SECTION 01 4516
CONTRACTOR QUALITY CONTROL

PART 1 GENERAL

1.01 RELATED DOCUMENTS

A. Drawings and general provisions of the Contract, including General and Supplementary Conditions and Division 01 Specification Sections, apply to this Section.

1.02 SUMMARY

A. This Section includes requirements for contractor performance, including, but not limited to, the following:

1. Construction Management Plan (CMP): The CMP is typically written by the construction manager or construction management professional that is responsible for managing construction. The CMP must include, but not limited to, the following:
   a. Project Description
   b. Team Alignment & Responsibilities
   c. Construction Management Plan
   d. QA / QC Management Plan (QMP).
   e. Accident Prevention Program (APP).
   f. Progress Control & Reporting
   g. Environmental Compliance Oversight
   h. Contractor Performance Evaluation (CPE). The CPE process is managed and conducted by the Spectrum Health Construction Project Manager (CPM).

B. Related Sections include pertinent Sections of these Specifications for the individual Specifications required.

C. Spectrum Health and the Facilities, Planning, Design, & Construction (FPD&C) department value excellence, integrity, compassion, respect, and teamwork. Contractors shall uphold these core values through their behavior on Spectrum Health projects. Each of these core values help to ensure a safe, high quality experience for patients, staff, and contractors. Contractors must strive for excellence in all they do; therefore, Spectrum Health expects excellence, without exception, from all contractors, which includes, but not limited to, the following:

1. Excellence - Take action, demonstrate accountability, always strive for the best high quality outcome in every situation on every project, and provide high quality, safe work.

D. Spectrum Health as an organization is committed to quality, health, and safety performance standards. This commitment is recognized by Spectrum Health’s Accreditation with The Joint Commission (formerly known as The Joint Commission on Healthcare Accreditation, or JCAHO), Commission on Accreditation of Rehabilitation Facilities (CARF), and Centers for Medicare & Medicaid Services (CMS) through Conditions for Coverage (CfC’s) and Conditions of Participations (CoP’s). Spectrum Health as an organization is committed to delivering high quality and safe care in accordance with these requirements, which includes contractor quality control.

E. Contractors must be prequalified before performing any work on Spectrum Health facilities or grounds. Contractor performance evaluations will be utilized as a holistic tool to evaluate contractors against overall project performance and determine if they are eligible for requalification or disqualification. Spectrum Health will recognize contractors that provide safe, quality projects as determined by this specification, and will disqualify contractors that do not.

F. The primary purpose and goals of this specification are as follows:

1. Drive cultural and behavioral habits in construction projects that help ensure high quality, safety, and overall performance on all Spectrum Health construction projects.
2. Measure, monitor, and hold contractors accountable.
3. Recognize and reward contractors that consistently deliver a high level of quality, safety, and performance.
4. Reduce cost and schedule implications from poor quality, and safety and performance issues.
5. Provide a consistent, fair, and objective (i.e. free of bias or prejudice based on personal feelings or relationships) process for contractor performance evaluations and contractor appeals process.

1.03 DEFINITIONS
A. Construction Project Manager (CPM): Spectrum Health will assign a CPM to each project that is initiated through the FPD&C department.
C. Submittal: Information sent by Contractor to convey information about systems, equipment, materials, products, testing reports, operation and maintenance manuals, and administrative matters for the Work.
D. Trade Contractor Sponsor (TCS): The TCS is a Spectrum Health facilities employee that is assigned to an individual trade contractor.
E. Resident Project Representative (RPR): Spectrum Health may assign an RPR to a project depending on size, complexity, and business objectives.
F. Resubmittal: Submittal sent for review a second or further time.

1.04 SUBMITTAL PROCEDURES
A. Submittals:
1. Submittals are a critical part of contractor quality control and performance. Contractors will be evaluated on submittal management in accordance with the contract documents, submittal procedures, Section 01 3000 Administrative Requirements and this Specification.
B. Delivery Method:
1. Submittals must be delivered as electronic files.
2. Where Submittals include information that is intended to be printed on sheets larger than 11 inches X 17 inches, or where scale or drawing size are critical for proper review, submit paper copies for review.
3. Electronic Files:
   a. Unless indicated otherwise, submit 1 copy of each Submittal securely in PDF format.
   b. Scanned Submittals shall be produced in such a way as to not compromise the graphic quality or accuracy of scale, where applicable; and text shall be searchable.
   c. One copy of each Submittal will be reviewed and returned to the Contractor.
   d. Submittals may be transmitted via electronic mail (e-mail) or on a CD or DVD. Submittals that are transmitted electronically may be returned electronically at the owner's discretion.
   e. Electronic submittals must be complete, organized, and packaged into a single indexed file incorporating submittal requirements with hyperlinks that allow for navigation to each tab, section, article, or individual item.
C. Coordination and Timing:
1. Submittals as required per this Specification Section, and they must be submitted, reviewed, and approved by the CPM or RPR before any construction or production work begins.
2. Contractor is responsible for all costs caused by lack of coordination or tardiness of Submittals.
3. Incomplete and unorganized Submittals will be rejected.
D. Processing Time: Allow [15] full working days for CPM or RPR to review each Submittal, including Resubmittals. Time for review shall commence on receipt of Submittals. No extension of the Contract Time will be authorized because of failure to transmit Submittals enough in advance, including Resubmittals. CPM or RPR will advise Contractor when a Submittal being processed must be delayed.
E. Identification: Provide a separate cover sheet on each submittal.
1. Indicate name of firm or entity that prepared Submittal.
2. Provide space to record Contractor’s review and approval markings, action taken by Engineer (where applicable), and CPM or RPR review, comments, and stamp.

