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# PROFESSIONAL ARTS PHARMACY - A CASE STUDY \_

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## DIRECTOR:

Thomas Sammons



## FIRM PROFILE

Architects Beazley Moliere is one of the oldest and most respected architectural firms in Acadiana. Founded in 1955 by David L. Perkins, the firm has produced many of the architectural icons of Lafayette, Louisiana. ABM has grown and evolved in parallel with the city and the Acadiana area into a dynamic design oriented firm with a national practice; a firm dedicated to serving and facilitating the needs of its clients through observation, listening and understanding their needs and responding with sound architectural solutions.

Architects Beazley Moliere's clientele includes national corporations, institutions, private developers, private owners, and local, state and federal agencies. Their expertise is in providing custom design solutions for health care and research facilities, business and religious buildings, schools, libraries and other educational facilities, banks, and other commercial projects. The majority of their work is in public commercial and institutional building types.

The success of Architects Beazley Moliere is directly related to a professional commitment to achieving the objectives of their clients; a commitment to producing projects that are functionally and economically successful; and a commitment to design excellence.

Their client centered commitment encompasses the total process of project delivery. Knowledge of business development permits them to aid and direct their clients through the complex project development process beginning with feasibility and site selection. Experience in commercial and retail building types allows them to apply these principles of design to new objectives in order to achieve unique and successful results. Expertise in master planning, interior design and facilities management permits Architects Beazley Moliere to offer complete and comprehensive planning and design services; services that do not begin and end with the building of a project, but are aimed at ensuring the success of each project through the commitment to achieving the goals, objectives, wishes and dreams of the client.

Architects Beazley Moliere's staff and size allow each project to have the personal attention of one or more of the principals of the firm. This personal commitment along with the required participation of the client, is imperative to achieving success. The client's involvement in the design process includes active participation in establishing goals, objectives, budget, design schedules and the desired aesthetics of the project. To Architects Beazley Moliere, the client is the most important member of the design team.

Through their desire for excellence, ABM strives to meet a primary objective - architecture that is responsive to the needs of the client, the community, and the environment. (BeazleyMoliere.com)





## CLIENT PROFILE

Compounding is the art and science of preparing customized medications. In every field of medicine, there are some patients who don't respond to traditional methods of treatment. Sometimes they need medicine in strengths that are not manufactured by drug companies, or perhaps they simply need a different dosage form. Pharmacy compounding meets these needs. It provides a way for the physicians and compounding pharmacists to customize an individualized solution for the specific needs of their patients.

Professional Arts Pharmacy was founded in 1998, and is a world-class compounding pharmacy specializing in customized medications for individual patient needs. Their staff of over 40 professionals, including 8 pharmacists and 14 certified technicians, are dedicated to solving medication problems for both animal and human patients.

As a nationally recognized leader in pharmaceutical compounding, Professional Arts Pharmacy works with physicians, dentists and veterinarians every day to research and develop unique treatment and therapy options for their patients. Their areas of specialty include Hospice and Palliative Care, Pain Management, Dentistry, Hormone Replacement, Veterinary Medicine, Dermatology and Ear, Nose and Throat compounding.

Professional Arts Pharmacy has earned the Pharmacy Compounding Accreditation Board's Seal of Accreditation. While all compounding pharmacies are required to meet the requirements set by their respective state boards of pharmacy, "PCAB Accredited" denotes a more stringent and comprehensive standard which serves as an assurance that their compounding pharmacy has been tested against the profession's most rigorous standards. (ProfessionalArts.com)



**Professional Arts Pharmacy**  
Prescription Compounding Specialist

## PROJECT ABSTRACT

### DESCRIPTION:

Professional Arts Pharmacy provides compounded pharmaceutical preparations locally and across the nation. Having outgrown their previous location, the owners wanted to provide new and updated laboratory spaces for their growing business. Their goal was to construct a modern facility that would accommodate their current staff and production needs and to allow for future growth through expansion.

The site is designed to provide for retail customer parking, a large employee parking area and accommodations for large truck traffic for pick-up and deliveries. In addition, the design provides for future expansion of the office areas to the west and the laboratory and parking to the east.

The 11,525 square foot facility is separated into four secure areas: a business area; a dispensing pharmacy; compounding laboratory areas including clean room spaces for compounding of sterile preparations; and a shipping and receiving area.

Using a uniform material palette of brick, stucco and glass, the exterior of the building is divided into three sections identifying the business and laboratory areas separated by the taller public entry. Clean room spaces are highlighted by the taller brick area on the east end. High glass windows bring light into private consultation areas and laboratory spaces where privacy is needed.

The lobby is designed to provide an open, modern and welcoming retail atmosphere. A mixture of mahogany and cherry woods contrasts metal and glass details to create a dynamic retail space that is more inviting than the typical big-box retail pharmacy.



MAIN ENTRANCE © ABM





**CASE:**

Professional Arts Pharmacy was founded in 1998 and was outgrowing their undersized lease space in a portion of a strip mall nearby. Instead of leasing a larger space, compromising and fitting in, the owners decided to utilize a piece of undeveloped property to build a new building to accommodate future growth, increase their efficiency and make a statement about who they were as a company. Upon choosing an Architectural firm, ABM proceeded with an in-depth programming process including client meetings, questionnaires and charrettes in order to create a functional program that would maximize the client's efficiency and streamline their processes. Upon completion of the conceptual design, the owner decided to entertain a Contractor selection process early in the project in order to reduce the time frame for the entire project. The Contractor was selected and helped to provide a more accurate cost estimate based on current pricing and market variables which led to a reduction in scope based on the high end finishes required in the project.

The owners choice to utilize an Architect and to enter into a negotiated contract with the Contractor ultimately led to a successful project with a smooth and amicable design and construction process. All parties agreed that the design and construction phases of the project were quite efficient and went very smooth, and the working relationship between all parties was positive and productive. The end product was an extremely efficient, functional showplace which has ultimately led to an increase in productivity, employee satisfaction and profitability. This end result could not have been accomplished without the following; An Architect with extensive knowledge in programming and design, with a willingness to understand the business and production processes of the client; A competent and efficient Contractor with vast medical experience willing to work on an accelerated time-line; and a negotiated contract to allow a beneficial team approach to the project.



INTERIOR OF LOBBY @ RETAIL DESK © ABM

KEY TEAM MEMBERS:

Architectural Firm: ABM

Vice President, Albert Moliere III - Initial contact  
President, Charles Beazley - Programing and design  
Associate, Adam Beazley - Project manger

Consultants:

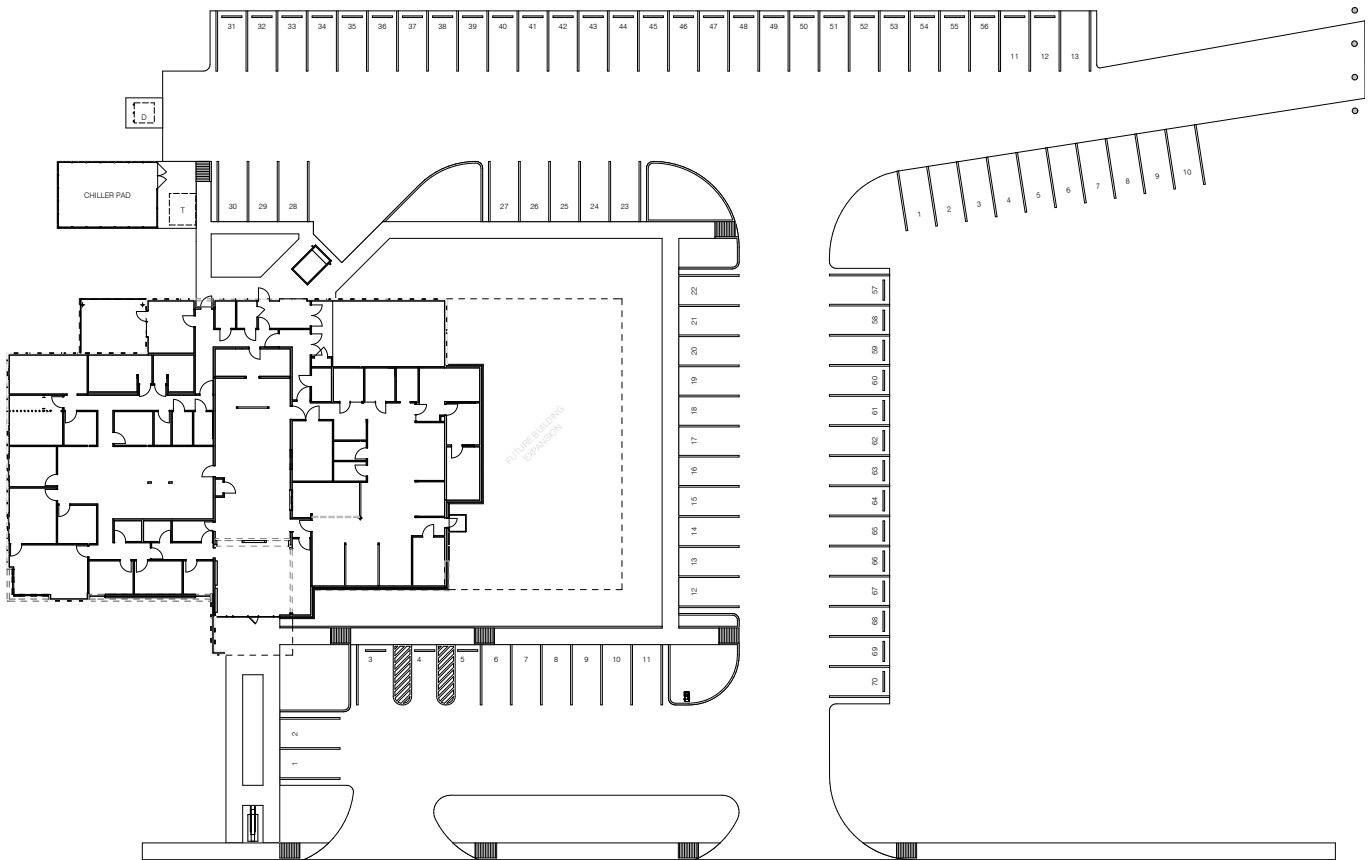
Structural - Fox-Nesbit Engineering, Travis Fox  
Civil - C.P.S. Engineering and Land Surveying, David Naomi  
Mechanical/Plumbing - Associated Design Group, Craig Campbell  
Electrical - Associated Design Group, David Stelly  
Interior Design - Interior Design Solutions, Marie Lukaszkeski

Contractor: The Lemoine Company

Mike Rice, Project manager  
Andrew Forman, Construction manager  
Danny Delahoussaye, Superintendent

Client: Professional Arts Pharmacy

President, Eric Vidrine  
Co-Owner, David Mayer  
Quality Assurance & Quality Control Director, Kevin LaGrange  
Special Projects Manager, Steven Carroll



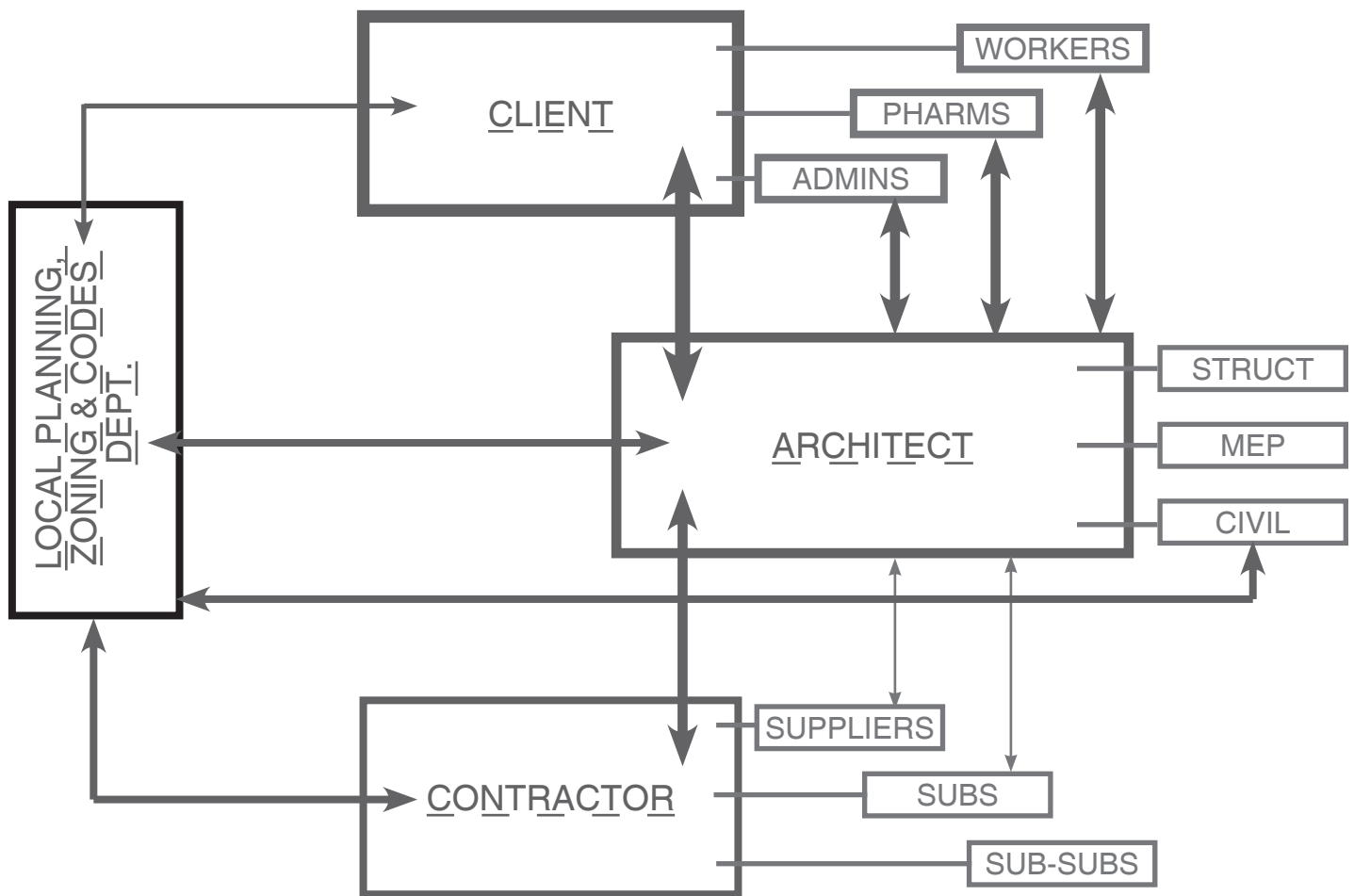
FINAL SITE PLAN © ABM

# PROJECT PERSPECTIVES

## PROTOCOLS: THE WEB OF DECISION-MAKING

The majority of the decisions made for this project were ultimately made by the Architect based on input from all interested parties. The client obviously had final say on any and all proposed designs and budgets, yet allowed the Architect to guide and direct the decision-making process. During the initial programming and schematic design phase the Architect met with client representatives from all process areas and initiated design charrettes in order to fully understand what each process consisted of. The Architect then brought those documents back to the drawing board, made design decisions based on charette documents and questionnaires in order to create a plan to present to the Client for approval and feedback.

The plans were then developed into a building through an inter-office design competition from which the Clients chose their favorites. A final mash-up building was developed from the chosen designs and submitted to the Contractor for pricing. Upon reviewing pricing, the decision was made by the Client to cut down the scope to reduce the budget to a more manageable number. The design was adjusted, tweaked and was ultimately developed into a full set of bid documents from which the Contractor provided an official bid. The bid came in a little high, so the decision was made by the Client to increase the budget in order to move forward and the building was constructed per said documents.





