



SECURING/DEMOLISHING BUILDINGS
MEDFIELD STATE HOSPITAL, MEDFIELD MA

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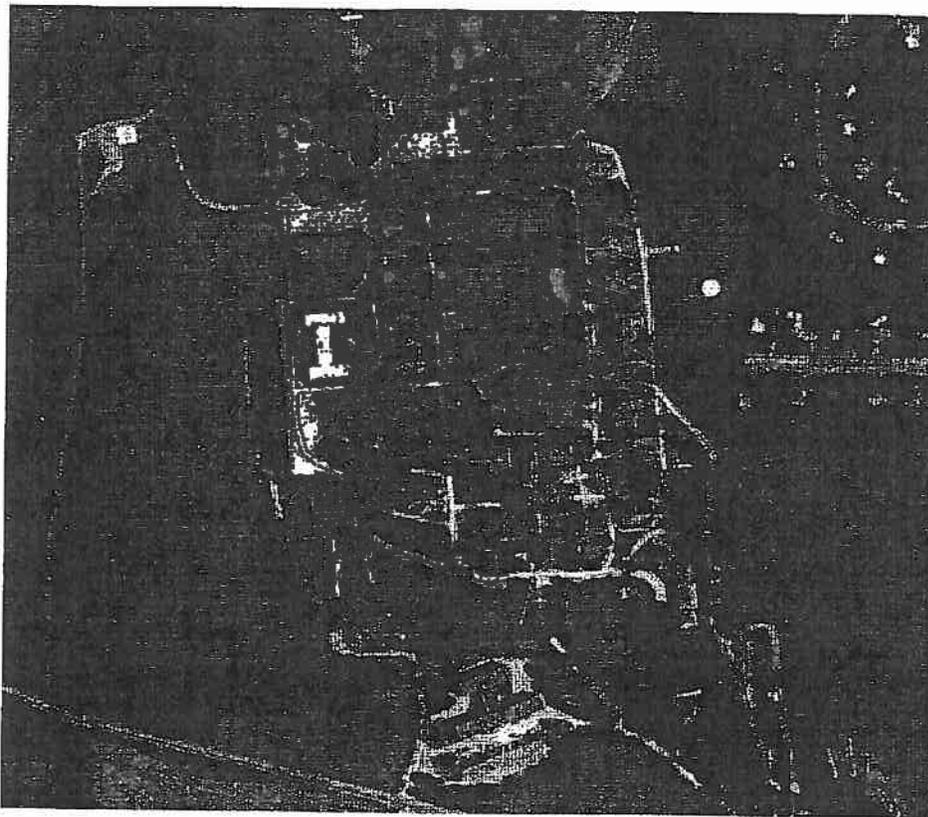
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EXECUTIVE SUMMARY

CDW Consultants, Inc. (CDW) has conducted a preliminary study to evaluate options for the disposition of one (1) building and seven (7) attached porches, and a plan for securing vulnerable points of entry at up to 22 other buildings, on the campus of the former Medfield State Hospital. The results of this study have recommended a program of demolition and securing potential entry points as detailed within this document. The schedule for implementing the recommended program is 30 weeks.

EXISTING CONDITIONS

The Medfield State Hospital (the "*Hospital*") located at 45 Hospital Road, Medfield, Massachusetts ("*Site*"). The Hospital opened in 1896 and has been closed and designated "surplus" since 2003. There are currently several vacant buildings located on the Hospital campus. Prior to the Hospital's closure, the buildings were used for housing residents and staff and for support, administrative and maintenance services. The Medfield State Hospital complex has been designated as a local historic district by the Massachusetts Historical Commission.





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Clark Hospital Building

On May 29, 2009, CDW Consultants, Inc. performed a visual evaluation of the condition of the existing Hospital building with regard to construction materials and building techniques, together with identification of potential unstable areas. The Hospital Building is a four story reinforced concrete column, beam and flat slab structure. The roof is flat and there are two masonry, reinforced concrete and steel elevator machine room penthouses extending above the roof line. The exterior walls are non-load bearing concrete block and brick. There are also interior non load-bearing masonry walls. There is a crawl space beneath the first floor structural slab. The foundation is reinforced concrete walls, piers and footings. There are no active utilities that serve the building.

