contract?



#### What were our expectations?

- A relationship contract would realise
  - opportunities and mitigate risk by:
  - Establishing the project team with equality of input and shared objectives
  - > Encouraging innovation and problem solving
  - Setting objectives on quality outcomes in time, cost, ESD, community relations and building industry training
  - Offering performance incentives in support of key project objectives
  - Investing in skilling and training in relationships and team culture
  - Inclusion of subcontractors in the team

#### What were our expectations?

- We also expected that there were risks:
  > "Leap of faith" required
  - Expectation that project manager was required for success
  - Complex briefing and tendering processes
  - Concern on investment in team management fees and incentives
  - No certainty of improved outcomes, difficulty in measuring improvements, disputation could be more serious that in a conventional approach
  - Established project management practices could be compromised by the focus on new practices
  - The risk and reward arrangements were viewed with suspicion by professional community

# **Project Objectives Set**

- The objectives were:
  - >Maximum value for the capital cost
  - ➤Completion on time
  - Minimum disruption to the operating environment
  - ≻High quality
  - Defect free completion through continuous inspection of the works to progressively identify and rectify defects

# 'New' Project Objectives Set

- A new benchmark in Ecologically Sustainable Development (ESD)
- Provide extensive opportunities for building industry training
- Develop community relations to help rebuild ownership and interest in hospital
- Outstanding results in industrial relations and workplace safety
- Demonstrate to the building industry that an alternative approaches to project delivery was effective and in the interests of all stake holders



# Setting up and Mindset

- The contract was developed using C21 as a base with special conditions for the 'relationship' contract drafted by Crown Law
- Project Manager not appointed and this funding was committed to team development, training and coaching
- JMJ and Associates worked with DAIS, DH and the private sector contractors to gain commitment to collaborative approach to decision-making and problem solving

#### Setting up and Mindset Before We Started

- JMJ developed team member skills in:
  - Listening and the pitfalls to achieving understanding between team members
  - Fundamentals of achieving sustainable agreement (alignment) and commitment to team decisions
  - Communicating with a view to creating solutions, or tabling issues with clarity
  - Real accountability for actions
  - Responsibility to act in a positive and multiplying manner

### We had a long way to go



# We had a long way to go

- As JMJ commenced the process of team development a number of issues came onto the table
  - SA generally hasn't had disaster projects or high levels of litigation , some felt that no change was needed
  - > Some wary of the relationship approach
  - > Team management fee was viewed as a waste
  - Relationship set up viewed as an impediment to getting on with the design and construction

# We had a long way to go

- The team at first 'lost' without project manager
- Became accustomed to assigning responsibility to the best person or group to do the jobs
- Many Government employees cynical about the "no blame" approach
- Concerned with experimenting on such an important and significant project



#### The Key Building Blocks and Major Learning

#### The key building blocks were:

- > A vision and objectives we all owned
- > Everybody 'throwing their hat over the wall'
- Training to recognise our own non-collaborative / disempowering behaviour
- Identifying process champions
- Discovering advantages of respectful plain speaking and acknowledgment of achievement
- Recognising that the project team included subcontractors



### Performance Against Objectives

- Saved \$1.7 million from construction contingency, funded increase to the Furniture Fittings and Equipment fund
- The quality of the facility is exceptional
- Integrated commissioning between hospital and contractor best to date
- Defects free completion minimised returns to the site for rectification work
- Exceptional and collaborative work relationship between hospital, consultants, contractors and government agencies

### **Performance Against Objectives**

- Community satisfaction of the project was 80%
- The ESD objective to be the most energy efficient hospital in Australia looks like being achieved
- over 70 work experience students, trainees, and apprenticeships
- Safety standards exceeded industry benchmarks
- Lost time due to EB issues less than other major sites at the time



### **Relationship Management Hard?**

- There was particular emphasis on applying good business practices including:
  - A strongly supported vision
  - > A clear set of objectives we all aligned on
  - > Empowerment of all stakeholders in their
  - respective roles
  - > A commitment to make it work
  - A focus on team learning and culture to support achievement of the project and commercial objectives



# It Works!

- A host of clever ideas have been incorporated into the design and FF&E
- For the stakeholders:
  - $\checkmark$  Have become better operators
  - $\checkmark$  Team members don't ignore problems but fix them
  - ✓ Strong concept of alignment
  - $\checkmark$  Subcontractors genuinely in the game
  - ✓ Hospital genuinely in the game
  - $\checkmark$  Longer term relationships have been built
- Ripple effect members of the procurement team have translated the skills to aspects of other projects

# **Our Next Challenge**

- To maintain the momentum during the next stage of the LMHS (subject to approval)
- Use the learning's on other major projects (Private and Government)
- Keep the faith and as clients continue to have high expectations, be prepared to participate and reward innovation.