## CONSTITUENCIES - THE CLIENTS VOICE IN PROJECTS

### - Client's Aspirations:

The client's initial aspirations were to build a building that was more compatible with and efficient for the varying processes happening inside. They wanted more space for their employees, streamlined compounding processes, and room for future growth. They also wanted a good looking modern building that made a positive statement about them as a company and expresses the type of advanced pharmaceutical work happening within. The Client went so far as to submit a few precedent examples to the Architect to describe the aesthetic he was looking for.



OWNER SUBMITTED PRECEDENT IMAGES

### - Architect's Aspirations:

The Architect's initial aspirations were to clearly define the Client's existing processes and arrange them into an efficient and functional layout. Once the layout and function was clearly defined, the Architect entertained an inter-office design competition where each employee had two days to complete a rendering of a conceptual design based on the previously established plan layout and other Client driven requirements. This design competition led to an array of fantastic design solutions each offering something unique and ultimately feeding the final design solution. The Architect's aspiration to give the client design choices allowed the Client to tailor the look of the building to fit within his desired aesthetic, and showed a commitment to exploring many options, not just settling on the first one.

### - Clients Goals:

- Increase efficiency
- Accommodate future growth
- Provide more space for workers
- Streamline processes
- Create a good looking modern building

### - List of Programs:

1. Public Spaces
2. Dispensing
3. Executive
4. New Patient Coordinators
5. Hormone Replacement Therapy
6. Administration
7. Compounding - Non-sterile Preparations
8. Compounding - Bulk Non-sterile Preparations
9. Compounding - Sterile Preparations
10. Ancillary Spaces

## STORIES - THE EPISODES OF PRACTICE

## - Stories: Programming

The initial contacting Architect, Albert Moliere began the project by scheduling a meeting with the Clients to begin the programming process. Albert brought in Architect, Charles Beazley to facilitate the programming phase and kick off the meeting. The client expressed their concerns with their current undersized facility and the need to increase efficiency. It was quickly identified through the programming but also through use of the space, that the current facility did not function correctly and pharmacy processes were crossing one another causing major inefficiencies in their work flow.

As the Client had grown over the years, they had added processes and simply made do with the space that they were in. The initial goal of the Architect was to separate all of the processes out into a vacuum and treat each one as a separate entity and then identify ideal locations within the work flow where the processes would connect to one another. By using this technique of process analysis the Architect identified three distinct pharmacy processes; (1) The retail pharmacy which was typical - an order is taken from a doctor, the person walks in, fills the prescription, gets it filled behind the counter and walks out with it; (2) The compounding pharmacy function - where the pharmacists actually makes the pharmaceutical products on site or they combine a different compounds and this function takes place in a controlled lab environment; (3) The bulk dispensing function - where the Client makes product to put in their dispensing area which is not only dispensed to walk-in clients, but it was also delivered and shipped. So this function had a shipping organization, then they had veterinary products that they made and shipped to vets across the country so they had those different things going on. These three primary functions combined with executive and administrative areas made for a very complex program which ultimately let to a very functional solution that has served the client well.

According to the Architect, the Client had stated shortly after moving into the new building, that because they could work so much more efficiently than before, that he felt they were a bit overstaffed. When questioned about productivity and profit, the Clients stated that both productivity and profitability had increased since moving into the new building. The Client also mentioned that the new facility has led to a sense of pride in the employees and has led to greater comfort levels for all employees.



HAZARDOUS COMPOUNDING AREA © ABM



- Stories: The Design Competition

The Architect, Charles Beazley, upon designing a few schemes based on the functional plan derived from the intense Programming phase, decided to get the entire office involved in a group competition. The competition required that each employee would have two days to create a design or two based on the developed floor plan, with the goal of visually expressing the space functions. The main entrance and retail outlet was to be highlighted and physically taller, while delineating the Administrative area to the left and the compounding lab to the right with proper material choices.

The group came up with an array of different design and cladding concepts and everyone critiqued one another to ensure nine good final product to present to the clients. The Architect presented the schemes to the client, however the clients did not have a favorite, and instead pointed to different design elements of many of the designs. From this point the Architect took the Client's feedback and created one final design which pulled in the desired elements from the different conceptual designs in a cohesive manner. The final schematic design was presented to the client and approved to move forward into design development.



MULTIPLE DESIGNS FROM COMPETITION © ABM



- Stories: Negotiated Contract

The Clients expressed a need to finish the project in the most timely way possible, thus the idea of selecting a Contractor at the front end of the project was suggested by the Architect. The Architect made recommendations for possible contractors and the Clients conducted interviews in order to select the Contractor they felt would best serve their needs and meet the aggressive time-line. The Lemoine Company was chosen as the Contractor using a negotiated Contract and began pricing the schematic design immediately.

The original building design included just under 17,000 square feet of floor area at an estimated cost of over \$250 per square foot, which was well over the original \$2.8 million budget. The result of the original pricing was the decision to cut out approximately 5,500 square feet from the scope of the project in order to get it back under budget. As the Architect later stated, “we designed the schematic building to meet their program, but at the end of the day the program combined with the quality requirements of the pharmacy created a product that was not doable with the budget allotted.”

This scope reduction process required the additional input of the Architect, Contractor and Client in order to trim out any unnecessary spaces, reduce oversized spaces and save on construction cost through collaborative, informed design decisions. The fact that the Contractor was on the design team at such an early stage allowed for a team building approach which helped the Architect to make more informed decisions to best meet the clients needs.

The design was completed and the Contractor officially bid the job, which had incurred some additional expenses due to the different finish selections and quality requirements, and as expected the project came in over budget yet again. At this point the Architect and Contractor began a value engineering process in which they found creative way to cut costs and reduce product quality requirements where least noticeable. After a very extensive Value Engineering process the cost estimate was cut to \$2.88 million, which was still over the original \$2.8 million budget, but the Client was able to pressure the Bank for the additional funds and move forward with the Construction.

The construction phase went very smooth and efficient aside from the fact that the piece of land originally sold to the Client had served as a dump site when the adjacent four lane highway was being expanded and concreted. This caused delays and additional monies in order to remove and replace upwards of ten feet of topsoil and buried junk in certain areas of the site. This change combined with a handful of other additive Change Orders such as the addition of an automatic transfer switch with pad and conduit for a future generator, additional exhaust fans, upgrading to a resinous flooring, and arguable landscaping requirements pushed onto the project by the local governmental authorities, ultimately adjusted the final contract price to just over \$3 million.

#### - Stories: The HVAC Dilemma

In the initial site meetings and subsequent design charrettes, the Clients expressed the need to have a HVAC system which could reach lower temperatures and humidity levels. Unfortunately the Quality Control manager, Kevin LaGrange was not present at the meeting in which the HVAC system design was proposed and accepted, and his absence in this process would cause issues later on in the project. In hind sight, the Mechanical Engineer, Craig Campbell and Quality Assurance & Quality Control Director, Kevin LaGrange would have liked to install a chilled water system with VAV boxes and thermostats in each and every space on the lab side of the structure, however budgetary constraints severely limited the HVAC design, and that system was quickly value engineered out of the project.

The Contractor initially requested that this entire building be on a DX type HVAC system. Fortunately for the Owners, Kevin LaGrange was friends with one of the owners of the Contractors' mechanical subcontractor, Bernhard Mechanical Inc., and they subsequently submitted a very low price for a chilled water system. The Engineer recommended that the Owners jump on this deal and accept the low bid for the chilled water system. While the chilled water system was not a top-of-the-line system, it was still an superior product when compared to the DX system originally requested by the Contractor. The proposed chilled water system had less VAV boxes and thermostats than desired, which forced the Engineer to design the HVAC system to be controlled by zones instead of on a per room basis.

Once the system was fully installed and operational, the testing and balancing agency came out to the site and balanced the air flow per the Specifications and submitted the report to the Architect/Engineer. The initial balancing appeared to be satisfactory, however once the Clients moved into the space and began working, there were some complaints about comfort levels in specific rooms. The Architect and Engineer visited the space and took temperature readings and the system was performing quite well, however due to the zoning of the VAV boxes, some rooms were a few degrees higher than the next. This small differential, combined with the operations taking place in the space (in which employees were dressed in full garbs and respirators) led to the employees feeling some discomfort. As a result, the Engineer instructed the testing and balancing company to come back and direct more air into those particular spaces in order to resolve the problems.