3. Include the following information:
   a. Project name.
   b. Date.
   c. Name and address of Engineer.
   d. Name and address of Contractor.
   e. Name and address of Subcontractor(s).
   f. Submittal number, including revision identifier.
   g. Other necessary identification.

F. Deviations: Not allowed. Deviations on submittals required per this specification are not allowed without written authorization from the CPM.

G. Transmittal: Package each Submittal individually and appropriately for transmittal and handling. Transmit each Submittal using a transmittal form. CPM will reject Submittal(s) received from sources other than the responsible Contractor.

H. Resubmittals: Make Resubmittals in same form and number of copies as initial Submittal.
   1. Note date and content of previous Submittal.
   2. Clearly identify additions and revisions.
   3. Resubmit Submittals until they are marked, “Reviewed, No Exceptions Noted” or “Reviewed With Corrections Noted.”

I. Distribution: Furnish copies of Submittals with mark indicating, “Reviewed, No Exceptions Noted” or “Reviewed With Corrections Noted,” to manufacturers, subcontractors, suppliers, fabricators, installers, authorities having jurisdiction, and others as necessary for performance, quality, and safety of construction activities. A transmittal must be provided with each distributed copy along with a signature/print sheet including date. The signature sheet must be included in the submittal to the CPM.

J. Use for Construction: Unless otherwise indicated by CPM, use only Submittals with mark indicating, “Reviewed, No Exceptions Noted” or “Reviewed With Corrections Noted.”

PART 2 PRODUCTS

2.01 ACTION SUBMITTALS

A. Quality Management Plan (QMP):
   1. The contractor(s) is responsible for submitting and implementing an effective QMP.
   2. The QMP must be written with a project specific focus and must meet the QA/QC objectives and goals of the contract documents. To avoid potential conflicts and help to ensure a successful project, it is often in the contractor’s best interest to include additional QA/QC objectives and goals that may not be specified in terms of means and methods to ensure a high quality deliverable.
   3. The QMP must include the Quality Management Section of Construction Management Core Competencies from the Construction Management Association of America (CMAA), excluding the design portion.
   4. A hard copy of the QMP must be maintained and available on-site, and upon request this binder shall be readily available at all times.
   5. All contractors or vendors that will be on-site must be trained on the content within the QMP and must sign and date a signature sheet that acknowledges this training; the signature sheet must be submitted to the CPM.
   6. The QMP must describe how the contractor(s) will maintain negative air pressure within the construction/project zone in accordance with the Public Health Code, Act 368 of 1978, which incorporates by reference the Michigan Department of Community Health (MDCH) 2007 Minimum Design Standards for Health Care Facilities in Michigan.
   7. The QMP must include how the contractor will continuously monitor and measure infection control requirements in accordance with the contract documents, the owner’s infection control risk assessment (ICRA) available from the CMP/RPR, and Article 5 of the MDCH 2007 Minimum Design Standards for Health Care Facilities in Michigan.
8. The QMP must include and describe a submittal log/process for actively tracking all submittals, including but not limited to, product submittals, shop drawings, test reports, warranty information or certificates, and O&M manuals. The submittal log shall include all applicable sections and documents required from the contract documents, and a method for ensuring that all reviews, comments, and approvals throughout the submittal process occur and are recorded.

B. Safety and Health Management Program:
   1. At Spectrum Health safety is part of our culture for patient, employee, and visitor safety. Spectrum Health is also very concerned with the safety of contractors working within our facilities. Contractors are responsible for providing a safe work environment and ensuring that their project site is safe in accordance with all applicable safety codes/laws and applicable Spectrum Health policies.
   2. The safety objective for Spectrum Health and contractors is zero accidents and injuries on construction projects on any Spectrum Health facility or grounds. Therefore, in accordance with MIOSHA Construction Safety Standards - Part 1. General Provisions, the prime contractor and all subcontractors must submit an electronic copy and hard-copy of their written Accident Prevention Program (APP) that addresses site-specific hazards to the CPM/RPR before any construction or production begins.
      a. The APP template can be downloaded from MIOSHA’s website. The APP submitted by the contractor(s) must be project specific, and must meet the requirements of MIOSHA.
      b. A project specific and comprehensive APP can be submitted from the prime contractor; however, it must include applicable work categories or trades for all subcontractors, and all subcontractors must be trained in the APP content. In accordance with Part 1 from MIOSHA, employers/contractors are responsible for an effective APP. As an example, the prime contractor may write a project specific APP and attach subcontractor APP’s to it as an appendix.
      c. A hard copy of the APP must be maintained and available on-site, and upon request shall be readily available at all times.
      d. All contractors or vendors that will be on-site must be trained on the content within the APP and must sign and date a signature sheet that acknowledges this training; signature sheet(s) must be submitted to the CPM.
      e. The APP shall identify a designated on-site project safety representative (PSR). The PSR must be on-site at all times while work is being performed. The PSR can be the on-site superintendent or foreman from the prime contractor. The PSR must be 30-hour OSHA certified or have completed the MIOSHA level 1 certificate program through the MIOSHA Training Institute. Evidence of certification must be provided with the submission of the APP to the CPM. Refer to Section 01 3523 Part 2.02 for more detail for the PSR.

