



Good Samaritan  
Pontiac

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**RECEIVED**

April 16, 2012

APR 17 2012

**VIA PERSONAL DELIVERY**

**HEALTH FACILITIES &  
SERVICES REVIEW BOARD**

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761  
Attn: Mike Constantino

Re: Modification to Good Samaritan – Pontiac Certificate of Need Application,  
Project Number 12-027

Mr. Constantino,

This letter is written to provide an explanation regarding the enclosed documents which contemplate the modification of the Good Samaritan – Pontiac certificate of need application, project number 12-027 (the "CON Application").

During the preparation of the CON Application, architectural drawings of the proposed facility were not available until shortly before the filing of the CON Application. As a result, there was inadequate time to hold discussions and give reassurance to residents and families that the project was moving forward. Following submission of the CON Application, however, several discussions have taken place with our stakeholders, including residents, resident families, Good Samaritan staff and members of the Board of Directors, regarding the design of the replacement nursing home facility.

In our discussions, the following three major concerns were raised by our stakeholders: 1) a bathroom must be present in each resident room; 2) privacy is a major concern for residents and their families; and 3) it is essential to create an inviting and comfortable home environment for residents. As a result, we asked our architects to re-examine the proposed design of the facility to address our stakeholder concerns. Our architects recommended two major shifts in the design of the facility which have gained the approval of our stakeholders. The first shift is to depart from the "side-by-side" bed arrangement in two-bed rooms to a "toe to toe" bed arrangement with a short wall separating beds in the same room. In this configuration, two-bed rooms more adequately address the privacy and family comfort issues. The second shift is to re-configure the design of the facility to include a bathroom in each resident room. Lastly, the design of the facility wings was also revised to ensure that nursing stations have an adequate line of sight and a proper setting to care for the residents.

In order to adopt the "toe to toe" room concept, the shape of the two-bed rooms must be modified. This modification results in an increase in the total square footage of the building

from 48,797 square feet to 55,413 square feet. As a result, the total estimated project cost increased from \$10,362,817 to \$14,590,261. While these changes in facility design and total estimated project cost require modification of the CON Application, we believe these changes are essential to the safety, comfort and privacy of our residents.

Sincerely,

A handwritten signature in black ink, appearing to read "Richard H. Hiatt". The signature is written in a cursive style with a large initial "R".

Richard H. Hiatt, Pres.

Enclosures

## 2. Narrative Description

Provide in the space below, a brief narrative description of the project. Explain **WHAT** is to be done in **State Board defined terms**, **NOT WHY** it is being done. If the project site does **NOT** have a street address, include a legal description of the site. Include the rationale regarding the project's classification as substantive or non-substantive.

Good Samaritan - Pontiac ("Applicant") proposes to discontinue a 122 bed skilled nursing facility at 14335 Highway 66, Pontiac, IL (the "Existing Facility"). Applicant will replace the Existing Facility with a 122 bed skilled nursing facility located at 840 Ewing Drive, Pontiac, IL in Livingston County (the "Replacement Facility"), both within Health Service Area 4.

The Livingston County Board selected Applicant, a not-for-profit corporation, to take over the operation and license of its 122 bed county nursing home, Livingston Manor, and to build a replacement facility. As part of the selection process, the County published an invitation to providers of long term care services to propose a plan for operating and replacing the County's nursing home. Through this selection process, the County accepted Applicant's proposal and entered into an agreement with Applicant in which it would help support Applicant's operation of the facility and contribute to the cost of building the Replacement Facility. In this way, the County can continue to meet the needs of its residents and do so in a more cost-effective manner. The agreement called for the replacement facility to be located within a mile and half of the I-55 and Route 116 interchange in Pontiac, Illinois. Applicant now seeks the approval of the Illinois Health Facilities and Services Review Board (the "Board") to establish the Replacement Facility and fulfill its commitment to Livingston County. The project is "substantive" under the Illinois Health Facilities and Services Review Board Rule 1110.40(b) as it entails the establishment of a health care facility that will provide general long term care.

The discontinuation of the Existing Facility is contingent upon Board approval of the planned establishment of the Replacement Facility and this discontinuation of the Existing Facility will be effective upon transfer of the Existing Facility's residents to the Replacement Facility. The Existing Facility suffers from severe physical plant issues due to age and design, including water and plumbing issues, insufficient room size, and ventilation and insulation problems. The Replacement Facility will house 122 beds in a building approximately 55,413 square feet in size. The Replacement Facility will house three clinical areas, which include Long-Term Care, Short Term Rehab, and Long-Term Care Memory Support. Furthermore, the Replacement Facility will also house Clinical Support, Community Support, and Administrative areas.

**Project Costs and Sources of Funds**

Complete the following table listing all costs (refer to Part 1120.110) associated with the project. When a project or any component of a project is to be accomplished by lease, donation, gift, or other means, the fair market or dollar value (refer to Part 1130.140) of the component must be included in the estimated project cost. If the project contains non-reviewable components that are not related to the provision of health care, complete the second column of the table below. Note, the use and sources of funds must equal.

<b>Project Costs and Sources of Funds</b>			
<b>USE OF FUNDS</b>	<b>CLINICAL</b>	<b>NONCLINICAL</b>	<b>TOTAL</b>
Preplanning Costs	\$60,693	\$23,976	\$84,669
Site Survey and Soil Investigation			
Site Preparation			
Off Site Work			
New Construction Contracts	\$7,568,891	\$2,990,057	\$10,558,947
Modernization Contracts			
Contingencies	\$756,889	\$299,006	\$1,055,895
Architectural/Engineering Fees	\$463,390	\$183,060	\$646,450
Consulting and Other Fees	\$847,105	\$334,645	\$1,181,750
Movable or Other Equipment (not in construction contracts)	\$567,653	\$224,249	\$791,902
Bond Issuance Expense (project related)			
Net Interest Expense During Construction (project related)	\$194,007	\$76,641	\$270,648
Fair Market Value of Leased Space or Equipment			
Other Costs To Be Capitalized			
Acquisition of Building or Other Property (excluding land)			
<b>TOTAL USES OF FUNDS</b>	<b>\$10,458,627</b>	<b>\$4,131,634</b>	<b>\$14,590,261</b>
<b>SOURCE OF FUNDS</b>	<b>CLINICAL</b>	<b>NONCLINICAL</b>	<b>TOTAL</b>
Cash and Securities	\$1,792,056	\$707,944	\$2,500,000
Pledges			
Gifts and Bequests			
Bond Issues (project related)			
Mortgages	\$8,666,571	\$3,423,690	\$12,090,261
Leases (fair market value)			
Governmental Appropriations			
Grants			
Other Funds and Sources			
<b>TOTAL SOURCES OF FUNDS</b>	<b>\$10,458,627</b>	<b>\$4,131,634</b>	<b>\$14,590,261</b>

**NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT-7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

23,008.97 4,544.79  
27,553.76

The following Sections **DO NOT** need to be addressed by the applicants or co-applicants responsible for funding or guaranteeing the funding of the project if the applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's (the rating shall be affirmed within the latest 18 month period prior to the submittal of the application):

- Section 1120.120 Availability of Funds – Review Criteria
- Section 1120.130 Financial Viability – Review Criteria
- Section 1120.140 Economic Feasibility – Review Criteria, subsection (a)

**VIII. - 1120.120 - Availability of Funds**

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: indicate the dollar amount to be provided from the following sources:

\$2,500,000		a)	Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to:
		1)	the amount of cash and securities available for the project, including the identification of any security, its value and availability of such funds; and
		2)	interest to be earned on depreciation account funds or to be earned on any asset from the date of applicant's submission through project completion;
		b)	Pledges – for anticipated pledges, a summary of the anticipated pledges showing anticipated receipts and discounted value, estimated time table of gross receipts and related fundraising expenses, and a discussion of past fundraising experience.
		c)	Gifts and Bequests – verification of the dollar amount, identification of any conditions of use, and the estimated time table of receipts;
\$12,090,261		d)	Debt – a statement of the estimated terms and conditions (including the debt time period, variable or permanent interest rates over the debt time period, and the anticipated repayment schedule) for any interim and for the permanent financing proposed to fund the project, including:
		1)	For general obligation bonds, proof of passage of the required referendum or evidence that the governmental unit has the authority to issue the bonds and evidence of the dollar amount of the issue, including any discounting anticipated;
		2)	For revenue bonds, proof of the feasibility of securing the specified amount and interest rate;
		3)	For mortgages, a letter from the prospective lender attesting to the expectation of making the loan in the amount and time indicated, including the anticipated interest rate and any conditions associated with the mortgage, such as, but not limited to, adjustable interest rates, balloon payments, etc.;
		4)	For any lease, a copy of the lease, including all the terms and conditions, including any purchase options, any capital improvements to the property and provision of capital equipment;
		5)	For any option to lease, a copy of the option, including all terms and conditions.
		e)	Governmental Appropriations – a copy of the appropriation Act or ordinance accompanied by a statement of funding availability from an official of the governmental unit. If funds are to be made available from subsequent fiscal years, a copy of a resolution or other action of the governmental unit attesting to this intent;
		f)	Grants – a letter from the granting agency as to the availability of funds in terms of the amount and time of receipt;
		g)	All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project.
\$14,590,261		<b>TOTAL FUNDS AVAILABLE</b>	

**APPEND DOCUMENTATION AS ATTACHMENT-39, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

Good Samaritan-Pontiac  
(An Illinois Not-for-Profit Corporation)

PROJECTED SOURCES AND USES OF FUNDS

Sources of Funds	
County Grant	\$ 2,500,000
Debt	12,570,261
	<u>\$ 15,070,261</u>
Uses of Funds	
Land	\$ 480,000
Pre-Construction costs	84,669
Construction and site work	10,558,947
Contigencies	1,055,895
Architecture, Engineering, Consulting, Testing	646,450
Consulting and Other Fees	1,181,750
Moveable/Other Equipment Non-Construction	791,902
Capitalized Interest	270,648
	<u>\$ 15,070,261</u>

## ATTACHMENT 9

### COST SPACE REQUIREMENTS

Dept. / Area	Cost	Gross Square Feet		Amount of Proposed Total Gross Square Feet That is New Const.
		Existing	Proposed	
<b>REVIEWABLE</b>				
Long Term Care	\$4,882,553	0 BGSF	18,544 BGSF	18,544 BGSF
Rehab Unit	\$2,941,801	0 BGSF	11,173 BGSF	11,173 BGSF
Memory Unit	\$2,634,272	0 BGSF	10,005 BGSF	10,005 BGSF
<b>Total Clinical</b>	<b>\$10,458,626</b>	<b>0 BGSF</b>	<b>39,722 BGSF</b>	<b>39,722 BGSF</b>
<b>NON REVIEWABLE</b>				
Administration	\$499,472	0 BGSF	1,897 BGSF	1,897 BGSF
Commons Space	\$1,783,564	0 BGSF	6,774 BGSF	6,774 BGSF
Commons Support	\$1,848,598	0 BGSF	7,021 BGSF	7,021 BGSF
<b>Total Non-Clinical</b>	<b>\$4,131,634</b>	<b>0 BGSF</b>	<b>15,692 BGSF</b>	<b>15,692 BGSF</b>
<b>TOTAL</b>	<b>\$14,590,260</b>	<b>0 BGSF</b>	<b>55,414 BGSF</b>	<b>55,414 BGSF</b>

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PONTIAC, IL



**Schematic Design - BUILDING PROGRAM - April , 2012**

**A. Long Term Care - South (29 beds)**

A.1	Resident Rooms	Rms.		Beds
	Special Care:	1	250 SF =	250 SF (1 bed)
	Toe to Toe:	14	352 SF =	4,928 SF (28 beds)
				<hr/>
				5,178 SF

**A.2 Nursing Support**

Resident Lounge	350 SF
Clean Linen	80 SF
Clean Utility	80 SF
Soiled Utility	100 SF
Public Toilet	50 SF
Spa (showers, tub, toilet)	370 SF
Housekeeping	25 SF
<hr/>	
	1,055 SF

**A.3 Nursing**

Nurse Station / Lounge (includes charts, closet, carts, work space)	500 SF
Med Room	80 SF
Staff Toilet	55 SF
<hr/>	
	635 SF

LTC Unit Sub-Total: 6,868 SF

LTC South Total:

w/ Multiplier	1.35	9,272 GSF
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**B. Long Term Care - East (29 beds)**

B.1	Resident Rooms	Rms.		Beds
	Special Care:	1	250 SF =	250 SF (1 bed)
	Toe to Toe:	14	352 SF =	4,928 SF (28 beds)
				<hr/>
				5,178 SF

**B.2 Nursing Support**

Resident Lounge	350 SF
Clean Linen	80 SF
Clean Utility	80 SF
Soiled Utility	100 SF
Public Toilet	50 SF
Spa (showers, tub, toilet)	370 SF
Housekeeping	25 SF
<hr/>	
	1,055 SF

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<b>B.3 Nursing</b>		
Nurse Station / Lounge		500 SF
(includes charts, closet, carts, work space)		
Med Room		80 SF
Staff Toilet		55 SF
		<hr/>
		635 SF
LTC Unit Sub-Total:		6,868 SF
LTC Unit East Total:		<hr/>
w/ Multiplier	1.35	9,272 GSF

**C. Rehab Unit (37 beds)**

<b>C.1 Resident Rooms</b>	Rms.		Beds
Special Care:	1	250 SF =	250 SF (1 bed)
Toe to Toe:	18	352 SF =	6,336 SF (36 beds)
			<hr/>
			6,586 SF