Small temperature and humidity variations from space to space are typical in a zoned VAV installation, due to the fact that the thermostat must be centrally located in each respective zone. Unfortunately, the QAQC Director, Kevin LaGrange was expecting more precise temperature and humidity control per room than was possible with the currently installed system, and this was a direct result of him not being present at the original HVAC system design meeting. This ultimately led to a frustrated QAQC Director trying to push a system past its specified design capabilities at no fault of his own.

This source of frustration to the QAQC Director was further exacerbated when a specific issue related to the controlling and sequencing of the roof top units, caused massive condensation issues within the lab area. The energy efficiency settings in the HVAC system controls was cycling down the roof top units at night in order to reduce energy costs. Unfortunately, a manual switch on one of the roof top units was accidentally toggled, which created a situation where when the unit was cycled off, the fan remained on and was pulling in humid, unconditioned air into the cold, dehumidified space causing instant condensation on the interior surfaces. This issue was eventually rectified by the service technicians from Bernhard Mechanical, and additional controls were added to safeguard this type of event from ever happening again.

Another event happened shortly after the issue above was rectified and caused even more frustration for both the QAQC Director and the Owners. A major power outage due to a large storm caused another condensation event in the lab area. While the building was designed for the addition of a back-up generator, the generator had not been installed yet and thus the building sat unconditioned for a period of time until the electricity was brought back. This allow the humid outside air to infiltrate the space and condense on the interior surfaces. Fortunately, the generator is now installed, so this type of situation should not happen again in the future.

The last nagging HVAC issue which was finally resolved over a year after the Client occupied the building was a small leak below one of the roof top units. This particular issue was never brought to the Architects' attention until the 1 year walk-through with the Contractor. The Engineer investigated the issue and eventually found that the coils in the roof top unit were very dirty and the fan speed necessary to pull the air through the dirty coils was causing the condensate to splatter against the inside walls of the unit , drip down through the insulation and ultimately saturate the ceiling tiles above the sales counter. The Engineer directed the Contractor to clean the coils in hopes that this would solve the issue. Unfortunately, while this did help, it did not completely solve the issue.

The Engineer returned to observe that the fan in the roof top unit was still running too fast and continued to cause the splattering effect inside the unit. This led the Engineer to investigate why the fan was running so fast, and ultimately he discovered a strange issue with the VAV box controllers, in which some of the interior VAV boxes were being switched into heating mode in the middle of summer, while the exterior VAV boxes were in cooling mode struggling to counter-effect the heat. This issue is what was causing the fan at the roof top unit to run so fast and spray condensate on the wall of the unit. As a result of this finding, the Engineer directed the controls subcontractor to fix the glitch at their cost in order to rectify the problem and stop the leak. The controls were then modified to remove the glitch identified by the Engineer and so far the HVAC system has been performing as designed.

As described above, the HVAC system was a constant source of frustration for all parties involved in the project and ultimately led to negative impressions by the Owners towards the Architect, Engineer and Contractor. While it is the opinion of the author that these negative impressions are misdirected, it is the job of the Architect to keep apprised of these issues and communicate the issues to the Client. In this case, the Architect was simply overwhelmed and unable to stay apprised of the multiple situations due to no fault of his own. Too many issues were all happening in conjunction, combined with conflicting expectations, and services calls that left the Architect and Engineer completely out of the loop and unable to help.





## MEASURES: INDIVIDUAL, PRACTICE AND CLIENT MEASURES OF SUCCESS

### -Measures: Client's Measures of Success

The Client's measures of success as it relates to the physical buildings were the ability of the building to increase their productivity, eliminate the existing fragmentation and to accommodate future growth. In terms of the physiological affect, the Clients hoped that the project would instill a sense of pride and create a more cohesive group of employees with dynamic relationships between the employees, processes and managers. As a result of a very detailed and in depth programming process which included listening and reacting to the employees, the final project vastly increased production, profit and employee satisfaction. The final design reflected a majority of the wants and needs of all employees and provided space, comfort and aesthetically pleasing interior spaces. The feedback from the company's clients has been overwhelmingly positive and the company has seen an increase in business since the move.

### -Measures: Architect's Measures of Success

The Architect's measures of success are happy clients and good buildings. Since Architects Beazley Moliere is a service firm, their purpose is to serve the Client, which translates into a good building that meets the needs of the Client. As indicated previously, the completed building met all of the Client's needs and met the wishes and desires of most, if not all of the employees as well. As a result the entire community has benefited by a successful building because it increases pride and satisfaction as well as new jobs in the local community.

### -Measures: Community's Measures of Success

The community's measures of success were the businesses' profitability and expanded services offered to the local community. The construction of a well designed building in the midst of strip malls and box stores also provides beauty to the community and helps to set a new standard of building in the area. The building has seen much success in the community as it has been recognized with awards for design and construction in numerous publications. This is a result of an open minded Client who stressed the need for a building that would not simply house their current activities, but be a building that makes a statement about them as a company and becomes a showplace. The inclusion of movable sales kiosks in the lobby area allows the company to hold regular meeting and educational seminars in the lobby at the building in order to give back to the local community.