In 2009 and again in 2011, CDW conducted a survey of existing conditions surrounding the Hospital building, including adjacent roadways, surrounding access drives, and the locations of underground utilities. CDW also reviewed information available regarding the locations, construction methods, and which utilities are active. These, combined with the existing conditions survey, DCAM provided drawings, and the scanned building plans, form the basis for the existing conditions evaluation of the Hospital Building.

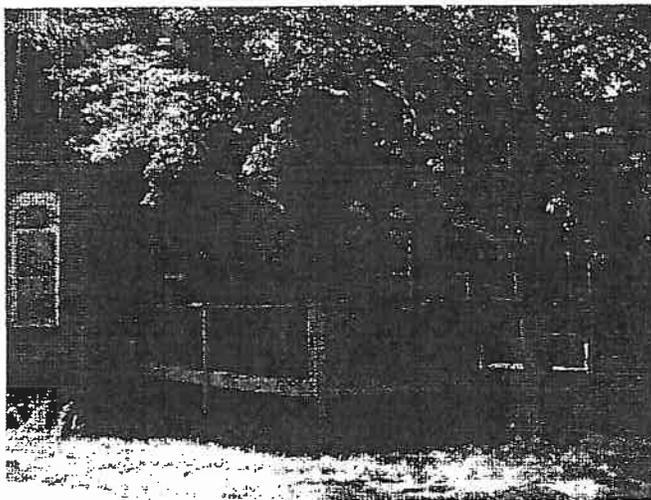
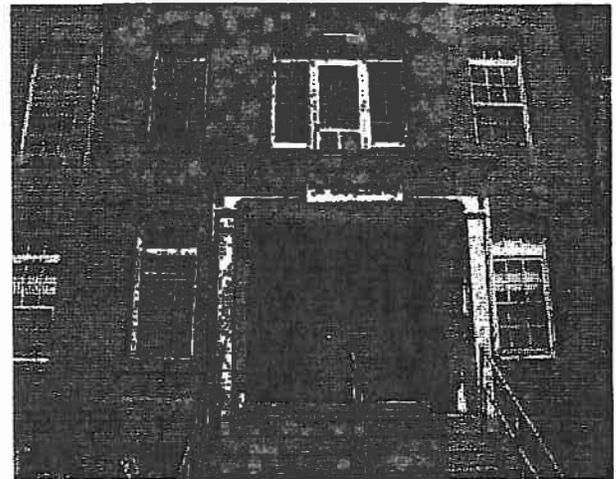




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Ancillary Buildings

In September 2011, CDW conducted a visual survey to identify and observe 22 ancillary buildings on the Medfield State Hospital campus that were unsecured. The number of windows, doors, and other building openings were quantified.