<b>C.2 Nursing Support</b>		
Resident Lounge		350 SF
Clean Linen		80 SF
Clean Utility		80 SF
Soiled Utility		100 SF
Public Toilet		50 SF
Spa (showers, tub, toilet)		370 SF
Housekeeping		25 SF
		<hr/>
		1,055 SF

<b>C.3 Nursing</b>		
Nurse Station / Lounge		500 SF
(includes charts, closet, carts, work space)		
Med Room		80 SF
Staff Toilet		55 SF
		<hr/>
		635 SF

Rehab Unit Sub-Total: 8,276 SF

Rehab Unit Total: 

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w/ Multiplier 1.35 11,173 GSF

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**D. Memory Support Unit (27 beds)**

D.1 Resident Rooms	Rms.		Beds
Special Care:	1	250 SF =	250 SF (1 bed)
Toe to Toe:	13	352 SF =	4,576 SF (26 beds)
			<b>4,826 SF</b>
<b>D.2 Unit Amenities</b>			
Great Room:			
Living, Activity, Dining, Country Kitchen		1,095 SF	(for 27 beds)
Pantry		150 SF	
			<b>1,245 SF</b>
<b>D.3 Nursing Support</b>			
Clean Linen		80 SF	
Clean Utility		80 SF	
Soiled Utility		100 SF	
Public Toilet		50 SF	
Spa (showers, tub, toilet)		370 SF	
Housekeeping		25 SF	
			<b>705 SF</b>
<b>D.4 Nursing</b>			
Nurse Station / Lounge		500 SF	
(includes charts, closet, carts, work space)			
Med Room		80 SF	
Staff Toilet		55 SF	
			<b>635 SF</b>
Memory Unit Sub-Total:			<b>7,411 SF</b>
<b>Memory Unit Total:</b>			
w/ Multiplier:	1.35		<b>10,005 GSF</b>

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**UNIT SUMMARY:**

A. Long Term Care - South	9,272 GSF
B. Long Term Care - East	9,272 GSF
C. Rehabilitation	11,173 GSF
D. Memory Support	10,005 GSF
<b>Unit Total GSF:</b>	<b>39,721 GSF</b>

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**E. ADMINISTRATION**

**E.1 Administration**

Reception		120 SF
CEO		220 SF
Administrator		160 SF
DON		120 SF
AP / AR		155 SF
Activities Director		100 SF
Social Services		100 SF
Meeting Room		175 SF
		<hr/>
		1,150 SF

**E.2 Administrative Support**

Work Room (copy, files, coffee, etc.)		85 SF
Closets	2 @ 12 SF	24 SF
Toilets	2 @ 60 SF	120 SF
Med Rec Storage		80 SF
		<hr/>
		309 SF

Administration Total		<hr/>	1,459 SF
w/ Multiplier	1.30		1,897 SF

**F. Commons Space**

Rehab Suite:		
Rehab Exercise Area		716 SF
Toilet		75 SF
Storage		85 SF
Office		85 SF
		<hr/>

Exam Room East		120
Exam Room West		120
Break Room		395
ADON / MDS Office		145
Dining / Activity (central)		1,950 SF (for 95 beds)
Salon		375
Activity / Training Room		470
Toilets	2 @ 150 SF	300 SF
Housekeeping		30
Lobby		145 SF
Vestibule		200 SF
		<hr/>
Commons Space Total		5,211 SF
w/ Multiplier	1.3	6,774 SF

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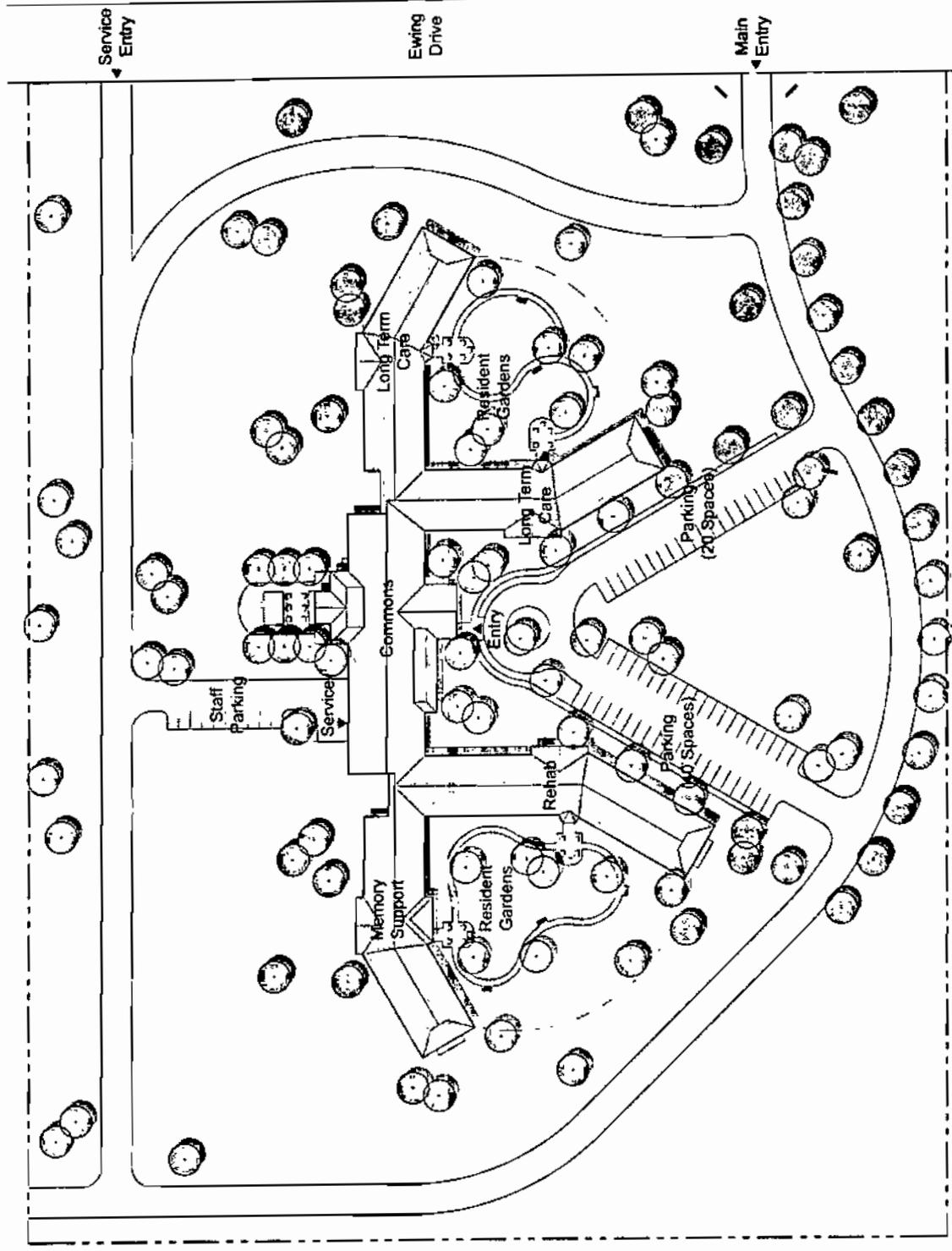
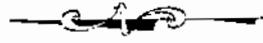


**G. Commons Support**

Kitchen		2,000 SF
Receiving		240 SF
Laundry		875 SF
Building Storage (distributed)		1,350 SF
Housekeeping		30
Mech. / Elect.		906 SF
Commons Support Total		<u>5,401 SF</u>
w/ Multiplier	1.3	<u>7,021 SF</u>

**SUMMARY**

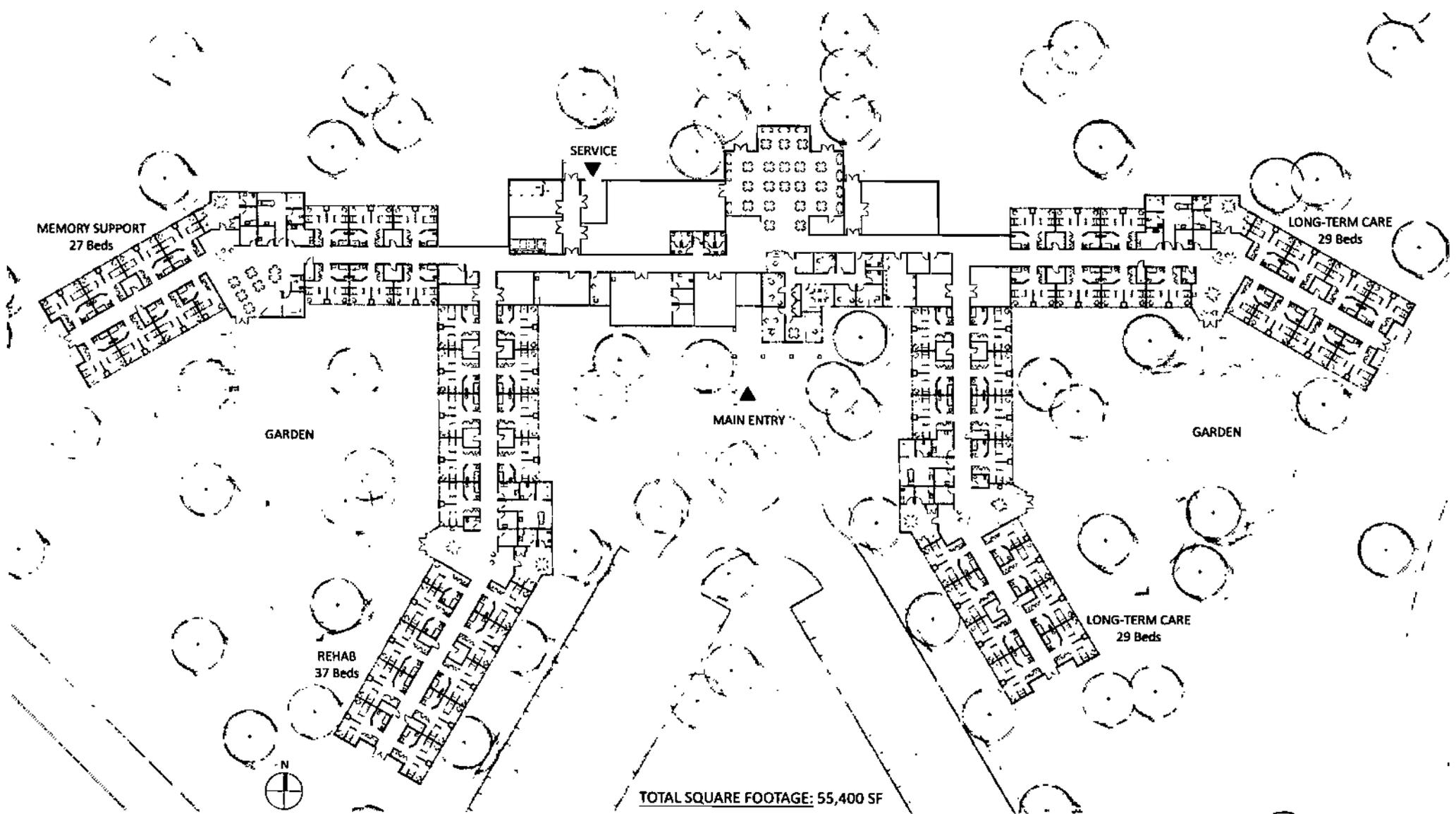
A	Long Term Care - Soi	9,272 GSF
B	Long Term Care - E	9,272 GSF
C	Rehabilitation	11,173 GSF
D	Memory Support	10,005 GSF
E	Administration	1,897 GSF
F	Commons Space	6,774 GSF
G	<u>Commons Support</u>	<u>7,021 GSF</u>
	<b>TOTAL GSF:</b>	<b>55,413 GSF</b>
	<b>Total GSF per bed:</b>	<b>454</b>