MOVABLE KIOSK © ABM



ENTRANCE LOBBY © ABM



ILLUSTRATIONS: THE GRAPHIC OVERVIEW



FRONT OF BUILDING © ABM



COMPANY LOGO © ABM



MONUMENT SIGN © ABM



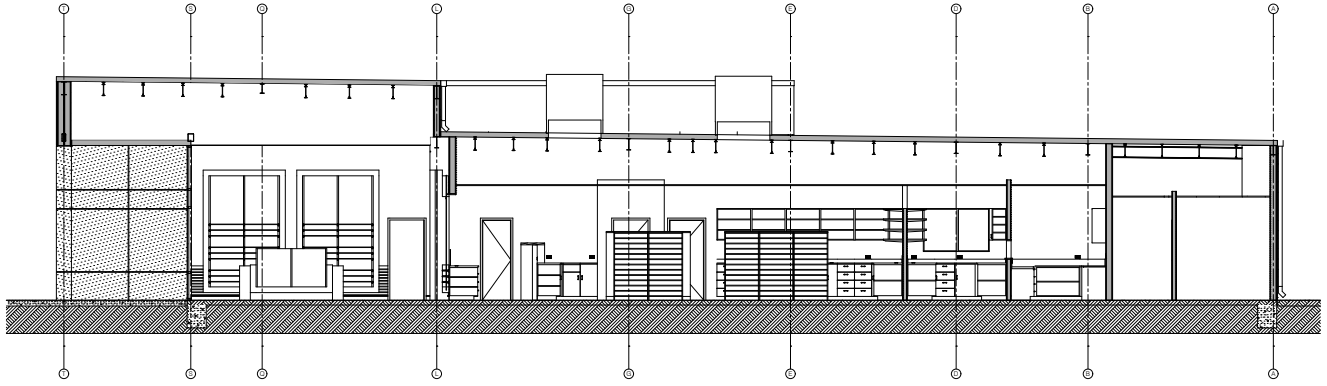
MAIN ENTRANCE CANOPY © ABM



CUSTOM MAILBOX © ABM



ILLUSTRATIONS: THE GRAPHIC OVERVIEW



BLDG. SECTION @ CENTRAL DISPENSING & LOBBY © ABM



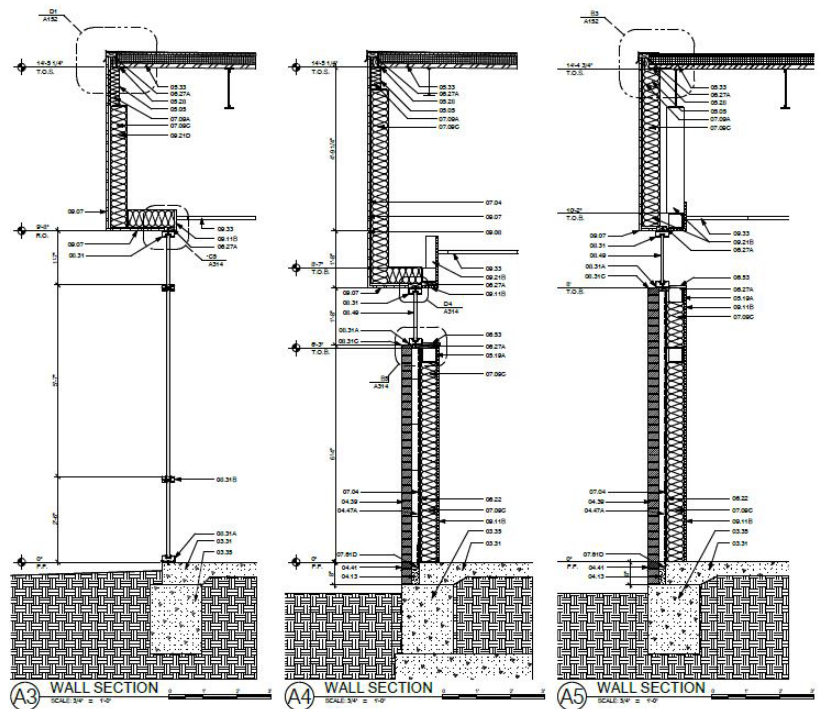
CENTRAL DISPENSING © ABM



RETAIL DESK IN LOBBY © ABM



COMPOUNDING AREA © ABM



WALL SECTIONS @ FRONT WALL © ABM

ILLUSTRATIONS: THE GRAPHIC OVERVIEW



CONTROL ROOM © ABM



CONFERENCE ROOM © ABM



MENS RESTROOM © ABM



## PROJECT ANALYSIS \_

### THE CLIENT

The Owner of Professional Arts Pharmacy, Eric Vidrine, who had briefly studied Architecture in college, understood the importance of using an Architect, so he actively sought out an architect for his newly conceived project. After seeing an impressive project constructed by one of his colleagues in Texas, Eric decided that he wanted something similar, if not better. This desire led Eric to actively seek an architect with medical experience in order to properly design their compounding laboratories.

During the process of qualifying for a construction loan Eric received a recommendation from Jerrod Prejean, a banker, who was helping him obtain the loan, who recommended Architects Beazley Moliere for his project. Jerrod, who is a close friend of Albert Moliere, Vice President of Architects Beazley Moliere told Eric to contact ABM to help him with the pharmacy project as they had a lot of medical experience. With this recommendation, Eric contacted Albert and eventually hired ABM to design his building.

The architect chose to pursue this Client for profitable reasons, but also because of the challenging and complex nature of the project. ABM prides themselves as being a service firm, focused on pleasing the Client while creating good buildings, and this appeared to be a great opportunity to do just that.

The working relationship between the Clients and the Architects was very friendly and consisted of long and intense meetings in which the Architect came to understand the Clients as very professional, scientific and particular. The Clients were very process oriented and paid very special attention to details, which the Architect inferred was a direct result of the type of work that they do, dealing in microscopic amounts of pharmaceuticals. Fortunately this allowed the Architect to get very detailed in the programming of the project prior to design, which ultimately led to a very successful project.

### THE FIRM

As a firm, Architects Beazley Moliere shares the characteristics of a number of different firm types, according to the Sparks Framework, but advertises itself as a service driven firm, dedicated to happy clients. In the Sparks Framework model, Architects Beazley Moliere would fall somewhere between the Market Partner, Niche Expert and Einstein Archetypes. Regarding this particular project, Architects Beazley Moliere took the role of Market Partner as seen in the way in which they expanded the ways to help the sector-specific Client. As a business, in general Architects Beazley Moliere generally falls into the Market Partner role, but strives to be and Einstein Archetype, project permitting.

Architects Beazley Moliere is a regional, privately owned C Corporation, consisting currently of two managing partners, Charles Beazley, President and Alber Moliere III, Vice President. Architects Beazley Moliere's current marketing and outreach strategy relies heavily on relationship building with community leaders and involvement in civic organizations. Currently no stock options are available to employees, but a shared profit plan is in place for individuals who bring in new business to the firm. Architects Beazley Moliere's profit projections are generally 10% on each project, however on this specific project the profit projections were lower due to the implementation of a new Building Information Modeling software. Ultimately, the use of BIM software will increase productivity, but the learning curve experienced on this project did affect the bottom line.

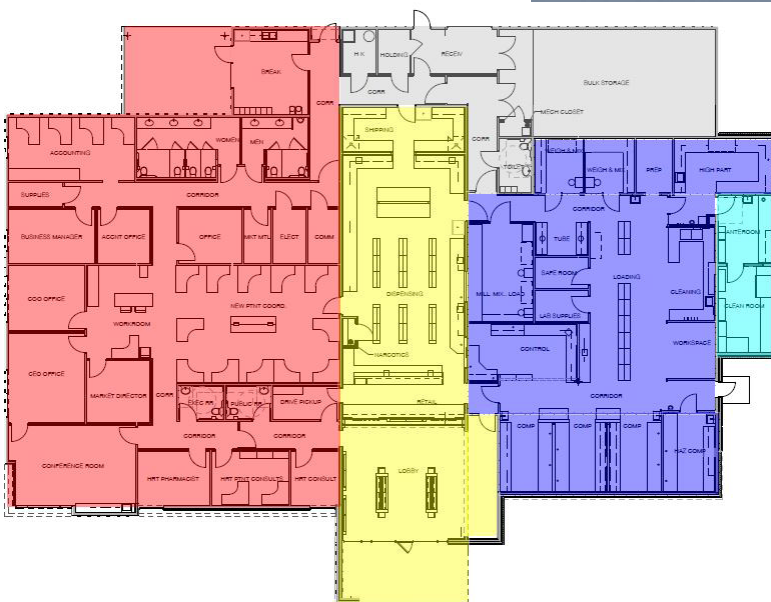


### DESIGN

The design of the Professional Arts Pharmacy building was heavily plan driven due to the intense flow and adjacency requirements generated from the programming process. The most important space program wise, having the most adjacency and interaction requirements is the central dispensing area and retail desk opening to the lobby, all shown in yellow below. For this reason the design focused on giving this portion of the building more importance visually by raising the height of that block and using the parapet walls at the roof level to conceal the roof top HVAC units. The compounding laboratory, shown in dark blue below needed to be more controlled and concealed, hence the use of brick masonry and a high and slender horizontal glazing scheme at this area. The clean room area, represented in cyan in the plan below was a very controlled, high pressure environment, which needed to be expressed on the exterior as a taller closed in space constructed entirely of brick masonry, with no glazing elements. The office portion shown in red below wanted to be more accessible than the laboratory and more open, thus the use of more floor to ceiling glazing in strategic locations and more of the lighter stucco materials than brick. The main Lobby was to be the focal point of the design and was requested to be “modern” and clean. Thus the design strategy in the Lobby was to use a contemporary material pallet consisting of frosted and fretted glass, wood slats over graphite plastic laminate, with polished stainless steel and custom aluminum and glass shelving brackets.



