

PROJECT PERFORMANCE QUESTIONNAIRE



Purpose: The University of Colorado at Boulder and Pennsylvania State University are conducting a survey to investigate the role of project delivery methods, contracting terms, procurement, team behavior and technology in project success. Please help us by completing the survey for at least one project you have completed in the last 5 years in the United States. The questionnaire should take between 20-30 minutes to complete. If needed, any follow-up interviews with the respondent will take approximately 15-20 minutes to conduct.

Confidentiality: The project information you provide will be kept in strict confidentiality, within a password protected database. Only the primary investigators and their research assistants will see and have access to your information. In the event of a publication or presentation based on the results of this study, no personal or company identifiable information will be shared.

Participation: Your decision to participate in this research is voluntary and you may withdraw at any time. There is no direct compensation; however, participants may request a copy of the final reports. If you have any questions, complaints or concerns regarding this research, you may contact Dr. Robert Leicht at (814) 863-2080.

Completed questionnaires may be returned by mail or email to:
 Dr. Robert Leicht, Dept. of Architectural Engineering, Penn State University
 104 Engineering Unit A, University Park, PA 16802
cpf@colorado.edu

SECTION 1: PROJECT CHARACTERISTICS

Project name: _____

Project location: _____

Your name: _____

Your company name: _____

Phone #: _____ Email: _____

Specify your role on the project:

- Owner Construction Manager (CM)/General Contractor (GC)
- Architect/Designer Design-Builder Other: _____

Owner type: Public Private

Specify the project type (e.g. Office, Hospital) or describe the intended use of the project: _____

Relative to your experience with similar project types, rate the level of complexity for this project (1=Low, 6=High):

Low 1 2 3 4 5 6 High

Building gross square footage: _____ ft²

No. of floors above grade: _____ No. of floors below grade: _____

Percentage (by cost or area): Renovation _____ % New construction _____ %

Select the closest foundation type:

- Slab on grade with spread footings Caissons, piles or slurry walls
- Mat foundation Other: _____

SECTION 2: PROJECT ORGANIZATION

Select the project delivery system best matching the delivery of your project:

- Design-Bid-Build Design-Build (DB)
- Construction Manager at Risk (CM/GC) Integrated Project Delivery

Denote when each project participant was **contracted** for the project (timing as based on percent of overall design completion):

	Pre-Design	Concept Design (0-15%)	SD (15-30%)	DD (30-60%)	CD (60-90%)	Bidding (Full CD)
Architect/Designer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
GC, CM/GC or DB	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MEP Contractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Structural Contractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Were specialty contractors involved before being contracted? Yes No

Relative to your expectations, evaluate the administrative burden you experienced (1=Low, 6=High):

Low 1 2 3 4 5 6 High

SECTION 3: PROJECT COST

What were the following project costs?

Provide separate Construction Costs if known; otherwise, enter Total Project Costs only, indicating whether the cost data provided is estimated (E) or actual (A). Please deduct all property costs, owner costs, costs of installed process or manufacturing equipment, furnishings, fittings and equipment, or items not a cost of the base building.

	Construction Costs	Total Project Costs
Contract award	<input type="radio"/> E <input type="radio"/> A	<input type="radio"/> E <input type="radio"/> A
Final cost	<input type="radio"/> E <input type="radio"/> A	<input type="radio"/> E <input type="radio"/> A

Estimate the cost of site work (work performed outside the building footprint) included in the project costs listed above: \$ _____

Are there any unresolved costs or change orders? Yes No

Has the project ever been in litigation?

- Yes, resolved Yes, unresolved No

If applicable, are the costs of litigation and/or claims included in the project costs listed above? N/A Yes No

SECTION 4: PROJECT SCHEDULE

Please provide the following schedule information:

	Planned (mm/dd/yy)	Actual (mm/dd/yy)
Design start date (Notice to proceed)		
Construction start date (Notice to proceed)		
Construction end date (Substantial completion)		

SECTION 5: PROJECT QUALITY

If you are the owner, please complete this section. If not, please provide the owner's name or point of contact: _____, phone number or email address: _____.

Relative to your expectations, evaluate the facility turnover and operation (1=Low, 6=High):

	Low	1	2	3	4	5	6	High
Difficulty of facility start-up	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number and magnitude of call backs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Operation and maintenance costs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Relative to your expectations, evaluate the quality of the facility and systems (1=Low, 6=High):

	Low	1	2	3	4	5	6	High
Envelope, roof, structure, foundation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interior finishes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Environmental systems (lights, HVAC)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exterior aesthetic (style, proportions)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interior environment (mood, feel, image)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rate your overall satisfaction with the design and construction process (1=Not satisfied, 6=Exceeded expectations):

Not satisfied 1 2 3 4 5 6 Exceeded

SECTION 6: PROJECT SAFETY

If you are the builder, please complete this section. If not, please provide the builder's name or point of contact: _____, phone number or email address: _____.