Good Samaritan  
Pontiac

# Site Plan



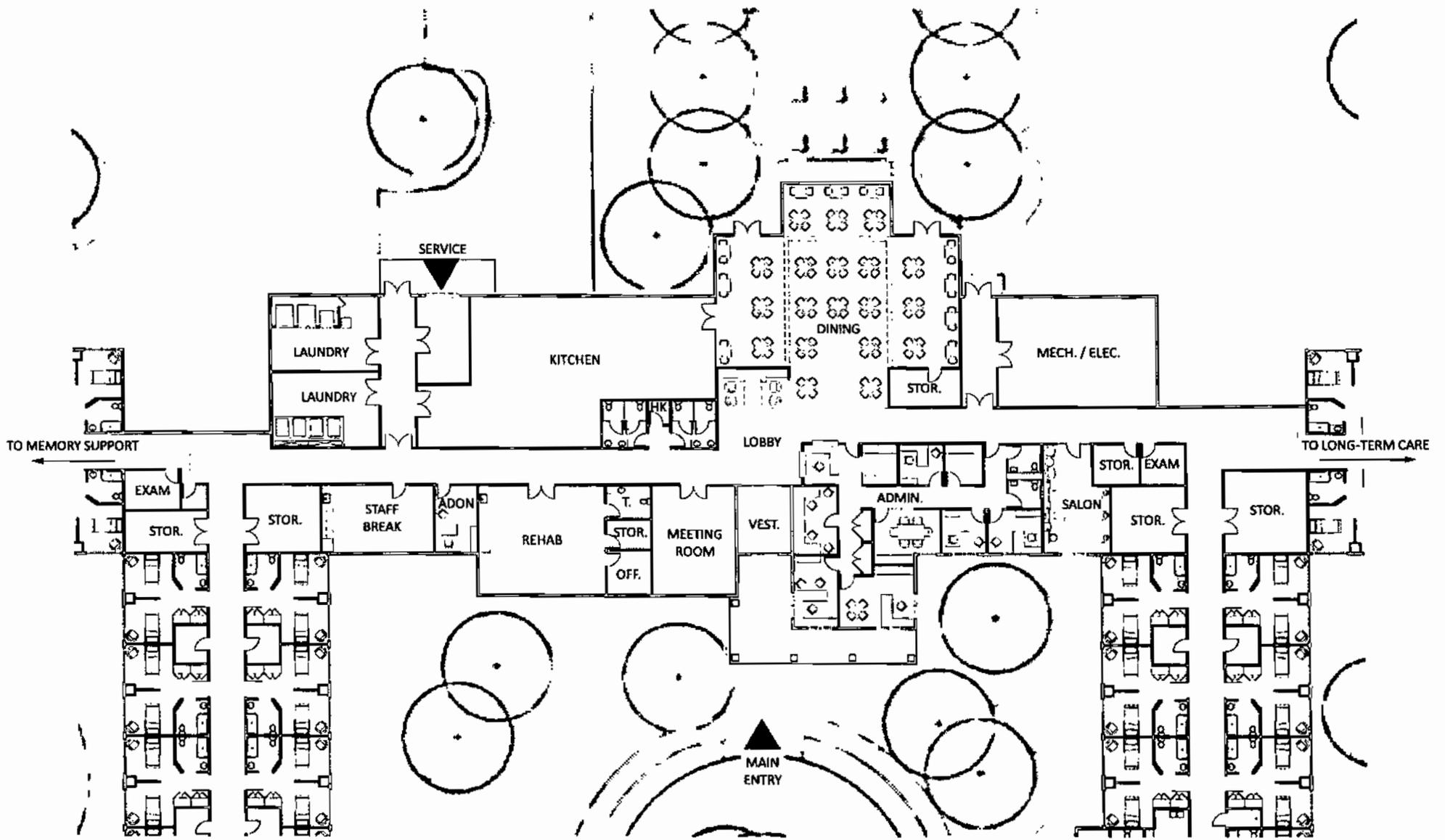


**Good Samaritan**  
Pontiac

**Floor Plan**  
Scale: 1"=40'-0"



**2**

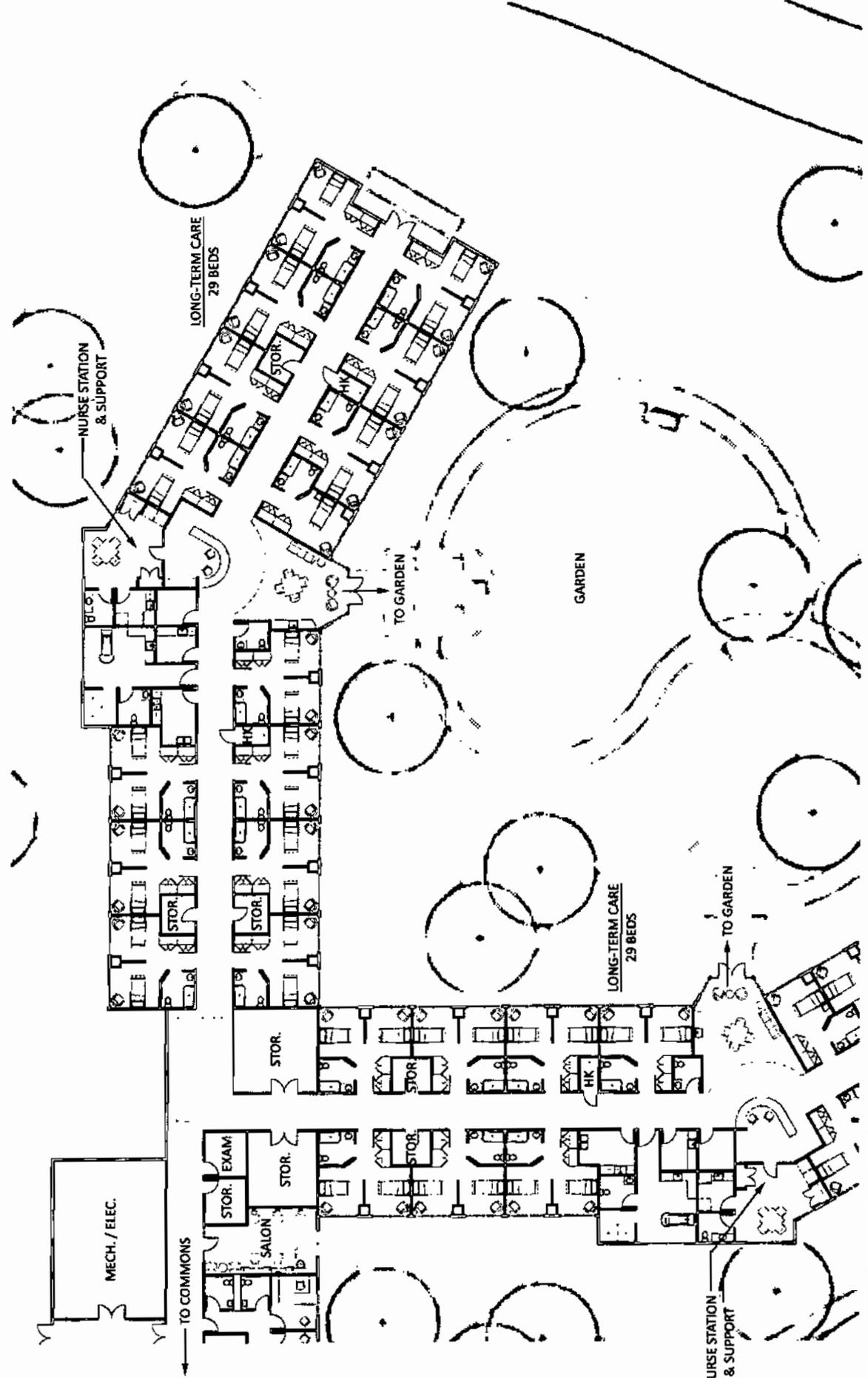


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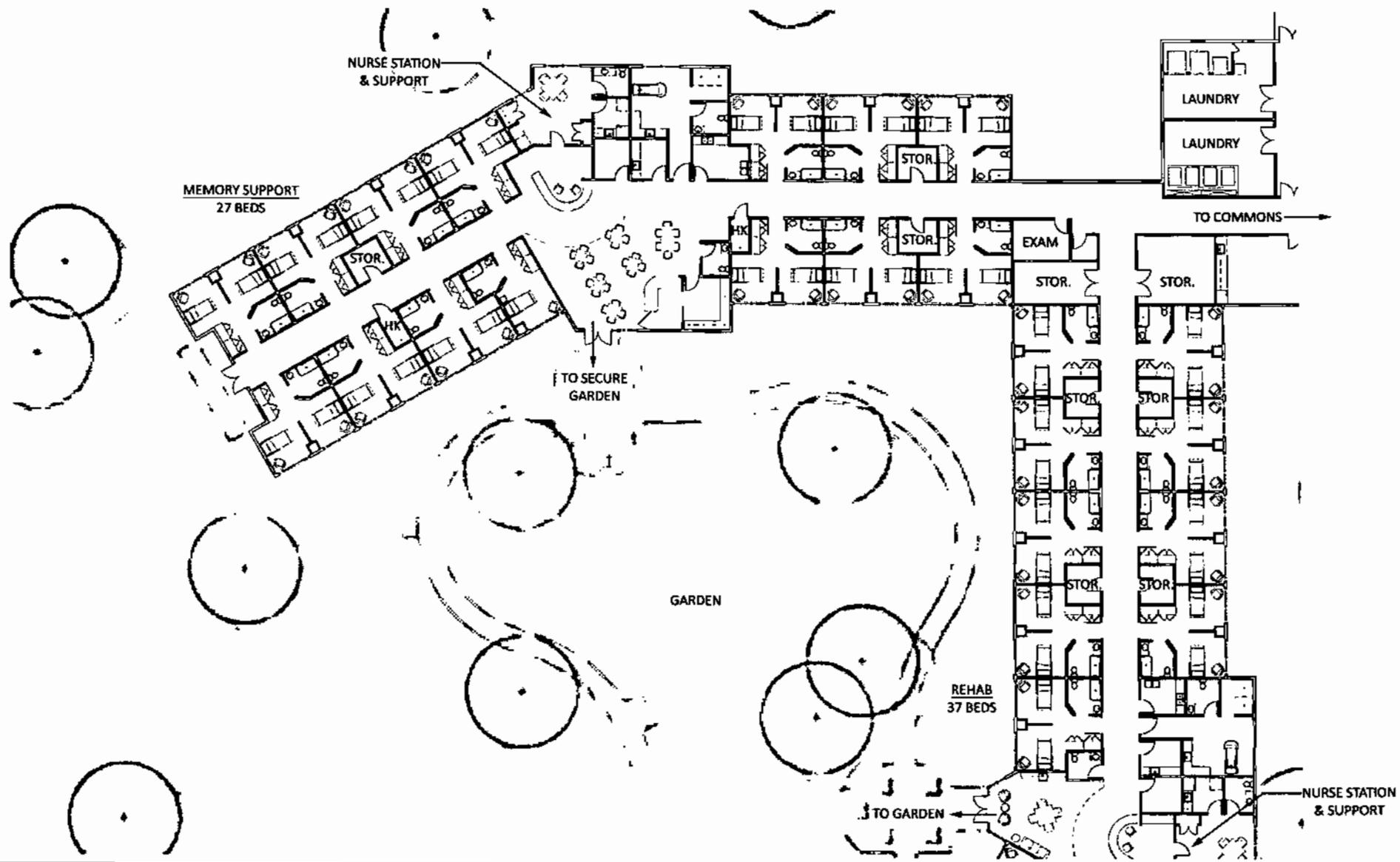
Commons  
Scale 1/4" = 20'-0"

KDA

3



**Long Term Care Wing**  
 Scale: 1/4"=20'-0"



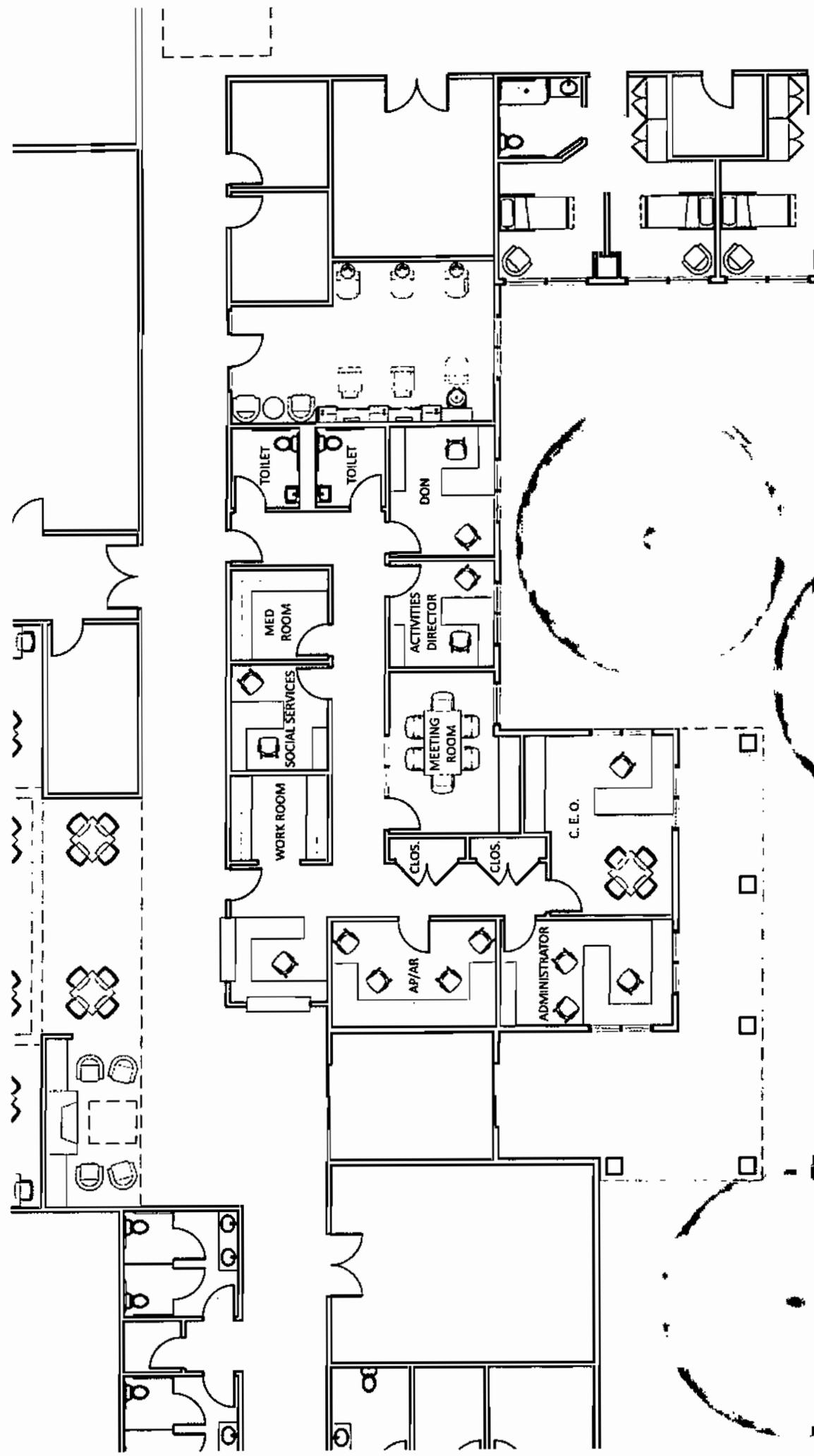
Good Samaritan  
Pontiac

# Memory Support & Rehab Wings

Scale: 1"=20'-0"