CONCEPT RENDERING © ABM



PROGRAMMING PLAN © ABM



LOBBY CONCEPT RENDERING © ABM

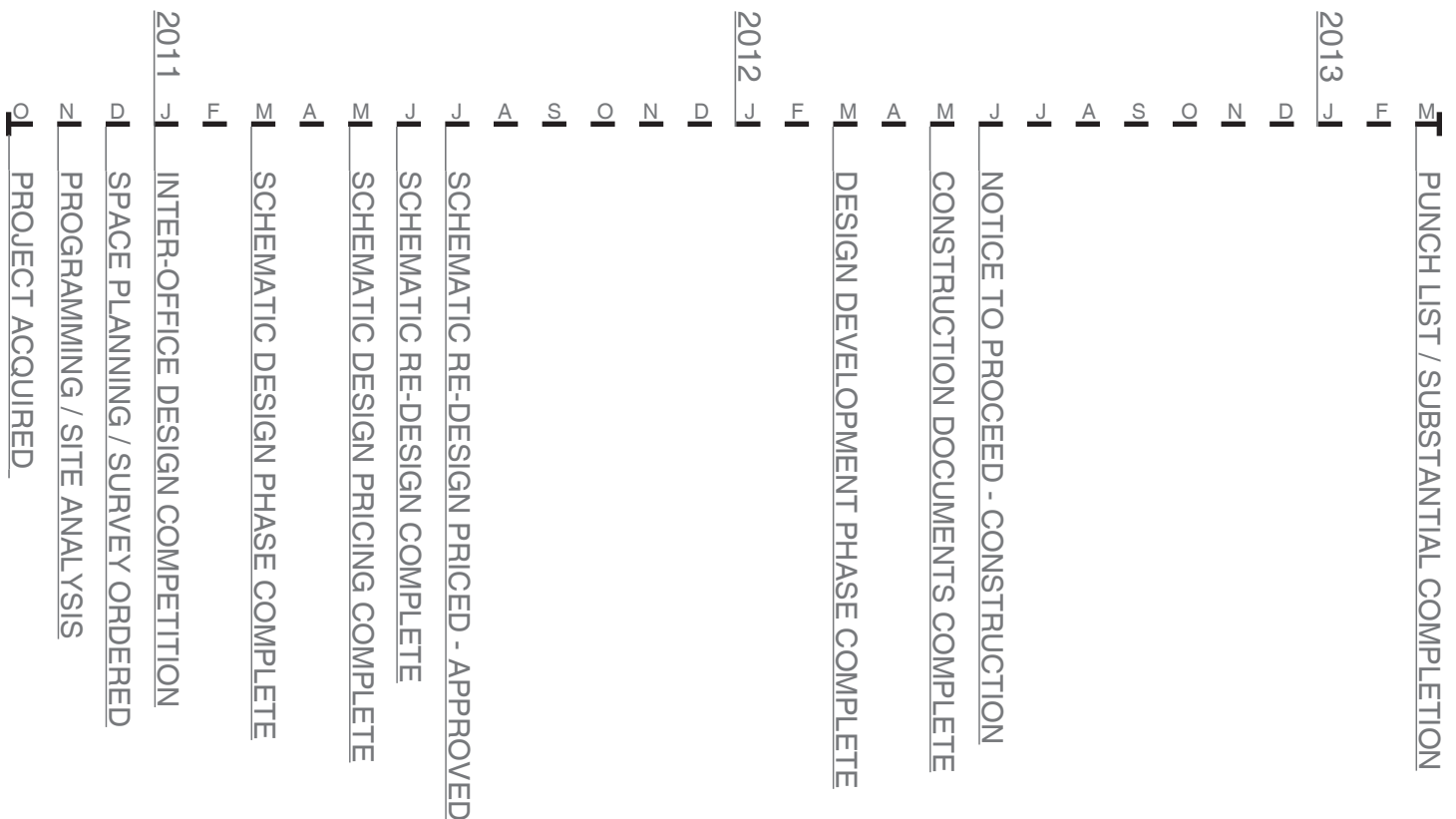
**DELIVERY**

The Professional Arts Pharmacy project included standard project delivery methods, such as print-ed Construction Documents and Specifications. The project team used standard AIA contracts, with minor changes in order to manage disputes, such as removing all references to arbitration in the supplemental conditions. The removal of arbitration as a means of dispute resolution was done at the recommendation of the Architects Insurance agency.

As with any project, some subcontractors request CAD drawings, which Architects Beazley Moliere is willing to give out, but the Subcontractor and Contractor must sign a waiver and pay a small fee for this usage. The waiver outlines how the files may be used, states that no guarantees shall be given on their accuracy, and outlines the property rights of ABM to the files.

The Professional Arts Pharmacy project was the first project to be done using a Building Information Modeling software, Archicad by Graphisoft, in Architects Beazley Moliere’s office. After the schematic design phase was completed and the project, which was currently designed in Sketchup, was ready to move forward into design development, the project manager, Adam Beazley and Intern, Scott Chappuis attended an in-house training workshop with Josh Bone from Graphisoft. During this week long training, Josh Bone taught the duo on the basics of the program for the first few days and then began to guide the team through the process of actually re-building the project in Archicad. After the week long training, Josh remained accessible by phone so the project team could call on him when any questions or issues arose, and eventually, with much frustration, the team completed the Construction Documents and finished the project.

Project Delivery Time-line:





### SERVICES

Architects Beazley Moliere provided its full range of Design and Contract Administration services to the Professional Arts Pharmacy. However, they went above and beyond and provided the Programming service on this project at no additional cost to the owner. The intense programming as described previously would normally be an additional service to the ones listed in the standard AIA Contract.

Contract Administration Images:



CONSTRUCTION PROCESS IMAGES © ABM



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## APPENDIX \_\_

### ARCHITECT INTERVIEW

A: Adam Beazley

AL: Albert Moliere

C: Charles Beazley

### CLIENT ACQUISITION

**A: How did we acquire the client?**

AL: A good friend of mine that I have been knowing for quite some time is a finance guy at the bank and he recommended that the client give us a call. So it basically is networking.

**A: And once you met with them, why did they originally decide to go with an architect?**

AL: The client told me that he actually studied architecture a little bit in college and knew that he couldn't do it so he changed his major, so he knows the importance of having a good architect and so he actively sought out the proper architect and Jerrod Prejean, my banker friend was one of the guys he had asked and obviously Jerry gave us a good word.

**A: Is there anything you can share with me about the client/project before programming? Anything in particular about if they had any aspirations or specifics?**

AL: Again they were worried about who the architect was going to be and they wanted somebody that did medical so obviously I went and talked to them and gave them a lot of information on us and the medical we have done and gave them client resources from the contact and so on and so forth. They were inspired by a project that was done in Texas and was in their circles with the professional pharmacy accreditation board. Evidently this guy in Texas was real high up in it and they were very impressed with his building. They wanted to top that and so they decided to hire an architect that knew medical which would relate into the labs and so and so forth. They actively sought that.

### PROGRAMMING

**A: At what point did you (Charles) get involved?**

C: As a designer and I got involved to do the programming. So Albert was actually involved to the point, he did the initial client contact but when we had our first meetings with the client to determine a program, I was facilitating the programming.

**A: Was this programming that was additional to a standard AIA contract or was it...**

C: Yes it was, no we did not get paid extra for it. So the work was above the contract, but it wasn't added to it.

**A: What are some key things from the programming that you learned about them? What were their goals and aspirations and what were they ultimately trying to achieve?**

C: Well globally they were in a facility that was much too small for them. It did not function correctly, meaning that the work flow through the spaces crossed each other and wasn't really well thought out because they had just grown into spaces and added spaces.

**A: How many people did they have in there before they moved?**

C: They ended up planning for about 70 people. And those numbers vaguely remembered, so they may not be quite right. They had some people in a different building, marketing people and that sort of thing.

**A: So they had an additional facility that they were leasing?**

C: I'm not exactly sure where it was or if it was at the other end of their building next door because they had two (2) businesses, one (1) of them didn't move, wasn't part of PAP, in the old location. Then they had marketing somewhere but I don't remember where it was. It was actually in a different place.

**A: Is there anything else you learned from the programming?**

B: They had a very complex work flow because they were doing multiple processes. They mixed three (3) different types of pharmacy processes, one (1) was the retail pharmacy which is typical, you take an order from a doctor, person walks in, fills the prescription, gets it filled behind the counter and walks out with it. Then they had a compounding pharmacy function which is where they actually make the pharmaceutical products on site or they combine a different compounds and that took place in a lab next to it and they made product to put in their dispensing area and that was dispensed not only to walk-in clients, people that came and got it but it was also delivered and shipped. So they had a shipping organization, then they had veterinary products that they made and shipped to vets across the country so they had those different things going on.

**A: Did they do any wholesale?**

C: I don't know if it was wholesale or retail.

**A: What was the working relationship like?**

C: It was a very good working relationship. We met with them frequently and for long periods of time actually during the programming to understand their function and flow we had mapped it out and had to figure out how orders came in and went out and got manufactured and got filled and stuff on the shelves got restocked and they had the bulk manufacturing part of it and they were also at that time putting in a sterile processing area, which is a very complicated clean room, very complex.