PART 3 EXECUTION

3.01 CONTRACTOR’S REVIEW AND APPROVAL
   A. Review each Submittal and check for compliance with the Contract Documents. Mark with approval stamp before submitting to CPM.
   B. Submittals that are not organized, do not meet the requirements of Part 1 & 2, and are not approved and stamped by the Contractor(s) will be rejected.

3.02 CONSTRUCTION PROJECT MANAGER (CPM) SUBMITTAL REVIEW
   A. Submittals: The CPM shall review Submittals, make marks to indicate corrections or modifications required, and return Submittal. The CPM shall stamp each Submittal with an action stamp to indicate action taken, as follows:
      1. Reviewed, No Exceptions Noted.
      2. Reviewed With Corrections Noted.
      3. Revise and Resubmit. Corrections are provided by the CPM.
4. Rejected, Resubmit: Submittal as a whole is incomplete, unorganized, and not assembled correctly.

3.03 CONTRACTOR PERFORMANCE EVALUATION PROCESS

A. The Spectrum Health project management team shall lead the contractor performance evaluation process for the project.

B. The contractor performance evaluations shall be maintained and managed by the Spectrum Health facilities department including the project management team.

C. The Spectrum Health project management team, as assigned and determined at Spectrum Health’s sole discretion, shall complete a performance evaluation regarding the contractor.

D. Upon completion of each contractor performance evaluation, the contractor shall be provided an electronic PDF copy of the evaluation.

E. All evaluations with a final score of less than 75% will be reported to, and reviewed by, Spectrum Health Leadership.

F. All contractors and subcontractors shall be evaluated per the following:
   1. Projects with a duration of one year or less: Individual project contractor performance evaluations will be performed by the Spectrum Health project management team at the substantial completion of each project.
   2. Contractors engaged in multiyear projects will be evaluated by the Spectrum Health project management team as determined in the project kickoff meeting. For example, a two year project will be evaluated at 50% completion and at substantial completion, and longer duration projects may be evaluated at 33%, and 66% of completion, and at substantial completion. The purpose of performing the evaluation process is to identify deficiencies, and implement corrective actions as necessary throughout projects of longer duration.
   3. All evaluations will be performed utilizing a format and process to ensure consistency, objectiveness, and fairness in the evaluation.

4. Contractor performance evaluations shall include:
   b. The contractor performance evaluation shall be based on eight performance categories. Each category contains 5 questions that are scored on a scale of 1-5. 1-unacceptable, 2-poor, 3-average, 4-good, and 5-excellent. Each category is calculated for an average score, and each category is calculated based on a 100% scale.
   c. The eight performance categories are listed below:
      1) Quality Management.
      2) Scheduling and Productivity Management.
      3) Safety Management.
      4) Infection Control Management.
      5) Project Management.
      6) Cost Management/Control.
      7) Contract Administration.
      8) Close-out Procedures.
      9) The average score and total score of each category shall be recorded in a scoring summary where the overall average score and total score are calculated based on the average. The total score for each category is calculated by multiplying the total score by the weighted percentage (%) for each category. As an example, quality management has a weight of 15%, so the total score is multiplied by the weight to achieve a final score. The final score of each category is then added together to get the aggregate total score for the evaluation.

5. Spectrum Health has a specific scoring summary workbook for each contractor where all evaluations are documented and averaged on a summary page for Spectrum Health reference. The most recent five evaluations are averaged and summarized as well as the cumulative total for all evaluations. This allows Spectrum Health’s facilities department leadership to review recent performance history, overall performance history and
continuously evaluate each contractor to ensure the best performance from our contractors.

6. CONTRACTOR RESPONSE PROCESS
   a. Upon receipt of a contractor performance evaluation score of less than 75% the contractor may respond to the SH Leadership with comments regarding the performance evaluation.
   b. A meeting can be scheduled to review the performance evaluation with the underperforming contractor. Upon further review with SH Leadership and discussion with the contractor, the performance evaluation may be revisited and altered as necessary.

END OF SECTION 01 4516