5



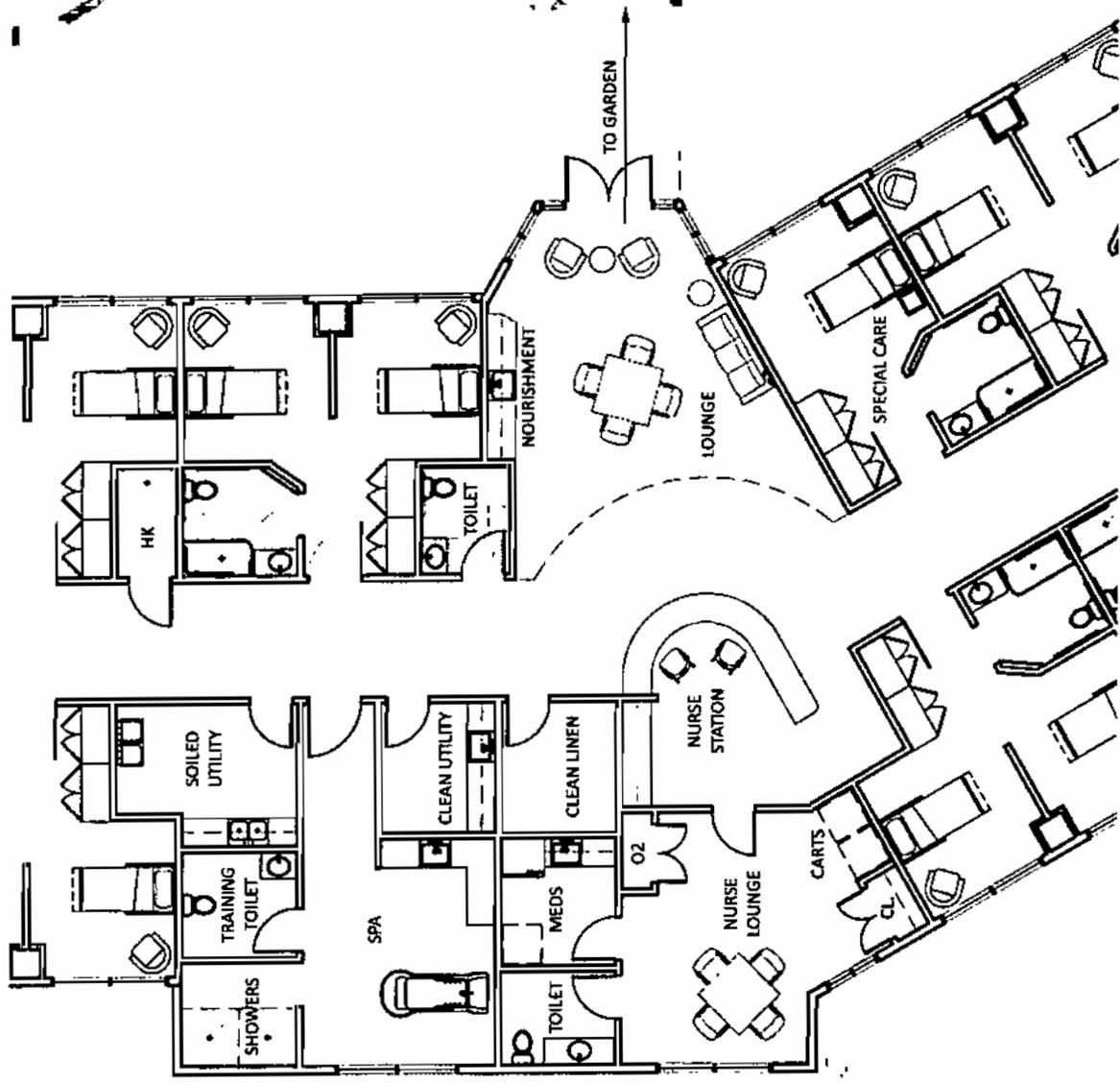
**Good Samaritan**  
 Hospital

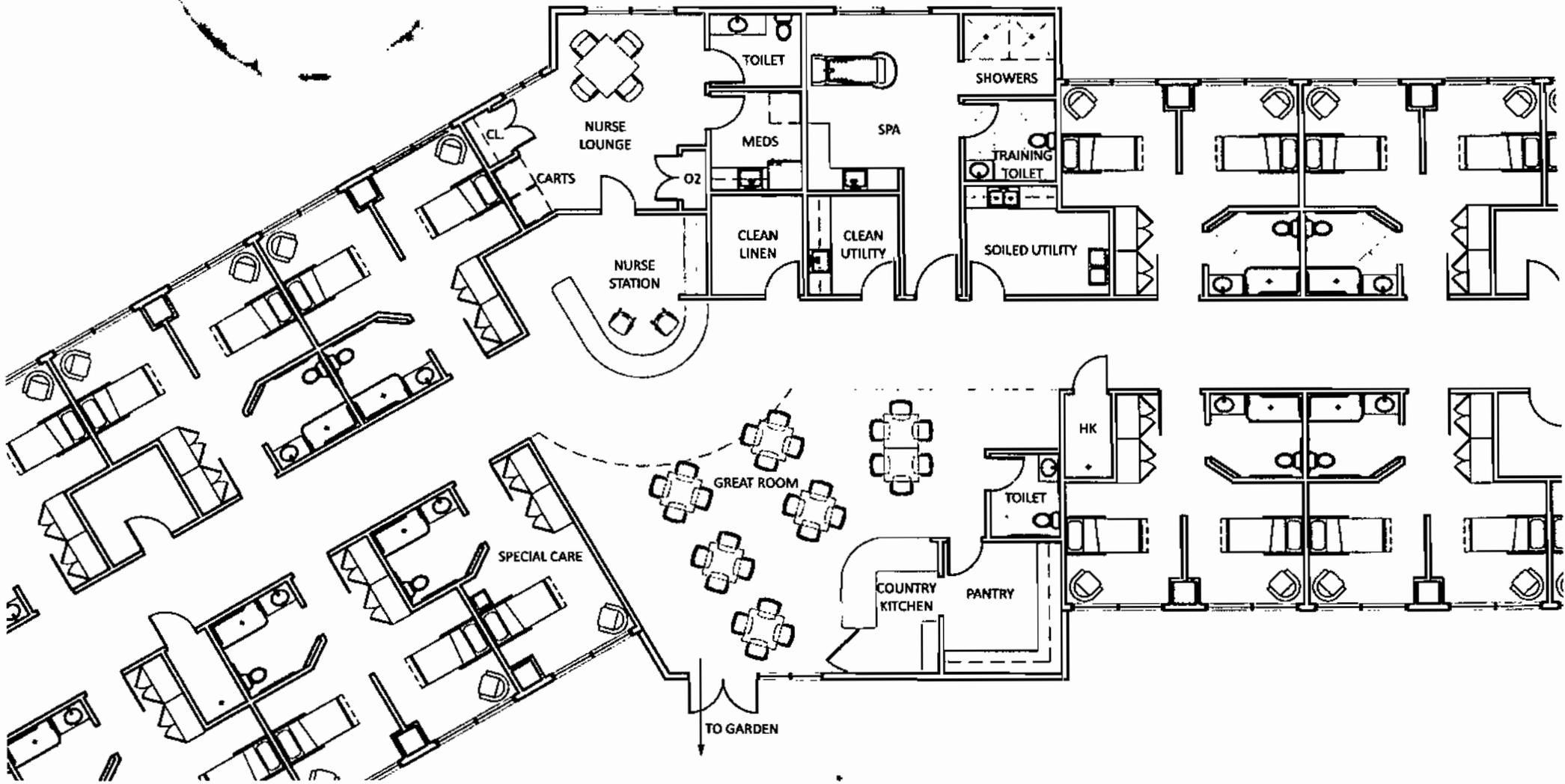
**Administration**  
 Scale: 1/8" = 1'-0"



6

ARCHITECTURAL ATTACHMENTS  
 104





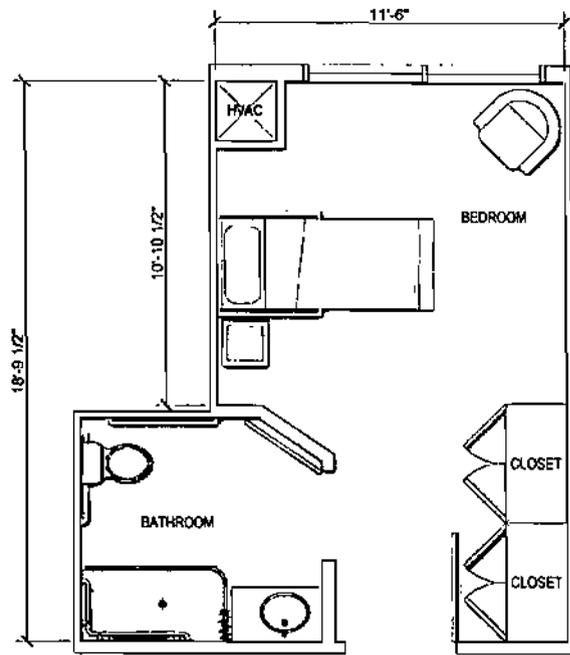
Good Samaritan  
Pontiac

# MEMORY SUPPORT NURSE STATION & SUPPORT

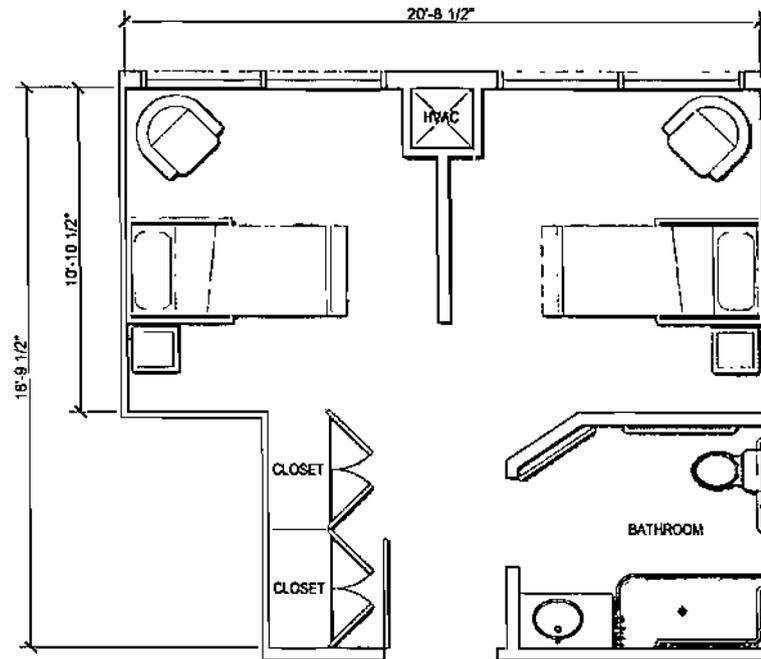
Scale: 1/8" = 1'-0"

KDA

8



PRIVATE ROOM  
250 SF



SEMI-PRIVATE ROOM  
352 SF

## ATTACHMENT 12

### PURPOSE OF THE PROJECT

1. Applicant assumed the operations of a 122 bed skilled nursing facility previously operated by Livingston County. The Existing Facility was built in phases beginning in 1968 and completed in 1973. Two additions were constructed for a new dining and community area along with expansion of therapy services. When constructed, the Existing Facility consisted of primarily multiple occupancy rooms of less than 300 square feet. The Existing Facility was also constructed with community lavatory facilities rather than individual facilities in the rooms. The Existing Facility was constructed primarily to house intermediate care residents. Only 23 beds were certified for utilization by Medicare eligible residents. The proposed Replacement Facility will be built to current skilled nursing standards with all 122 beds Medicare certified. The proposed construction will have an area secured to better serve individuals with memory impairment and wandering behavior. Applicant anticipates serving a more acute population. Presently Applicant is the only facility in the area that accepts residents with IV medications. An area is also proposed with oxygen piped into the rooms to handle more intense medical residents. As part of our on-going mission, Applicant serves all persons without regard to ability to pay and anticipates continuing to serve this market in all aspect of our service delivery.
2. Our current primary market area is Livingston County with a secondary area extending into Northern McLean County.
3. The Livingston County Board selected Applicant, a not-for-profit corporation, to take over the operation and license of its 122 bed county nursing home, Livingston Manor, and to build a replacement facility. As part of the selection process, the County published an invitation to providers of long term care services to propose a plan for operating and replacing the County's nursing home. Through this selection process, the County accepted Applicant's proposal and entered into an agreement with Applicant in which it would help support Applicant's operation of the facility and contribute to the cost of building the Replacement Facility. In this way, the County can continue to meet the needs of its residents and do so in a more cost-effective manner. Applicant now seeks the approval of the Board to establish the Replacement Facility and fulfill its commitment to Livingston County.

