The Craig Hospital Expansion and Renovation project is a signature example of meeting the challenge of a difficult job by a General Contractor. Patients at Craig Hospital are treated for traumatic brain and spinal cord injuries - injuries which require the most sensitive, skilled care. The required phasing of the project over the forty-two-month timespan was complex, requiring detailed pre-planning and coordination with many stakeholders. Dynamic communication and relationships among the hospital executives, staff, patients, and patient family members was paramount, requiring and deserving a dedicated Patient/Staff Liaison from GE Johnson. In addition, coordination with the surrounding neighbors and the City of Englewood was a key element to ensure project success. GE Johnson maintained an excellent safety record and contributed to the establishment of a robust and successful project culture which fostered an involved and proud project team.

The project encompassed five phases which were each comprised of sub-phases to add new patient rooms and offices; this was no small feat. Again, Craig specializes in treating and rehabilitating patients who can be extremely sensitive to various aspects of the construction process such as noise, lights, and vibrations. GE Johnson completed the work compassionately, and with stringent attention to patients and staff. All construction was performed with minimal disruption and completed on schedule while the hospital remained fully functional and occupied.

Coordinating Success
A key factor to the project’s success was the great communication efforts by the entire project team, including RTA Architects, Craig Hospital, GE Johnson, and major subcontractors such as
MTech, Olson Plumbing, Encore Electric, ISEC, Gary Leimer, Colorado Hazard Control, and KHS&S. The team worked together to have comprehensive communications and coordination throughout every phase of the project.

“The deep collaboration going on construction (is) responsive to our patient needs. Shutting down drilling for three hours to accommodate one patient’s need to nap and be relocated to a quieter room is one example of their level of commitment to the Craig philosophy of patient-centered care.”

Mike Fordyce
President and CEO Craig Hospital

GE Johnson provided a dedicated Patient/Staff Liaison to coordinate with the hospital staff, providing frequent communication and answering questions and concerns of the end users. This individual was the bridge between Craig Hospital and the GE Johnson team, allowing both staff and patients at Craig to voice concerns or ask questions throughout the construction process. The Patient/Staff Liaison was integrated into all coordination and communication between the hospital staff and the construction team, no matter how major or minor the coordination efforts were. This individual was available after hours and on weekends in the event of an emergency.

The GE Johnson project team coordinated with the Craig Hospital executive team to setup a project-specific website for staff and patients to access updates on the latest construction news and upcoming activities. Users could log on and submit questions which were answered promptly by GE Johnson and Craig Hospital staff.

Coordination did not stop within the footprint of the project site. The project team coordinated with the local neighborhood, including private homeowners and business people, to mitigate any disruptions in the area. This included providing public safety considerations such as safer sidewalks, better ADA access for the surrounding area, and a maintained bike path throughout construction. GE Johnson coordinated with the City of Englewood on shut downs of access roads to the hospital to maintain good wayfinding for detours and temporary closures. Additionally, there was special coordination with the nearby Swedish Medical Center to ensure coordinated logistics, services, and emergency routes for extended patient care.

**Overcoming Obstacles**

The project faced a variety of obstacles and challenges. These included logistics coordination for street closures of the surrounding neighborhood, mitigating unforeseen job conditions, and executing a construction plan which supported continuous operation of the existing facility.
The logistics coordination of the project was constant. One particularly challenging task was shutting down Clarkson Street, which ran through the middle of the Craig Hospital campus. The removal of the exiting thoroughfare was a major change for the neighborhood. The re-route also included changing the emergency ambulance route to Swedish Medical Center.

This challenge was overcome through close coordination and negotiation with the City of Englewood’s various departments, including building department and public works. Even public bus routes were re-routed. It was agreed that during the construction work some of the city sidewalks, crosswalks, and ADA ramps would be updated. This closure also required coordination and planning with Swedish Medical Center, Craig Hospital, staff, and patients. Numerous meetings with the City and Swedish Medical Center were held in order to work through all the details to change Clarkson Street from a through traffic street to a dead-end turnaround at Craig Hospital. Coordination for directional and wayfinding signage was agreed upon and custom-made to accommodate the change.

As on many projects, unforeseen job conditions threatened to extend the schedule. During excavation, an old barrel cask pipeline was found which had to be removed in order to properly excavate and install the new underground sanitary and storm systems. When construction of the expansion began, walls and foundations were discovered in the existing structure which were not shown on any historical drawings. Abandoned foundation walls were found at the old pool area of the structure, along with interior brick and concrete masonry unit (CMU) walls which were buried in drywall framing. Both had to be demolished. Unsound flooring was also found in various areas which had to be demolished and re-poured. Old sidewalk slabs were incorporated into the building slab during previous expansions which had to be shored and reinforced. Existing slabs had electrical conduits which were still live. This unforeseen condition was dangerous and could have affected the functioning hospital in adverse ways. These discoveries negatively affected the flow of the planned construction activities, but the team accommodated each of these surprises and reworked the plan using building information (BIM modeling), self-perform labor, and prefabricated exterior wall panels to stay on-schedule.

The project was further complicated by the requirements of occupied site construction. Wall separations between occupied spaces and construction required temporary framed and dry walled tunnels which had a minimum one-hour fire separation rating, a functioning detection and fire protection system, and emergency lighting and notification of egress. The construction team constructed the separations, which were inspected and approved per code, in order to have a way for the existing hospital staff to get around while still building new spaces around the
separations. Ultimately, the separations, which acted like tunnels and averaged seventy-five feet in length, would be demolished and the existing spaces were completed for renovation. Often, the tunnels were directly in the middle of the main renovation floor space. The construction team created temporary locations for emergency stations such as the generator panel, medical gas panels, and fire alarm panels; these were located and re-located various times throughout construction to accommodate the code for a functioning hospital.

The project required a dedicated fire watch professional to inspect and log all areas which did not have fire protection. The responsibility for meeting this requirement was shared between GE Johnson and Craig Hospital staff in order to provide twenty-four-hour coverage for the project. From a fireproofing standpoint, the existing conditions within some of the mechanical room spaces made it very difficult to complete the renovation per code requirements. The construction team worked closely with Craig and the design team to develop an alternate method of code compliance through means of the State-recognized FSES, which made the renovation possible. This required extensive discussions with the local fire department, City of Englewood Building Department, and the State DFS with coordination from everyone to ensure compliance and quality construction.

**Excellence in Execution**

The team approach and execution methods facilitated excellent communication and strong relationships among patients, staff, the design team, local jurisdictions and state officials, and the surrounding community. This teamwork created a project culture which ultimately delivered a safe and successful project without interruptions to ongoing operations.

Safety was a main focus of the project, and was fostered by the core team and every trade on the jobsite. Every individual was empowered to stop any unsafe work and agree upon a solid plan before continuing work. Safety observation reports were utilized as a measure to track and control safety trends on the job; safe work was celebrated and incentivized throughout the build. In total, the project encompassed 205,000 man hours with only one lost time recorded incident. Ultimately, the power of a strong relationship with Craig Hospital, subcontractors, and community stakeholders was established through robust communication and coordination, delivering a huge hospital expansion safely and on time.
The Project Team was joined by Craig Staff and “Gumby” during morning stretch and flex.

Horizontal Addition
Workers look on as GE Johnson flies in a specialized training car, which allows Craig patients to learn how to drive following TBI and spinal cord injuries.
Topping Out Ceremony with Patients, Staff and Guests

Horizontal and Vertical Addition
Patient Room

Nurse Station
Rehab Pool

Rehab Gym
New Addition