**A: Through those meetings did you find any social kind of values that helped you in the design of it or establishing something more than just the program to base creative design on?**

C: No. I mean the only thing that would even get close to that, because it was that they wanted to have a very nice friendly area for their patients, modern, they needed areas for counseling because they also did hormone replacement counseling and had counselors there for that and would have things at night, seminar sort of things, training sessions but they also had people that dealt directly with, every pharmacy has kind of a counseling area or question area where you can go over to the window on the side and the pharmacist will talk to you about the drug you are taking. When it comes to hormone replacement and things like that it is a longer counseling process and more personal so they actually had a room where they would take people in.

**A: How would you best define the client?**

B: Very professional, scientific and particular, because they thought in very microscopic terms dealing with making pharmaceuticals, everything was very tightly driven in their processes. They had that mindset. We are still dealing with some of that.



**A: What would you say their aspirations were?**

C: I think their aspirations were primarily to have a very nice retail face and to efficiently house their process, their manufacturing processes. Their mail ordering processes and their distribution processes.

## DESIGN

**A: What were your aspirations for the project and what led to the interoffice competition?**

C: I think early on some projects are driven by different parameters, different things, this one became obviously it was going to be driven by process rather than anything else and so part of what we were doing in programming was very clearly define the processes that we needed and then to be able to arrange those in a functional plan that made sense.

**A: The plan really came first in this one?**

C: It did and if you remember we had a plan and the design Charette was pretty much looking at the plan and had to design options to that plan but it was already around a basic plan. Those process and functions had to be solved first.

**A: Speaking of process and kind of backing up a little bit, what was the process of getting answers from the client, was it just going to Eric and getting an answer?**

C: We met with everybody in the office pretty much and interviewed them about the needs of their particular department or area. There were several key people like Stephen Carroll, Kevin and of course David Myer, one of the owners. Eric was not involved as much in the design as much as those other people, the business part and then were a couple of others, the accounting side, the head pharmacist. We got deeply into all the pharmacy areas, they have a control area where orders come in and are put together and we had that cabinet they had an order to be placed either by phone into this girl or they would come in from the dispensing area with a half a bottle of something and they ten (10) pills in that one and they needed twenty (20) so they would have the bottle with it and the order and the ticket and it would come in through the window and she would have to write up the order and then put it together with stuff and they were putting the orders with a magnet on a hood and then they had a cart where they had the basket with the rest of it in it, separated and we designed that so that she could put it through and the shelves and they could just come in the morning and pick them up. So essentially we just took input from all the people and came up with a design, figuring out where things went, we had dispensing area where all of the meds were but at one end it was meds that went out the front door at the other end it was meds that went out the back door for shipping.

**A: So most decisions were probably made by the architect based on input from...**

C: Based on interviews, input and analysis of what they were doing, analysis of their processes. Eric actually said when they moved in they figured out they had too many people, because if processes became so much more efficient as we had figured out and made them linear instead of zig-zaggy you know and they could actually do more work with less people in the new space because it so much more efficient.

**A: What point was the contractor to be involved in the decision process?**

C: The contractor came in fairly early and was one of the reasons we had to go back in and cut space out of it because pricing started coming in.

A: This was a negotiated job right?

B: Yes, they were selected through an interview process, and they gave us preliminary numbers which we then had to go back in and...

A: was that preliminary first preliminary number at schematic design or design develop?

C: Schematic design and we had to cut a lot of area out, we were like at 17,000 feet and we had to go down to 11,000 feet, because of the cost of doing that type of thing was more than they could pay, their program and what they were planning for they couldn't afford and then we did design development, we priced it at DD and we priced it again in final and had to do some cutting at final.

A: What was the original budget?

B: I don't remember, I have to go back and look those up. I think we have them but the budget ended up getting a little bit bigger.

A: Are there any specific examples of innovation in this case? Ideas and innovation associated with design services, willingness to venture?

C: There wasn't anything new in it but I think the way the whole building worked around the central dispensing area feeding it and that area was fed from like four (4) different points or accessed at four (4) different points and it had to be secured at night, it was something where we used a roll-up door to cover the entire front counter so that we wouldn't have strange-looking partitions to lock it off. We allowed for the pass-thru product from the lab to go into and out of that central control area from dispensing we allowed for the dispensing area to be stocked with bulk product from the back of the lab. We had all the dispensing area come together for filling and packaging of the prescriptions to be shipped at a special shipping area for packaging in the back and then a way to put it in a back room that was secured and accessible by way of latch release from the UPS guy who picked up all the stuff for shipping. Then there was another side door on the other side where the ten (10) people who were taking call-in orders could come in and give the order to the pharmacist to fill from the doctors calling in. That is the kind of different and of course the front counter where people walked up and then right next to the front counter there was a door into the room where the drivers sat because then they went and delivered things that had to come out of the dispensing area so there was one (1), two (2), three (3), four (4), five (5), six (6) functions that all fed off of the central and into the central dispensing area. This is why it was driven by function.

A: Going back to design, how did that process go and what led to the inter-office design Charrette?

B: It was just a wild hair, we just said hey let's do that. Why not have a design Charette and let everybody have a chance to design it.

A: Had y'all already presented anything to the owner?

C: The owner had not seen anything but plans at that point.

A: What were your thoughts on the inter office design Charette? Did it turn out like you had hoped? Was it a good idea, bad idea in hindsight?

C: I think it was a great idea, I don't remember what gave me the idea, I think it may have been one of those spring things we go to, Celebrate Architecture something about just trying to get more people involved and ideas and throwing out ideas.

A: What ultimately happened at that meeting where they were all presented?

C: If you remember they was quite a variety of different ones and we had given everybody some parameters as far as what the client said they would like, even though there were not a lot, the was just a few and we presented all of them and they told us the things they liked, they didn't have one that they liked, they had some that they liked ideas off of but they weren't complete, so they didn't really pick one and say this is it, they picked features of two (2) or three (3). At that point we did kind of a mash-up. And essentially at that point I took that and developed the one that was done and it wasn't mine.

A: After the design was all complete and construction documents were done and the back and forth and the value engineering, that had to be done to get it under budget, can you talk about the negotiated contract and whether that was a benefit, a detriment or whether it could have gone smoother, if there were issues that you didn't like?

C: I think the negotiation project was a great benefit to this project because there was a great gap between the owner's expectation of budget and what a building of this nature was going to cost.

A: They felt it was going to be less or more?

C: They did not expect it to cost as much as it did and they wanted a great deal, but for a much less cost, but in order to do the things that they wanted from a quality standpoint. They wanted a quality building, they wanted a building that was a laboratory and it had \$250,000 worth of casework in it. It had that type of things and had to have the air quality, and it has a full-fledged clean room with positive air pressure and seals, I think there is 3-1/2 tons of air conditioning going through that one room if I remember the email right the other day and so those quality issues, they were not prepared for the sticker shock of that and so the only way we were able to really work it to something they could afford and have a number that wasn't going to be totally surprising to them was a negotiation process. I don't think we would have been able to budget, we would have had a really shock when it was bid, because we would not of put that much money in it our budget.

A: And then per contract we would have had to go back and redesign? So for the firm is it more beneficial profit wise to do negotiated work or bidding where budget is determining factor?

C: Probably is, I think we have a better chance under a negotiated project to make a better profit because we have less opportunity to do it over again.

Business

A: In terms of measuring the project, what are the firm's measurement of success of this project?

C: A happy client.

A: What about your specific individual measurement of success in this project?

C: A happy client and a good building.

A: Are there any ethical questions and dilemmas in this case?

C: We didn't come across any.

A: Were there any expectations for special recognition in this case?

C: No. I don't think anybody was looking for awards or anything like that even though it did win one.



A: Philosophy, missions and goals, objective strategies, anything in particular about this firm you want to mention that is not listed on the website?

C: I think our mission is tied up in the fact that we are a service firm and that our purpose is to serve our clients and in the meantime and as a result of that should be good architecture, something that is going to benefit the client and the community as well.

A: Team ownership?

C: C Corporation.