As previously noted, the Existing Facility suffers from severe physical plant issues and will not be compliant with anticipated regulatory standards. The Existing Facility suffers from such issues due to age and design, including water and plumbing issues, insufficient room size, and ventilation and insulation problems. The cost of modernizing the Existing Facility is prohibitive and modernization will not address all issues associated with the Existing Facility. The Replacement Facility will be equipped to handle complicated medical cases. Discharge data compared to length of stay in area acute care facilities show that there are 8,406 days of hospital services delivered to persons over 65 in the 10

zip codes surrounding Pontiac at OSF St. James, Pontiac, St. Joseph, Bloomington, St. Francis Medical Center, Peoria, Advocate BroMenn, Bloomington, OSF St. James Home Health and Hospice, Pontiac, and St. Mary's, Streator.

4. A Rehab Care Study on hospital usage and population demographic provided through the Health Facilities Services and Review Board web site along with conversations with discharge planners at hospitals in our service area are the primary source of information. Applicant also analyzed census data from 2008 from area facilities finding they were all 90% occupied. With the service-range extending past the borders of Livingston for memory impaired resident and heavy medical care, Applicant expects census data to remain the same.
5. Applicant is requesting a Replacement Facility. The Existing Facility is between 38 and 41 years old depending on the era of construction and renovation. It is not fully sprinkler as will be required in 2013. It does not have state of the art smoke detection and the nurse call system is an antiquated analog, series type, system using bells, buzzers and lights. Parts for the nurse call system are becoming harder to find. The plumbing and heating systems are developing leaks as well as pipes constricting due to sediment in the lines. Each resident room was constructed with 78.3 square feet per resident; the current standard is 80 square feet. Resident rooms do not have bathrooms adjacent to or in the resident rooms with the exception of four private rooms. The bulk of the Existing Facility is ICF certified and will not meet SNF standards without significant rebuilding. The Existing Facility will also need significant asbestos removal if any renovation is to take place. Electrical circuits were built to 1960's standards. Storage space on units is at a premium leaving little or no space for the storage of lifts and electric wheel chairs that have become increasing common.

The ventilation in the Existing Facility is old and not designed to exhaust fully, as an upgraded facility would. This would allow Applicant to take more complex medical care particularly of air born infections. The ventilation includes heating and air conditioning. The Existing Facility was built without central air. Air conditioning is only in corridors and common areas. Individual heat controls in rooms exist but provide marginal results as the system is steam heat in a progression run. This problem is not as evident as it could be, because the windows are single pain glass with one side lowered for fresh air. The inefficiency of the heating system is masked by the inefficiency of the windows in the winter.

The Existing Facility located in a remote rural location 6 miles out of town which limits family accessibility, emergency response accessibility and extends response time. There is no public transportation available, which further limits family access for many Medicaid residents. It is inconvenient for families and other visitors to travel to the facility. The water service is provided by a well and sewage disposal is through a septic system on site requiring frequent pumping, and does not supply adequate water supply or pressure. In general, the building is more than 40 years old, and although, it was built to standards at the time, it no longer is functional as a skilled nursing facility. Retro-fitting costs to make the building fit today's health care standards are prohibitive. In addition,

Applicant doesn't own the building; therefore, Applicant can't remodel, and the owner won't remodel. The only feasible solution is to replace the structure

6. At the time Applicant assumed the management of Livingston Manor, in December 2008 the census had dropped to 25. The leading cause of the decline was directly attributable to a motion from Livingston County to close the facility and the negative publicity pertaining to the facility closing. Within 90 days of Good Samaritan assuming management, the census started to increase.

Applicant anticipates that the project will meet utilization standards put forth by the state. The Existing Facility, while operating as a Livingston County facility, operated at capacity with a waiting list for prospective residents. Applicant plans to build resident volume at the Existing Facility and transfer residents to the Replacement Facility upon its completion in 2013. Therefore, Applicant anticipates meeting the state utilization standard in the first year following completion of the project. Applicant anticipates the following growth in census through the date of completion and transfer of residents to the Replacement Facility.

Goal: To replace an outdated skilled nursing facility that no longer meets state health care standards for the following reasons:

1. Resident room size
2. Lack of resident bathrooms
3. Antiquated and failing infrastructure, i.e., plumbing and electrical
4. Asbestos
5. Insufficient water supply both pressure and volume
6. Inadequate rural septic system
7. Inefficient fuel oil boiler heating system
8. Building is not fully sprinkled
9. Inadequate storage space for resident equipment, i.e., lifts, wheelchairs, etc.
10. Building does not have full central air conditioning
11. Inefficient windows
12. Inconvenient rural location

Build a replacement skilled nursing facility with a move-in date of August 13, 2013.

Date	Census
May 31, 2012	47
September 30, 2012	54
December 31, 2012	60
August 13, 2013*	84
December 31, 2013	106
April 30, 2014	120

\* Anticipated Project Completion and Transfer of existing residents to Replacement Facility

# ATTACHMENT 13

## ALTERNATIVES

### Alternative Options

#### 1. A project of greater or lesser scope and cost

Projects of greater and lesser scope were considered in the planning stages of this project. The alternative of a project of lesser scope would not sufficiently meet the need projected by Applicant, nor would it address the physical plant issues associated with the Existing Facility. As indicated in the Purpose of the Project section, the Existing Facility suffers from severe physical plant issues due to age and design, including water and plumbing issues, insufficient room size, and ventilation and insulation problems. The renovation of the Existing Facility, a project of lesser scope, is not feasible given the condition and design of the existing physical plant. Included in this attachment is an architect's summary of issues surrounding the current facility and limitations of renovation. Not only will this project resolve the aforementioned issues, this project will allow the Applicant to treat greater acuity residents and promote the transition of more seriously ill residents from the acute care setting to a sustainable long term care setting.

#### 2. Pursuing a joint venture or similar arrangement with one or more providers or entities to meet all or a portion of the project's intended purposes; developing alternative settings to meet all or a portion of the project's intended purposes

There are no local potential partners interested. The involvement of a venture capitalist showed an increase in cost, and the venture capitalist had no interest in a skilled nursing facility.

#### 3. Utilizing other health care resources that are available to serve all or a portion of the population the Project proposes to serve

The discontinuation of the Existing Facility without the corresponding construction of the Replacement Facility would result in unmet long term care need in the Livingston County. As of the February 21, 2012 "Update to Inventory of Long-Term Care Services", there is a 56 bed excess in long term care beds in the Livingston County, however, the Existing Facility accounts for 122 of currently inventoried beds. As such, the discontinuation of the Existing Facility without the corresponding establishment of the Replacement Facility would result in an unmet need of 66 long-term care beds in the area.

Documentation shall consist of a comparison of the project to alternative options. The comparison shall address issues of cost, patient access, quality and financial benefits in both the short term (one to three years after project completion) and long term. This may vary by project or situation. (See Attached Comparison Chart)



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Shorewood, Illinois 60404  
p 815.744.6940 f 815.744.6965

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April 13, 2012

Mr. Richard H. Hiatt  
Chairman, Board of Directors  
Good Samaritan - Pontiac  
14335 US Hwy 65  
Pontiac, IL 61764

RE: Support for Good Samaritan Home – Pontiac, CON Application

Dear Mr. Hiatt:

I wish to offer you my support for Good Samaritan Home – Pontiac's application for a Certificate of Need (CON) to replace the aged skilled nursing facility currently located at 14335 US Hwy 65. I am aware that the facility was previously the Livingston County nursing home. The home offered compassionate long term care for the sick and the frail. While the nursing facility plays an important role in the community, the condition of the present physical plant has reached the point where it should be replaced.

The existing facility is no longer able to meet the current Title 77 Part 300 Skilled Nursing and Intermediate Care Facilities Code and the NFPA Life Safety Code Chapter 19 requirements without permanent and temporary waivers. In some important instances, waivers will no longer be permitted. Centers for Medicare and Medicaid Services (CMS) has published a final rule that requires all long-term care facilities to be equipped with a complete supervised automatic sprinkler system by no later than August 13, 2013. The building is not fully sprinklered. Complete coverage means that the entire facility, including all closets, storage area, walk-in coolers and freezers, attic spaces, and toilet rooms are protected in accordance with NFPA 13. CMS recognizes that compliance will result in costly upgrades, disrupting patient care. Failure to be in compliance is likely to result in enforcement remedies, including, but not limited to denial of payment for patient care and termination of the nursing home.

In addition to requiring the installation of a costly fire suppression system, the existing facility contains hazardous building materials, does not meet current Illinois Accessibility Code and Federal ADA standards for accessible design, cannot comply with the state energy efficiency code administered by the Capital Development Board, has an inadequate well water supply and distribution infrastructure and an antiquated septic waste water treatment system.

I have done several physical need analyses for nursing homes within the past few years. In most instances, it is simply not feasible to correct the existing Livingston Manor/Good Samaritan Home deficiencies without turning needy patients away while tearing apart significant portions of the physical plant. That and given the abatement and demolition obstacles, it is my opinion that the cost of renovation would far exceed the cost of a replacement facility. The renovated facility could probably still not meet current market size and service delivery expectations.

I am happy to offer my support for the replacement of a very important component of the community's long term care service system.

Sincerely,

Joseph C Wiener, CDT AIA NCARB

## ATTACHMENT 14

### SIZE OF THE PROJECT

Size of Project				
Department/Service	Proposed BGSF/DGSF	State Standard	Difference	Met Standard?
General Long Term Care	454 BGSF/Bed	453-713 BGSF/Bed	0	Yes

The proposed project does not exceed the state standard of 453-713 building gross square feet ("BGSF") per bed.

# ATTACHMENT 28

## MALDISTRIBUTION

77 Ill. Admin. Code §1125.580(b)

The proposed project will not affect maldistribution of general long term care beds in the Livingston County Planning Area. The project proposes to discontinue an outdated one hundred and twenty-two (122) bed facility and establish a replacement one hundred and twenty-two (122) bed facility, the project will not result in greater maldistribution of services within the planning area. As required by 77 Ill. Admin. Code §1125.580(b), the relevant criteria regarding occupancy of facilities within a 30 minute drive time is addressed below.

### **OCCUPANCY OF FACILITIES WITHIN A 30 MINUTE DRIVE TIME**

The attached table provides the facilities within a 30 minute drive time and the occupancy data for such facilities. The last column of this table provides the number of beds that would be required to be filled in order to achieve 90% occupancy at each facility ("Available Bed"). Excluding Good Samaritan – Pontiac, there is a collective Available Bed count of 22.4 beds. As a percentage of general beds for these same facilities, this figure accounts for only 3.3% of the general beds for such facilities. In other words, only 3.3% of the general long term care beds would need to be filled to achieve a collective 90% occupancy of the facilities within a 30 minute drive time. As result, there is not a maldistribution of long term care beds in the area as only a small number of beds must be filled to achieve 90% occupancy of area facilities.

FACID	FACNAME	ADDRESS	CITY	ZIP	Gen Beds	SC Beds	Nursing Pt. Days	SC Pt. Days	Nursing Occup	SC Occup	Adm	ALOS	Travel Time Adjusted 77 IAC 1100.510(G)	Ortro Distance	Amiable Beds Under 90%	
6004642	Asta Care Centre Of Pontiac	300 West Lowell	Pontiac	61764-0000	86	0	30,601	0	95.3%	0.0%	116	283.8	6	2.79	-4.6	
6002601	Everglow Lodge	215 East Washington	Pontiac	61764-0000	73	141	23,985	21,659	89.5%	42.1%	183	277.6	8	3.35	1.1	
6000939	Franegan Rehab & Health Care Center	201 East Falcon Highway	Franegan	61740-0000	43	32	12,070	2,401	76.9%	20.0%	90	160.8	11	9.7	5.6	
6003877	Good Samaritan-Franegan	205 North Adams	Franegan	61740-0000	60	0	19,813	0	89.6%	0.0%	54	363.2	12	9.93	0.3	
6006001	Meadows Manzanita Home	24568 Church Street	Chelsea	61726-0000	130	29	37,356	0	78.7%	0.0%	101	369.9	18	14.82	14.7	
6002083	Heritage Health - Dwight	300 East Mezzon Avenue	Dwight	60420-0000	82	0	28,884	0	88.2%	0.0%	72	402.1	24	22.37	3.5	
6005387	Heritage Health - Minonk	201 Locust	Minonk	61760-0000	49	23	14,885	4,124	82.1%	49.1%	80	313.5	25	20.77	3.9	
6003040	Fairview Haven	605 North 4th Street	Fairbury	61739-0000	63	0	21,917	0	96.3%	0.0%	51	429.7	27	19.93	-3.3	
6005920	Heritage Health - El Paso	565 East Clay	El Paso	61739-0000	65	0	20,901	0	86.1%	0.0%	38	550.0	30	25.03	1.2	
6008373	Good Samaritan-Pontiac	1100 CR-27	Pontiac	61764-0000	122	0	14,275	0	32.1%	0.0%	55	289.8	7	4.82	70.7	
					765	225	223,957	28,184	78.2%	34.3%	600	315.2			92.9	22.4

(1) Discontinued 1 nursing care bed, total now 60 nursing care beds effective 2017/2011.

Source: Long-Term Care Facility Questionnaire for 2010, Illinois Department of Public Health, Health Systems Development  
www.mapquest.com

## ATTACHMENT 28

### CONSTRUCTION SCHEDULE

77 Ill. Admin. Code §1125.800 Construction Schedule

The anticipated dates and percent of project construction or modernization completion at the 25th, 50th, 75th, 95th and 100th percentile of project funds expended are as follows:

Project Funds Expended	Date
25%	October 15, 2012
50%	January 15, 2013
75%	April 15, 2013
95%	June 30, 2013
100%	July 30, 2013

The Applicant is confident that it can complete the project by the stated completion date. Both the proposed architect and construction contractor have submitted proposal letters anticipating that construction will be complete and residents of the Existing Facility will be transferred to the Replacement Facility before the project completion date. Such letters are attached in Appendix 4.