Number of recordable injuries: _____ Number of lost time injuries: _____

Work-hours for all onsite construction activities (indicate (E) for estimated or (A) for actual): _____ E A

SECTION 7: SUSTAINABILITY

Specify any green or sustainable rating system used on this project: _____

What level of certification was planned and awarded?

Planned: _____ Number of points/credits: _____

Awarded: _____ Number of points/credits: _____

SECTION 8: TEAM PROCUREMENT & CONTRACTS

Indicate how proposals were solicited from each project participant:

	Open Bid	Pre-Qualified Bid	1-Stage RFP	2-Stage RFP	Sole Source
Architect/Designer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
GC, CM/GC or DB	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MEP Contractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Structural Contractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Which of the following factors were considered in the selection of each project participant (check all that apply)?

	Price (Fee)	Price (Work)	Tech. Proposal	Design Concept	Similar Project Experience	Interview Performance
Architect/Designer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GC, CM/GC or DB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MEP Contractors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Structural Contractors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Select the commercial terms used for the following project participants:

	Lump Sum	GMP	Unit Price	Cost Plus
Architect/Designer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Fixed Fee / <input type="radio"/> % Fee
GC, CM/GC or DB	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Fixed Fee / <input type="radio"/> % Fee
MEP Contractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Fixed Fee / <input type="radio"/> % Fee
Structural Contractors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Fixed Fee / <input type="radio"/> % Fee

Were performance-based incentives used in any contracts? Yes No

Was the operation and maintenance of the facility included in the contract scope of any team member or members Yes No

Did the project team use a formal partnering agreement? Yes No

If Yes, please explain: _____

SECTION 9: TEAM CHARACTERISTICS & BEHAVIOR

Indicate the owner's type of relationship with the project team:

Architect/Designer First Time Repeat

GC, CM/GC or DB First Time Repeat

Evaluate each of the following attributes of your project team:

Team's prior experience as a unit (1=Low, 6=High):

Low 1 2 3 4 5 6 High

Team chemistry (1=Poor, 6=Excellent):

Poor 1 2 3 4 5 6 Excellent

Relative to your expectations, denote the frequency of staff turnover within the project team (1=Low, 6=High):

Low 1 2 3 4 5 6 High

When was end-user feedback provided to the project (check all that apply)?

Inception Conceptual DD Construction

Programming SD CD Operation

Specify when each project participant was **co-located** or sharing a workspace with other team members (check all that apply):

	Owner	Architect/Designer	CM/GC	MEP Contractors	Structural Contractors
Design Phase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Construction Phase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evaluate the communication among the project team:

Formality of communication (1=Informal, 6=Formal):

Informal 1 2 3 4 5 6 Formal

Timeliness of communication (1=Never on time, 6=Always on time):

Never 1 2 3 4 5 6 Always

How often did the project team compromise on project issues (1=Never, 6=Frequently)?

Never 1 2 3 4 5 6 Frequently

Did the project team manage a shared, internal contingency usable by both design and construction team members? Yes No

Who participated in setting goals for the project (check all that apply)?

Owner Architect/Designer GC, CM/GC or DB

MEP Contractors Structural Contractors Other: _____

To what extent were **all** project team members committed to the same project goals (1=Very Weakly, 6=Very Strongly):

Weakly 1 2 3 4 5 6 Strongly

SECTION 10: PROCESS AND TECHNOLOGY

Number of design charrettes held by the project team: _____

Who was involved with the design charrettes (check all that apply)?

Owner GC, CM/GC or DB Structural Contractors

Architect/Designer MEP Contractors Other: _____

How was Building Information Modeling (BIM) used (check all that apply)?

BIM was not used MEP Coordination/Clash Detection

Architectural Design 4D Scheduling

Engineered Systems Design Facility Management

Who was involved in developing a BIM execution plan (check all that apply)?

No BIM execution plan was developed for this project

Owner GC, CM/GC or DB Structural Contractors

Architect/Designer MEP Contractors Other: _____

To what extent was electronic file and information sharing used by the project team (1=Primarily paper-based, 6=All electronic)?

Paper-based 1 2 3 4 5 6 Electronic

List any lean tools or approaches consistently used by the project team: _____

Evaluate the level of offsite fabrication and modularization used on the project (1=Entirely built onsite, 6=Entirely built offsite):

Onsite 1 2 3 4 5 6 Offsite

Did any prefabricated or modularized system on the project involve multiple trades? Yes No

SECTION 11: LESSONS LEARNED

Rate the overall success of this project (1=Poor, 6=Excellent):

Poor 1 2 3 4 5 6 Excellent

How could this project have been delivered more successfully? _____

Describe any unique features of this project that may have influenced its cost, schedule, quality or sustainability: _____