A: Firm identity and expertise. What would you say that our expertise are?

C: Our expertise is complex architectural projects.

A: Would you say you are local, regional or global?

C: Regional.

A: Stock option plans, private holding and public offering?

C: Privately owned.

A: Marketing and community outreach strategies? Marketing planning, identity, strategies related to project search. Public relations that kind of thing.

C: Don't know that we have any.

A: What are the relevant financial implications of this case to the firm?

C: Financial implications of the project benefited the firm both financially and in the eyes of the public, because we have gotten lots of compliments from the public.

A: Are there any human resource strategies related to this case? Team management issues? Staff development, team collaboration?

C: I think the team management issues would be the whole thing about the design Charette or competition.

A: What were the firm's profit projections?

C: We always project about a 10 percent profit. Doesn't mean we make it.

A: Risk management issues?

C: There were none.

A: Strategies employed by the firm to assure quality? Tight specifications? Firm peer review, value engineering, quality management?

C: We do not do any right now, that's the problem.

A: What digital information systems were in employed?

C: We used BIM on that one. Building Information Modeling, built 3-D model

A: Can you elaborate? How did you feel about that process?

C: Considering it was our first project it was actually a good experience I thought. It worked out quite well for the project. A little difficult to do but it worked out real well for it.

**A: What were the project management strategies in this case? Team formation, project operations, cost management, life cycle costs?**

C: As you know we had a project manager involved in the project was handed off to the project manager who kept the project in line throughout production and through construction.

**A: Can you elaborate on the construction a little bit maybe how you felt the construction went, smooth, a lot of change orders?**

C: We had some very significant change orders but that was because we uncovered that pit in the middle of the site that the site had been used for a concrete plant for the paving of Ambassador Caffery and there was a pit full of all kinds of junk in the middle of it which we discovered and had a significant change order because we had to dig down about 10 feet and fill, but that was unforeseen circumstances and of course it wasn't really anybody's fault, just something we found, other than that there were not a lot of change orders. The construction went very well, it was finished in eight (8) months which was remarkably fast, working with the contractor went very well, negotiated project has a different level of expectation between owner/architect and contractor so the responsibilities of one to the other change slightly from a bid project and it just makes for a much smoother construction attitudes of everyone involved.

**A: Are there any issues that you can talk about that you are either really happy with or dissatisfied with that came up?**

C: We are still having some ongoing issues with air conditioning. Part of that goes back to the expectations of the client being that they are so precise in their measurements that they think mechanical systems should be more precise than they are able to produce. It has been a struggle trying to get the systems to work completely to their expectations.

**A: What are the ongoing issues?**

C: Some of the big issues had to do with the control systems shutting units down when they were not supposed to be shutting down. One, there was some energy saving measures that would shut units down at night which would cause too much moisture to get in the building and may not be able to function in that way, may not be able to have that kind of energy saving because of the moisture requirements of the lab spaces. There was also something that would cause a unit to shut down and when the unit would shut down, oh I know what it was, the hoods would be open, the unit would shut down and it would draw moist air into the building which would then hit the cold grilles and cause water to drip into the building. That we had to resolve. There are still some things going on with one (1) moisture area which we haven't to anyone's satisfaction discovered exactly what is going on yet. Kevin continues to complain when he gets one (1) degree rise in temperature. He thinks that's something that shouldn't do that. For the record the HVAC is a chilled loop, it's a chill water, variable air volume system.

**A: Any other things you can think of relevant to this project?**

C: Far as I know they are happy about everything else.

**A: Overall you have had discussions with the client since then?**

C: Early on this A/C issue dragging on, I guess they are still happy but I don't know that. Things can change when a problem continues to go on and not be resolved.

**A: And do you think that they believe that it is our fault in some way?**

C: I don't know, I think they believe that the system ought to be able to keep it exactly the same temperature and exactly the same relative humidity all day long at any conditions. And when it doesn't do that and Kevin who is a scientist and is measuring in milligrams and microscopic things, sees a spike in temperature, he believes that is a failure rather than it going up and correcting itself and coming back down, which is doing what it is supposed to be doing, he sees the spike as being wrong.

**A: You had mentioned that Eric said something that when they moved in they realized that they were over-staffed. Can you elaborate on that conversation?**

C: He just made that comment to me and says and hadn't really had a chance but when we moved in we realized we had too many people because we can work so much more efficiently here.

**A: Did they have to let people go?**

C: I don't know if they let people go or if they probably just ramped up their production. He did not say they let people go, but the inference was that they could do a lot more with less people because they ended up having to add some more parking right away because they grew some more. I think initially they figured out when they first moved in that they could handle more with less people, but I'm sure that they quickly caught up with the ability of the people that they had, the comment really was how much more efficient they worked.



## OWNER INTERVIEW - DAVID MAYER

**What were your aspirations when deciding to do this project?**

build building more compatible for what we did. more space for workers. streamline processes

**What was your measure of success for this project?**

eliminate fragmentation. cohesive group! dynamic relationships between employees processes and managers.

**Why did you decide build/architect rather than lease?**

wanted to design a building to fit our needs. rather than lease a space and just fit and make compromises. more freedom to be able to design a building for exactly what we needed.

**Describe the relationship between you and the Architect.**

Eric chose the firm. Working relationship was great.

**What was your input into the programmin stage of the project?**

initial meetings we attended. my input was heard and used. My input was more about the layout and it would conform to USP Standards.

**How did you feel about the programming stage? Likes Dislikes?**

Required alot of guidance on the architects part. Architect came up with plans that we were looking for.

**What was your input into the design stage of the project?**

some input, but Eric did more.

**How did you feel about the design stage? Likes Dislikes?**

not my forte. we just wanted a nice looking modern building. functional. aesthetic and professional.

**Describe the contractor selection process and the reason for going with a negotiated contract?**

Eric was involved in that process. I was not involved.

**In hind sight.. good desicion or bad one?**

Yes.

HVAC - weve had ongoing issues with a leak in the ceiling, probably due to humidity within the unit. been frustrating. chalenging to find the right person to talk to.

**What was your input into the construction phase of the project?**

to me it felt like a briefing of what was going on. what was happening, what was going on and how work was progressing. Liked being involved in the meetingsd.

**Post construction reflections?**

everything was great, except for the HVAC issues.

## EMAIL CORRESPONDENCE - ERIC VIDRINE

**What were your aspirations when deciding to do this project?**

To design a building that made us more efficient, accommodated future growth and that also made a statement about who we were as a company

**What was your measure of success for this project?**

The final product met all of those goals.

**Why did you decide build/architect rather than lease?**

Financially, it made more sense. We've been in business 16 years and have owned our own real estate for the past 13.

**Describe the relationship between you and the Architect.**

I view the architect as not only someone who listens to our needs but also is an advocate on our behalf with the contractor to insure the plans are executed correctly and with good quality.

**What was your input into the programming stage of the project?**

Mostly on the administrative area.

**What was your input into the design stage of the project?**

Communicated material preferences and overall aesthetic I was looking for.

**Describe the contractor selection process and the reason for going with a negotiated contract?****In hind sight.. good decision or bad one?**

Good decision. We were on a tight time frame and the bid process would have taken too long.

**What was your input into the construction phase of the project?**

Minimal. Occasional site visits

**How did you feel about the construction phase? Likes Dislikes?**

Extremely efficient.

**Post construction reflections?**

Pleased with the finished product. Very pleased other than ongoing ac issues and parking lot holding lots of water.

**Final thoughts/opinions about the Contractor & Subcontractors?**

Contractor was extremely professional and attentive to our needs. First Class operation.

**Final thoughts and opinions about the Architect & Consultants?**

Did a good job of design both aesthetically and with regard to function. Also really good in contractor oversight and insuring plans were executed correctly. Still having issues on determining responsibility for design flaws in AC system. Also stumbled on cost estimation in the beginning of the project by vastly underestimating the cost per foot for each of the areas in the pharmacy which cost us time.

What results have you seen from the new facility? Productivity? Profit? General attitude? Employee retention/satisfaction?

New facility has lead to increased productivity and sense of pride from employees. Really a show-place.