The following Sections **DO NOT** need to be addressed by the applicants or co-applicants responsible for funding or guaranteeing the funding of the project if the applicant has a bond rating of A- or better from Fitch's or Standard and Poor's rating agencies, or A3 or better from Moody's (the rating shall be affirmed within the latest 18 month period prior to the submittal of the application):

- Section 1120.120 Availability of Funds – Review Criteria
- Section 1120.130 Financial Viability – Review Criteria
- Section 1120.140 Economic Feasibility – Review Criteria, subsection (a)

#### VIII. - 1120.120 - Availability of Funds

The applicant shall document that financial resources shall be available and be equal to or exceed the estimated total project cost plus any related project costs by providing evidence of sufficient financial resources from the following sources, as applicable: **Indicate the dollar amount to be provided from the following sources:**

\$2,500,000		a) Cash and Securities – statements (e.g., audited financial statements, letters from financial institutions, board resolutions) as to:
	1)	the amount of cash and securities available for the project, including the identification of any security, its value and availability of such funds; and
	2)	interest to be earned on depreciation account funds or to be earned on any asset from the date of applicant's submission through project completion;
		b) Pledges – for anticipated pledges, a summary of the anticipated pledges showing anticipated receipts and discounted value, estimated time table of gross receipts and related fundraising expenses, and a discussion of past fundraising experience.
		c) Gifts and Bequests – verification of the dollar amount, identification of any conditions of use, and the estimated time table of receipts;
\$12,090,261		d) Debt – a statement of the estimated terms and conditions (including the debt time period, variable or permanent interest rates over the debt time period, and the anticipated repayment schedule) for any interim and for the permanent financing proposed to fund the project, including:
	1)	For general obligation bonds, proof of passage of the required referendum or evidence that the governmental unit has the authority to issue the bonds and evidence of the dollar amount of the issue, including any discounting anticipated;
	2)	For revenue bonds, proof of the feasibility of securing the specified amount and interest rate;
	3)	For mortgages, a letter from the prospective lender attesting to the expectation of making the loan in the amount and time indicated, including the anticipated interest rate and any conditions associated with the mortgage, such as, but not limited to, adjustable interest rates, balloon payments, etc.;
	4)	For any lease, a copy of the lease, including all the terms and conditions, including any purchase options, any capital improvements to the property and provision of capital equipment;
	5)	For any option to lease, a copy of the option, including all terms and conditions.
		e) Governmental Appropriations – a copy of the appropriation Act or ordinance accompanied by a statement of funding availability from an official of the governmental unit. If funds are to be made available from subsequent fiscal years, a copy of a resolution or other action of the governmental unit attesting to this intent;
		f) Grants – a letter from the granting agency as to the availability of funds in terms of the amount and time of receipt;
		g) All Other Funds and Sources – verification of the amount and type of any other funds that will be used for the project.
\$14,590,261		<b>TOTAL FUNDS AVAILABLE</b>

**APPEND DOCUMENTATION AS ATTACHMENT 39, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.**

# Busey

Monday, April 16, 2012

Dr. Glenda Tannahill, CEO  
Good Samaritan Group  
14335 US Hwy 66  
Pontiac, IL 61764

RE: Good Samaritan Group, Construction/Building Project in Pontiac, IL

Dear Dr. Tannahill:

We have reviewed the initial request from Good Samaritan Group to build a new 122 bed nursing home in Pontiac, IL on property just south of the OSF St. James Hospital with estimated costs of \$15,070,261. We also reviewed preliminary plans and financial/personnel projections for the Home through 2016. We are interested in working with Good Samaritan Group to provide financing for this new Home. We understand upon approval and receipt of the Certificate of Need from the Illinois Health Facilities and Services Review Board, complete details of construction and final plans will be requested and submitted to us for review and approve.

Based upon the informational underwriting package you provided to Busey Bank ("Busey"), regarding the above referenced project, we have outlined some basic terms and conditions prior to our formal credit approval process. The financing structure below is based on the information provided for the building project at Pontiac, IL. The land and improvements to be used in connection herewith are hereinafter referred to as the Project.

The terms described below are provided to the Good Samaritan Group as an indication of our interest in provided financing for the project. Prior to funding, the Bank will issues a formal commitment letter. Your acknowledgement of this letter of intent will indicate to us that we are proceeding in the right direction and that the terms stated would be acceptable to you if offered.

**Credit Facility**

***Borrower:***

Good Samaritan Group

***Loan Amount:***

Lesser of \$12,570,261 or 83.5% of appraised "stabilized" value of the Project.

The final term loan will be funded as follows:

- 60% of the loan amount will be funded directly by USDA under their Community Facility Loan Program which provides for long term fixed rate financing.
- 40% of the loan amount will be funded by the Bank with a USDA 90% guaranteed loan.

***Equity Contribution***

\$2,500,000 equity contribution in the form of cash. The equity contribution will be in place at the time of closing. Funds in place for the equity contribution will be deposited with Busey Bank.

***Purpose:***

~~Provide funds to construct a new 122 bed nursing home facility.~~

***Pricing:***

Pricing for the construction loan and permanent loans will be determined at the time a formal commitment letter is issued. The construction loan will be priced at a fixed rate over an 18 month period at prime plus 1.5% with a floor of 5%. USDA Community Facility Loans are priced at the time of the commitment and published quarterly. Interest on the Guaranteed Loan will be fixed for five years and will adjust each successive five year period. The rate on the Guaranteed Loan will be established at a 3.15% margin over the five year 3ML Swap Rate at closing and each adjustment period, with a floor of 4% and a ceiling of 12% over the term of the loan.

***Loan Fee:***

20 basis points for the Construction Loan.  
1% of the USDA guaranteed portion of the loan balance

**Prepayment Premium** Construction loan: None  
Five Term Loan: 5%-4%-3%-2%-1%, only if refinanced with another financial institution

**Maturity:** Construction Loan: 18 months from closing.  
Term Loan: 30 years from the time the construction loan is converted to the term loan.

**Repayment Program:** Construction Loan: interest only, monthly.  
Term Loans: Monthly principal and interest using a 30 year amortization.

**Collateral:** First mortgage on all land, improvements, personal property and assignment of rents and leases related to Project.

**Other Terms and Conditions**

**Loan Agreements:** Borrower will enter into Loan Agreements containing warranties, covenants, and agreements reflecting the terms herein described and such other terms and agreements deemed important to our counsel to safe guard our interest. Said agreements will provide without limitation, the following:

- Leverage ratio of 3 to 1
- Debt service coverage ratio of 1.1 to 1
- The ratio requirements take effect at the end of 2014

**State Law Requirements:** Must obtain state approval for the Certificate of Need and any and all operating licenses required to operate the facility.

**USDA:** Approval of USDA Community Facility Loan Program of amounting to 60% of the loan amount. Approval of USDA 90% guaranty for the bank's portion (40%) of loan balance.

**Financial Reporting:** Annual independent audit and tax returns for borrower

**Conditions Precedent** A title insurance policy, issued by a company selected by you and approved by the Bank, in the amount of the loan insuring our lien as a first mortgage and providing for extended coverage in form and substance satisfactory to the bank and insuring the Bank against mechanic's liens.

ALTA/ACSM minimum standard survey, certified to the Bank by a registered surveyor licensed in Illinois. Such survey shall, among other things show all easements, encroachments, and other matters affecting the site.

Evidence of Builders Risk Insurance (including flood insurance if applicable) on the Project in the form of an insurance policy to be received before closing together with a paid receipt for a one year premium. This policy must contain a mortgage clause satisfactory to us showing "Busey Bank, its successors and/or assigns" as the sole mortgagee.

Phase I Environmental Audit to be performed by or obtained from an environmental engineering firm approved by Busey Bank, indicating no material adverse environmental conditions exist on the real estate.

An appraisal of the Project, performed by an independent appraiser, certified and in form/content acceptable to and addressed to the Bank and the USDA.

~~The Bank will require the use of an Illinois architect.~~

***Lease with Subsidiary***

The term of the underlying lease between the borrower and its operating subsidiary must conform in both term and adjustment period with the term and adjustment period of the Guaranteed Loan.

***Pending Litigation:***

Provide a record of any pending litigation or regulatory action with the borrower or related subsidiaries.

***Organizational Documents:***

Certificate of Not-for-Profit status  
Corporate charter and by-laws

***Depository:***

Principal depository through Busey Bank.

***Costs:***

All out of pocket costs and expenses incurred by Busey Bank in connection with the proposed financing, including title charges, appraisal fees, recording charges, and other direct fees and charges will be borne by the Borrower whether or not the financing closes.

If any of the above terms and conditions are unacceptable to you, please call immediately so that we can discuss issues further with you. If these terms are acceptable to you please sign and return a copy of the enclosed letter to us by ~~January~~ <sup>MAY</sup> 15, 2012. *RMA*

Busey Bank sincerely appreciates the opportunity to assist in the financing that you have requested. If you have any questions, please do not hesitate to call me at (309) 834-2028.

Sincerely,

*Thomas M. Good*  
Thomas M. Good  
Market President

These terms would be acceptable on your final credit approval.

4-16-2012  
Date

*Richard D. Smith*  
Signature  
Pres. Good Samaritan Group

4-16-12  
Date

*Glenda Parralbert*  
Signature CEO/CFO

## ATTACHMENT 42

### REASONABLENESS OF PROJECT AND RELATED COSTS

#### A. Reasonableness of Financing Arrangements

See Attached Certification

#### B. Conditions of Debt Financing

See Attached Certification

#### C. Reasonableness of Project Costs

Department	Cost/Square Foot (New)	Gross Square Feet (New)	Construction \$	Total Cost
Long Term Care	\$190.55	55,413	\$10,558,947	\$10,558,947
Total	\$190.55	55,413	\$10,558,947	\$10,558,947

#### D. Projected Operating Costs

As provided in the Good Samaritan – Pontiac, Projected Financial Report (Compiled) 12.31.11 through 12.31.16, the projected operating cost for 2014 equals \$5,901,156 for 43,260 patient days.

#### E. Total Effect of the Project on Capital Costs

As provided in the Good Samaritan – Pontiac, Projected Financial Report (Compiled) 12.31.11 through 12.31.16, the Capital Expenses for 2014 equals \$770,045 for 43,260 patient days.



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Pontiac, Illinois 61764-1907  
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June 8, 2010

Illinois Health Facilities Planning Board  
525 W. Jefferson St., 2<sup>nd</sup> Floor  
Springfield, IL 62761

To Whom It May Concern:

It is my pleasure to write in support of the Good Samaritan-Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area.

The existing facility has served the County for many years and believe the proposed new facility will do an even better job through improved living conditions, better health care and improved & enhanced services.

We fully support Good Samaritan's proposal for the new skilled nursing home and restorative care facilities, believing many people would use and benefit from a new and improved facility.

Sincerely,

FARNSWORTH GROUP, INC.

A handwritten signature in black ink, appearing to read "Joseph M. Mikulecky".

Joseph M. Mikulecky, P.E.

April 13, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

To Members of the State Board,

I am supportive and request you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the County for many years. The improved living conditions, better health care and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use and benefit from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name Sandra M. Hoerner

Address 8043 E. 1800 North Road  
Graymont, IL 61743

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

*Judy Black*

Print Name Judy Black

Address 1114 E. White  
Pontiac, Ill. 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

*Shirley Wieggers*

Print Name Shirley Wieggers

Address 19487 N. 1300 E. Rd.  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

*Donna M. Warwick*

Print Name DONNA M. WARWICK

Address 501 S MILL ST.  
PONTIAC, IL.

April 15, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name HARLEY MAYER

Address 830 So WALNUT ST  
PONTIAC - ILL. 61764

April 15, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

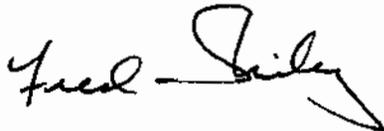
I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name FRED SHIRLEY

Address 101 E 2<sup>nd</sup> St  
PONTIAC, IL 61764

April 15, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

Print Name Marian J. Mayer

Address 830 S. Walnut  
Pontiac, IL 61764

April 15, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan -- Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan -- Pontiac for a new skilled nursing home.

Sincerely,



Print Name

Patti Shirley

Address

191 E. 2<sup>nd</sup> St  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

*Jon A. Bourne*

Print Name

Jon A. Bourne

Address

12 MANOR DR.  
PONTIAC, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

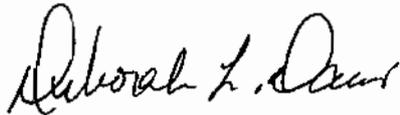
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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name

Deborah L. Davis

Address

806 Boulder Dr.  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

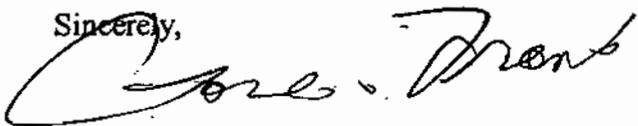
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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name

Charles Frank

Address

1319 Tuesboro  
Pontiac, IL 61064

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

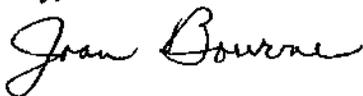
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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name Joan Bourne

Address 12 Manor Drive  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

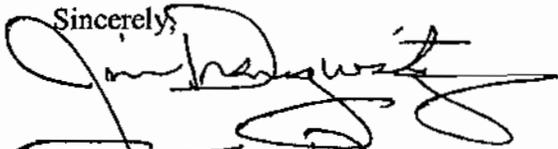
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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name

Jim Drenowitz

Address

1102 Prairie View Ln.  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name

PATRICIA J. DRENOWITZ

Address

1102 PRAIRIEVIEW LN  
PONTIAC, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

*Susan L. Hiatt, RPh*

Print Name Susan L. Hiatt, RPh

Address 21088 E 1600 N Rd  
Pontiac IL 61764

April 13, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

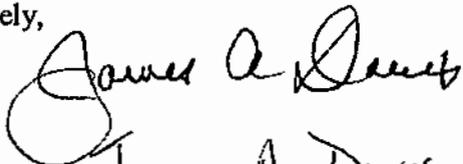
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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name James A. Davis

Address 806 Boulder Dr  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

Print Name DON W. MOORE

Address 1708 W. Bob-O-Link DR.  
PONTIAC, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

Print Name Priscilla Jane Yates

Address 516 N. Deerfield Rd.  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

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I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

Print Name Linda Frank

Address 1319 Tvesburg Ct.  
Pontiac, IL

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

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I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

*Carolyn J. Moore*

Print Name Carolyn J. Moore

Address 1708 Bob-O-Link Dr.  
Pontiac, IL 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

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I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name RUHAMA HIATT

Address 223 W. LOWELL AVE  
PONTIAC, IL, 61764

April 14, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

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I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,



Print Name Kristine Randall

Address 239 E Payson St  
Pontiac IL 61764

April 15, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

I am requesting you favorably consider granting the Good Samaritan – Pontiac a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding area in Pontiac, Illinois.

I believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighboring towns.

I am sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

I personally support the plans of Good Samaritan – Pontiac for a new skilled nursing home.

Sincerely,

*Jerry A. Klopfenstein*  
*210 W. Main St.*  
*Pontiac IL 61764*

# First Lutheran Church

*"Worshiping Christ and Serving our Neighbor"*

April 16, 2012

Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, IL 62761

Members of the State Board:

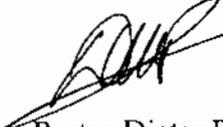
We are requesting you favourably consider granting the Good Samaritan - Pontiac, IL, a certificate to construct and operate a replacement skilled nursing home for the people of Livingston County and surrounding are in Pontiac, Illinois.

We believe this skilled nursing facility is needed and has served the county for many years. The improved living conditions, better health care, and improved services would be welcomed by many residents in our rural community as well as those in neighbouring towns.

We are sure many people would use, and benefit, from the new skilled nursing home and restorative care facilities.

We personally support the plans of Good Samaritan - Pontiac for a new skilled nursing home.

In His Service,

  
Pastor Dieter Punt



311 West Grove Street Pontiac, IL 61764 815-844-3695

[www.firstlutheranpontiac.org](http://www.firstlutheranpontiac.org)

email: [info@firstlutheranpontiac.org](mailto:info@firstlutheranpontiac.org)

Pastor Dieter W. Punt

Pastor Heidi W. Punt

Appendix 2 329-25

## APPENDIX 4

# ARCHITECT AND CONSTRUCTION PROPOSAL LETTERS



January 25, 2012  
Revised February 25, 2012

Mr. Richard H. Hiatt  
Good Samaritan Pontiac  
P O Box 198  
14335 US Hwy 66  
Pontiac, IL 61764

Re: Architectural/Engineering Fee Proposal  
Good Samaritan Nursing Building  
Pontiac, Livingston County, Illinois

Dear Rick:

KDA Architects, P.A. is please to present this proposal for professional services in connection with the design and documentation of the proposed new 122 bed skilled nursing building. We understand the size of this new one story building to be approximately 47,000 gross feet as outlined in Program #9 prepared by KDA and dated December 1, 2012. The construction cost for the project is anticipated to be \$7 million dollars. We are suggesting a two part approach to the design and documentation. Part One will confirm the building program and layout. We will also confirm the construction cost at this point through LeCesse Construction, the Construction Manager for the project.

Once the program and budget are approved, we will proceed with Part Two which is the more detailed design, documentation and approval process. We have included the services of the following consultants in this proposal:

KDA Architects, P.A. – Architecture, Planning, Landscape Design  
Michael A. Beach & Associates – Structural Engineering  
PHY Consulting Engineers, Inc. – Mechanical, Electrical, Plumbing, Fire Protection & Lighting Design  
JEM Associates – Food Services Design  
Merlino Design Partnership – Interior Design

**PART ONE: Schematic Design:** The design disciplines during this phase are the Architect, Civil Engineer, and Geotechnical Engineer

This phase will develop the information necessary to describe building configuration, general systems approach, finishes and materials. We assume that the Construction Manager will be involved during this phase to provide cost estimating services. At the conclusion of this phase a Scope of Work and an estimated construction budget will be established.

**PART TWO: Design Development, Construction Documentation, Bidding / Negotiations and Construction Administration of the Contract.** The design disciplines during this phase are the Architect and all the consultants called for above.

Upon completion of part One KDA will provide Architectural and Engineering Services as set forth in "Standard Form of Agreement Between Owner and Architect" (AIA Document B101-2011

Edition). The terms and conditions as well as any modifications to the AIA Document can be reviewed during the schematic design process in Part One. Refer to Attachment "C" for *Work Not Included* schedule.

## II. SCOPE OF WORK

KDA will perform a review of all township, county and state regulations that impact the proposed development and review what surveys are available to confirm that all the planning issues are properly understood and addressed.

We will meet with the Pontiac Planning Board subcommittee and environmental committee in conjunction with the selected Civil Engineer and Traffic Engineer so we can best develop our site that meets the requirements of the representatives of Pontiac and our development team.

The following assumptions have been made in the preparation of this proposal

1. The site will be developed as a one-phase project.
2. No off-site improvements or utility extensions will be required and are not part of this contract.
3. The site is already serviced by public water and sewer and additional extensions are not necessary.
4. An environmental impact statement may be required.
5. A traffic impact statement may be required.
6. A geotechnical report may be required.
7. The proposed project will be a one-story structure.

## III. SCOPE OF SERVICES

### PART ONE: SCHEMATIC DESIGN

#### A. Project Research & Programming

1. Programming per Owner's requirements
2. Conduct applicable zoning research
3. Develop criteria for the project to determine site capabilities
4. Develop conceptual site plans to show building type
5. Present various plans and site schemes to owner
6. Interface with any other consultants during this phase
7. Present solutions to owner for their approval.

#### Site Plan Submission to the Pontiac Planning Board

#### B. Preliminary and Final Site Plan Submission:

This shall be done in accordance with the Pontiac Zoning ordinance. This shall also include the final Civil Engineering documents. (By owner)

1. Preparation of overall site plan showing building location, pedestrian circulation, vehicular circulation, adjacent streets, and adjacent land uses.
2. Landscaping Plan:
  - a. Proposed location of planting, proposed species, quantity and spacing of vegetation.
  - b. Planting details.
  - c. Exterior furniture and passive recreation areas and details.
  - d. Proposed buffer areas of landscaping screen or fencing, whichever is required.
3. Site Lighting Plan:
  - a. Lighting plan indicating spacing of light standards, foot-candles and provisions for elimination of sky glow, glare and angle of light.
  - b. Lighting standards and utility poles indicating height, type, construction, light fixture and locations.

4. Location of fire zones, loading zones, handicap zones, ingress and egress from parking facilities.
5. Signage: Project identification signage
  - a. Location of proposed signs.

**County Planning Board Application:** Upon request of the client, KDA will assist the client, civil engineer, and land use attorney with the preparation and submittal of a Site Plan Application to the Livingston County Planning Board. Following receipt of review letters from the board's professionals, KDA will update the plans in accordance with the comments and resubmit for acceptance.

- C. Schematic Design for Site Plan Submission:** This shall include input from our consultants; structural, mechanical, electrical, plumbing engineers.
1. Design of building:
    - a. floor plans
    - b. exterior elevations
  2. Presentation drawings and boards for public hearings in color
  3. Coordination meetings with Pontiac officials and design team
  4. Revisions to submitted documents for final Site Plan submission
  5. All final documents shall be coordinated with Good Samaritan, civil engineer, traffic engineer, Pontiac, Livingston County and state permitting agencies.
  6. All work is to be done and submitted with the approval of Good Samaritan.
  7. Assist in the processing of plans with the Planning Board.

**D. Final Planning Board Submission:**

This submission is a reiteration of the services performed for preliminary submission and contains all of the corrections requested by the Pontiac review agencies governing the project.

1. All final documentation shall be coordinated with the Owner selected civil engineer, traffic engineer, geo-technical engineer, Pontiac, Livingston County and state permitting agencies.

**PART TWO: ARCHITECTURE/ENGINEERING: Design Development through Construction Administration of the Contract.**

KDA Architects and its consultants will prepare all the necessary final construction documents and specifications for a building permit and a final certificate of occupancy.

For the purpose of this proposal our services will include Land Planning, Landscape Design/Site Lighting Design, Architecture, which will include Structural, Mechanical, Electrical, Plumbing and Fire Suppression (Performance Criteria) Engineering, Interior Design, Kitchen Design and Construction Administration of the project.

The services described in "AIA B-101 2007 Edition Standard Form of Agreement Between Owner and Architect" shall govern the production of the architectural part of this proposal and will follow upon the acceptance of this proposal.

Preparation of the Architectural documents and Land Planning shall be subject to complete code review as it relates to the:

1. International Building Code
2. National Plumbing Code
3. Fire Safety Code
4. Local municipal codes.
5. Department of Health, local, county and state

6. State of Illinois Department of Health (IDOH)
7. Local Building Department (Community Affairs)
8. Americans with Disabilities Act (ADA).

**PART ONE: SCHEMATIC DESIGN**

**A. Program Definition/Space Needs:**

The first phase of the design process is critical to the future success of the entire project. It is here that the decisions which have the greatest impact on functionality, adaptability and economy will be made. It is an intense phase that will require extensive communication between the architect, consultants and owner.

**B. Schematic Design Phase:**

KDA shall review with Good Samaritan (GS) the selection of materials, building systems, equipment, methods of construction and project delivery.

KDA shall continue the development of the Schematic Design Documents for the purpose of a full outline description of the proposed construction and site work as follows:

- Project description
- Site plan indicating all major site improvements and modifications architecturally
- Typical architectural building plans and elevations
- Typical structural framing Design Narrative
- Mechanical and electrical systems descriptions and Design Narrative
- Outline specification

**PART TWO: ARCHITECTURE/ENGINEERING: Design Development through Construction Administration of the Contract.**

**A. Design Development Phase:**

Based on Part One the approved Schematic Design Documents and any adjustments authorized by GS in the program or budget, KDA shall prepare Design Development Documents consisting of drawings and other documents to fix and describe the size and character of the entire project as to architectural, structural, mechanical, electrical, plumbing, and materials.

KDA during this phase shall consult with the GS staff to obtain detailed requirements of each of the project elements and to ensure full understanding of any special requirements.

In addition to ongoing review by the project team and, at intervals appropriate to the progress of the Design Development Phase, KDA shall provide Design Development documents in sufficient detail to allow for review and analysis by the GS staff.

Upon completion of the Design Development Phase, KDA shall provide GS with drawings, outline specifications and other documents for review and approval.

**B. Construction Documents:**

Upon approval of the Design Development Documents, KDA shall prepare from the Design Development Documents complete working drawings, specifications, general conditions and other necessary documents.

KDA shall keep GS informed of any changes in the requirements or in construction material, systems or equipment as the drawings and specifications are developed so that the current working estimate may be adjusted accordingly.

KDA shall assist GS in filing the required documents for approval of all authorities having jurisdiction over the Project.

KDA shall continue coordination and document quality control processes during the bidding phase to avoid errors, omissions or duplication in the Construction Documents.

KDA shall prepare additional documentation as required in the form of addenda to respond to, interpret or clarify questions or discrepancies in the Construction Documents.

**C. Construction Phase:**

KDA shall provide administration of the Construction Contract as described in the current "AIA Document B 101, 2007" including advising and consulting with GS forwarding all of the instructions to the Construction Manager; review of shop drawings, samples, and other submissions of the Construction Manager; issuing Certificate of Payment and Certificates of Substantial Completion; and preparing and issuing Change Orders.

KDA shall make visits to the project site to observe the progress and quality of the work and to determine, in general, if the work is proceeding in accordance with the Contract Documents. Such visits shall be made appropriate to the state of construction and the requirements of GS. Two project meetings per month for twelve months, project meetings thereafter on an hourly basis.

Good Samaritan may choose to eliminate or add services to this proposal; these will be addressed as they occur and will be reflected in modifications to the fee schedule.

**SCHEDULE:**

1. March 1 to April 15, 2012 – 1.5 months  
Schematic Design
2. April 15 to July 1, 2012 – 2.5 months  
Bid Documents
3. July 1 to August 1, 2012 – 1 month  
Bidding / Negotiation and Final Construction Document Coordination
4. August 1 to July 1, 2013 – 11 months  
Construction of Building and Site Work
5. July 1 to August 1, 2013 – 1 month  
Obtain Licensure from State of Illinois (DOH)
6. August 1 to August 12, 2013 – 12 days  
Move into new building

Based on an 11 month construction schedule, starting August 1, 2012, the percentage of the project completion milestone dates are:

25% - October 15, 2012

50% - January 15, 2013

75% - April 15, 2013

95% - June 30, 2013

100% - July 30, 2013

#### IV. BASIS OF COMPENSATION

##### FEE SCHEDULE TO THE OWNER: ARCHITECTURE/ENGINEERING

###### Base Fee Disciplines

▪ Architecture / Planning / Landscape Design	KDA Architects
▪ Code Compliance	KDA Architects
▪ Structural Engineering	Michael A. Beach & Associates
▪ Mechanical Engineering	PHY Engineers, Inc.
▪ Electrical Engineering	PHY Engineers, Inc.
▪ Plumbing Engineering	PHY Engineers, Inc.
▪ Fire Protection Engineering	PHY Engineers, Inc.
▪ Food Services	JEM Associates
▪ Interior Design	Merlino Design Partnership

###### Base Fee

The scope of the project and scope of services for Architecture and Engineering from concept design through construction documentation and construction administration of the project will be provided in accordance with the following;

- The fee schedule is based on the scope of services for new construction as discussed January 25, 2012.

###### Compensation:

KDA's fee for Architectural and Engineering Services is based on 8.5% of construction cost and includes Structural, HVAC, Electrical, Plumbing Engineering and Fire Protection (performance specifications only), Food Service design, and Interior Design. We understand the project construction cost to be in the range of seven million dollars.

Our proposed fee for the services described above is **\$595,000**.

Progress payments shall be according to the following percentages:

<b>Part One:</b>			
Schematic Design Phase:	Twenty-Five Percent	25% -	\$148,750
<b>Part Two:</b>			
Design Development Phase and Construction Documents Phase:	Fifty-One Percent	51% -	\$303,450
Bidding Phase:	Two Percent	2% -	\$ 11,900
Construction Phase:	Twenty-Two Percent	22% -	\$130,900
Total Basic Compensation:	One Hundred Percent	100% -	\$595,000

Fees above do not include reimbursable expenses which will be invoiced at cost plus ten percent. Travel, overnight accommodations, meals, mileage, printing, copying, etc., will be charged according to the attached list of *Reimbursable Expenses Schedule*. If additional work is required and authorized, personnel time and out-of-pocket expenses will be invoiced in accordance with the attached *Standard Hourly Billing Rate Schedule*.

#### SERVICES ENGAGED AND PAID FOR DIRECTLY BY OWNER

We understand that the owner will provide the following services:

Geotechnical Engineering

Civil Engineering including:

- Boundary and Topographic Surveys
- Off-Site Civil Engineering
- On-Site Engineering for Public Approvals
- Traffic and Parking Studies/Engineering
- Environmental Studies/Engineering

Special Low Voltage Technology

Acoustical

In the event the Architect has to retain special consultants, which are required by Pontiac and/or GS for any part of the project, the related fee shall be passed through as per conditions described in the "AIA Document 101-2007 Edition".

- A. Reimbursable Expenses are in addition to the fees shown above.
- B. Public Hearings – Attendance at public hearings will be hourly.
- C. Preparation of Marketing Collateral - Hourly
- D. Exterior and Interior Rendering of Building - \$2,500/per

#### TERMS OF PAYMENT / TERMS OF DEFERMENT

The compensation for Schematic Design through Construction Administration of the Contract will be as shown on the enclosed schedule. Payments are due and payable within 30 days from the date of invoice. Amounts unpaid after 45 days shall bear the interest rate of one and one half percent (1-1/2%) per month.

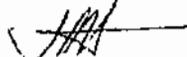
Payment for the Basic Services necessary for the completion of the "Part One – Schematic Design Phase" shall be "deferred". Refer to the "**Breakdown of Base Fee**" above for the amount to be deferred. The deferment time period at this time is from March 1, 2012 until CON approval or three months, whichever comes first.

The terms of the deferment are as follows:

1. The Good Samaritan (GS) shall submit a letter guaranteeing that payment will be made to the architect in the event financing or closing does not take place.
2. Payments due during the deferred phases of the architect's basic services shall bear the interest rate of One and one half percent (1.5%) per month. In the event the CON approval is delayed, the interest shall carry per month until final CON approval is achieved and agreed to by the architect.
3. Deferment is for Schematic Design Phase only.

Please do not hesitate to call me should you have any questions regarding this proposal or our scope of services. If you find the terms and conditions acceptable, please sign both originals of this proposal and return one to me. Your approval of this proposal is for authorization to proceed with Part One and Part Two. We can begin our work immediately and look forward to working with Good Samaritan on this project.

Sincerely,  
KDA Architects, P.A.

  
JOSEPH M. SCANLON, AIA  
PRINCIPAL

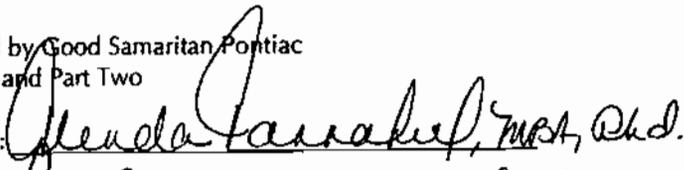
CC: Dr. Glenda Tannahill

Accepted by Good Samaritan Pontiac  
Part One and Part Two

Signature:

Printed Name/Title:

Date:

  
Glenda Tannahill, MBA, PhD.  
Glenda Tannahill CEO/CFO  
3-1-2012

## ATTACHMENT "A"

KDA Architects

### Charges for Time and Expense Projects

#### Standard Hourly Billing Rates

Time spent by **KDA Architects** technical personnel on the project is charged according to the following hourly rates. The rate includes actual wages, customary and mandatory benefits, overhead and profit.

Senior Principal	\$ 175.00 per hour
Principal	\$ 150.00 per hour
Project Manager	\$ 125.00 per hour
Project Designer	\$ 110.00 per hour
Project Architect	\$ 90.00 per hour
Senior Interior Designer	\$ 90.00 per hour
Interior Designer	\$ 75.00 per hour
Senior Draftsperson	\$ 85.00 per hour
CADD Technician/ Draftsperson	\$ 75.00 per hour
Administrative	\$ 45.00 per hour
Clerical	\$ 35.00 per hour

Hourly rates are subject to change with 30 days written notice.

**ATTACHMENT "B"**  
**KDA Architects**  
**Reimbursable Expenses**

**1. TRANSPORTATION AND LODGING:**

- |    |   |                      |
|----|---|----------------------|
| A. | Out of town travel, hotel accommodations,<br>long distance communications:              | Cost + 1.10 multiple |
| B. | Mileage: (i.e. travel to job site, project<br>meetings, governmental authorities, etc.) | \$ 0.55 per mile     |
| C. | Parking and tolls:  | Cost + 1.10 multiple |

**2. REPRODUCTIONS, POSTAGE, HANDLING OF DRAWINGS,  
SPECIFICATIONS, AND OTHER DOCUMENTS:**

**Monochrome Plots and Reproductions:**

- |    |                                       |                         |
|----|---------------------------------------|-------------------------|
| A. | Photocopies & plots - small format    | \$ 0.20/copy            |
| B. | Drawing size bond photocopies & plots | \$ 0.30 per square foot |

**Color Plots and Reproductions:**

- |    |                                       |                         |
|----|---------------------------------------|-------------------------|
| D. | Photocopies & plots - 8.5" x 11"      | \$ 1.10/copy            |
| E. | Photocopies & plots - 11" x 17"       | \$ 2.50/copy            |
| F. | Drawing size bond photocopies & plots | \$ Cost + 1.10 multiple |
| G. | Scan to disk or file                  | \$ Cost + 1.10 multiple |
| H. | Presentation mounting                 | \$ Cost + 1.10 multiple |
| I. | Postage                               | \$ Cost                 |
| J. | UPS, Federal Express, etc. expenses   | \$ Cost + 1.10 multiple |
| K. | Faxes                                 | \$ 0.10/copy            |

Note: Prices quoted are subject to change with a 30 day written notice

## ATTACHMENT "C"

### KDA Architects

#### Work Not Included in the Contract:

1. The Architect and the Architects' consultants have no responsibility for the discovery, presence, handling, removal or disposal of or exposure of persons to hazardous materials in any form at the project site, including but not limited to asbestos, asbestos products, polychlorinated biphenyl (PCB) or other toxic substances.
2. Utilities (above or below grade). The Architect is not responsible for utility locations beyond five feet (5') from the building perimeter.
3. Wells (relocation, testing, associated pumps, wiring, etc.).
4. Oil tanks (location, piping, testing, installation, tank removal or product removal).
5. Gasoline tanks (location, piping, testing, installation, tank removal or product removal).
6. Telephone, CATV, security or computer systems.
7. Furniture and equipment.
8. Acoustical Consultant.
9. Soils test (geotechnical)
  - sanitary systems
  - structural soil bearing
  - percolation test
10. Water pressure testing
11. Hazardous materials (exterior site or existing interior)
12. Miscellaneous testing: Chemical, air and water pollution and other laboratory and environmental test inspections required by law or to produce the project.
13. Civil Engineering
14. Perspectives, rendering, or models.
15. Traffic Engineering.
16. Detailed Construction Cost Estimate
17. Fees for Approval Agencies
18. Special Low Voltage Technology
19. Environmental Consultant
20. LEED Design and Certification
21. Special Inspections
22. Design of Modular Construction
23. Design of Marketing Materials



**VISSERING**  
**Construction Company**

*where success is measured one project at a time*

**Good Samaritan-Pontiac**  
**14335 Old Route 66**  
**Pontiac, IL 61764**  
**Attn: Members of the Board**  
**%Richard H. Hiatt, President**

**Dear Mr. Hiatt and Board Members,**

**Thank you for providing us with this opportunity to introduce Vissering Construction Company to you. We are extremely pleased to be considered to provide construction related services for your new facility.**

**We have enclosed a packet of information regarding our qualifications and history for your use and information.**

**Additional information including financial statements, certificates of insurance and supporting documentation are available upon request.**

**Thank you again for this opportunity.**

**Sincerely,**

**Greg Wiesbrock, Director of Construction Management**  
**Vissering Construction Company**



CONSTRUCTION  
MANAGEMENT



GENERAL  
CONTRACTING



DESIGN-BUILD



GREEN BUILDING



QUALITY

ID	Task Name	Duration	Start	Finish	Qtr 1, 2012			Qtr 2, 2012			Qtr 3, 2012			Qtr 4, 2012			Qtr 1, 2013			Qtr 2, 2013			Qtr 3, 2013					
					Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
1	<b>GOOD SAMARITAN -PONTIAC</b>	<b>360 days</b>	<b>Mon 3/19/12</b>	<b>Fri 8/2/13</b>																								
2	SUBMIT CERTIFICATE OF NEED	60 days	Mon 3/19/12	Fri 6/8/12																								
3	<b>PREPARE CONSTRUCTION DOCUMENTS</b>	<b>85 days</b>	<b>Mon 4/9/12</b>	<b>Fri 8/3/12</b>																								
4	SUBMIT DESIGN DEVELOPMENT DOCUMENTS	40 days	Mon 4/9/12	Fri 6/1/12																								
5	INCORPORATE COMMENTS INTO CONSTRUCTION DOCUMENTS	5 days	Mon 6/4/12	Fri 6/8/12																								
6	SUBMIT CONSTRUCTION DOCUMENTS	40 days	Mon 6/11/12	Fri 8/3/12																								
7	<b>BIDDING AND AWARD</b>	<b>30 days</b>	<b>Mon 6/11/12</b>	<b>Fri 7/20/12</b>																								
8	REVIEW BIDS AND SCOPE WITH CONTRACTORS	10 days	Mon 7/23/12	Fri 8/3/12																								
9	<b>CONSTRUCTION</b>	<b>260 days</b>	<b>Mon 8/6/12</b>	<b>Fri 8/2/13</b>																								
10	CLOSE-OUT AND IDPH OCCUPANCY INSPECTION	40 days	Mon 6/10/13	Fri 8/2/13																								
11	OWNER OCCUPY	20 days	Mon 7/8/13	Fri 8/2/13																								
12																												

Project: PRELIM SCHEDULE Date: Mon 3/26/12 APPENDIX 4	Task		Rolled Up Milestone		Duration-only	
	Split		Rolled Up Progress		Manual Summary Rollup	
	Milestone		External Tasks		Manual Summary	
	Summary		External Milestone		Start-only	
	Project Summary		Inactive Task		Finish-only	
	Group By Summary		Inactive Milestone		Deadline	
	Rolled Up Task		Inactive Summary		Critical Task	
	Rolled Up Critical Task		Manual Task		Progress	

Inv Date	Inv Number	Inv Amt	Discount	Amt Paid	Memo/Distribution
04/05/2012	405	2000.00	.00	2000.00	CON MODIFICATION 60-5900 2000.00

2000.00 .00 2000.00

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Good Samaritan  
Pontiac

GOOD SAMARITAN PONTIAC

14335 US HIGHWAY 66  
PONTIAC, IL 61764  
(815) 844-5121

STATE BANK OF GRAYMONT  
Graymont - Chenoa - Pontiac

70-1822/711

No. 14357

Check No. 0014357

EXACTLY\*\*\*\*\*2000\*DOLLARS\*AND\*NO\*CENTS

PAY TO THE ORDER OF:  
IL. DEPT. OF PUBLIC HEALTH  
525-535 W. JEFFERSON ST.  
SPRINGFIELD, IL  
62761

DATE

04/05/2012

AMOUNT

\*\*\*\*\*2000.00

*Jenada Fannakuf*  
AUTHORIZED SIGNATURE



12-027 Type A Modification

THIS DOCUMENT CONTAINS HEAT SENSITIVE INK. TOUCH OR PRESS HERE - RED IMAGE DISAPPEARS WITH HEAT.

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