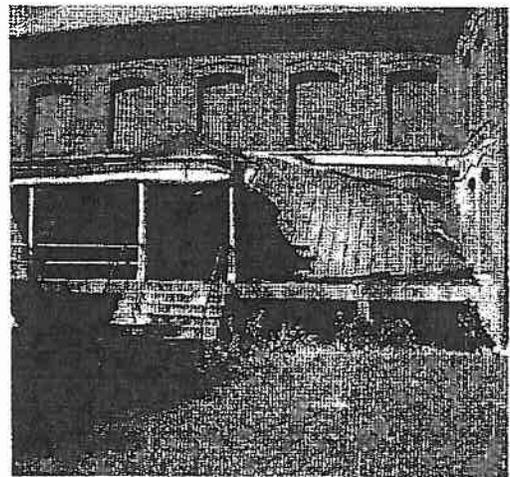
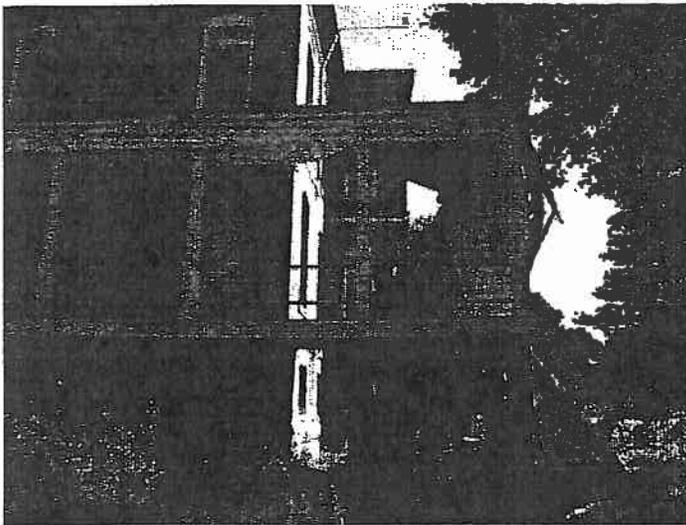
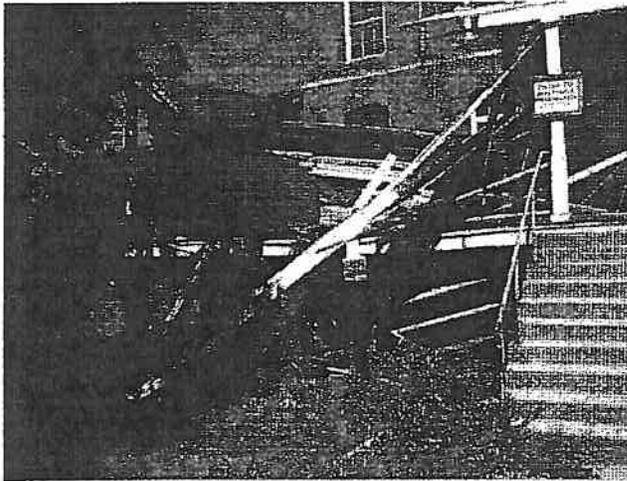




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Wooden Porches

During the course of the survey of ancillary buildings, several wooden porches were also observed in extreme disrepair. These were measured and documented.





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PROGRAM

The project site is open for public recreational access during daylight hours. However, the size of the campus, presence of unsecured and unsafe buildings and structures, and its relatively isolated rural location creates potential safety hazards from trespassers and wildlife.

The Clark Hospital Building does not contribute to the Medfield State Hospital Historic District, and has deteriorated beyond useful repair. A hazardous materials study conducted in 2009 by ATC Associates identified quantities of asbestos that will require abatement. The 22 individual ancillary buildings in the study are unsecured, and allow unsafe access by trespassers and wild animals. The current conditions of wooden attached porches pose an imminent safety hazard and need to be removed for the sake of maintaining public safety.

PROJECT OPTIONS

Project options for the Clark Hospital Building are install security fencing surrounding the building, secure building windows, doors and other openings pending evaluation of re-use options, if any, or demolish the building.

Project options for unsecured openings are to leave them as is, demolish unsecured buildings, or secure the openings pending building re-use evaluations.

Project options for the crumbling wooden porches are to leave them as is (take no action), demolish and remove the porches, or restrict public access to the buildings via fencing.

RECOMMENDED OPTION

The Clark Hospital Building has exceeded its useful life and does not contribute to the Medfield State Hospital Historic District. It is recommended that this building be demolished. The recommended course of action for ancillary buildings is to temporarily secure all openings (windows, doors, hatches, etc.) from access by authorized personnel or wildlife, in accordance with DCAM standards. The imminent public safety hazards from the crumbling porches require that they be demolished and taken off-site.

Demolition Plan/Drawings

Demolition drawings will be prepared from the base drawings obtained from the DCAM and the facility. Drawings will include a Key Plan of all buildings included within the limits of the project, identifying the building to be demolished and the buildings to be secured, a Plan of existing conditions (topography, utilities (including proposed cut and cap locations), and floor plans), a Porch Demolition Plan with photographs and key features, and a final Grading Plan.



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Construction Documents

Project-specific technical specifications will be prepared for the demolition, material management, and site work related items for this project. The potential permits required prior to construction and during construction will be identified during preparation of bid documents. A list of permits and approvals required will be provided in a memorandum, including a schedule for obtaining such permits and approvals.

SUMMARY

The recommended program is the hazardous materials abatement and demolition and surface grade restoration of the Clark Hospital Building, demolition of seven (7) structurally unsafe wooden porches, and the securing of vulnerable building openings on campus.

IMPLEMENTATION SCHEDULE

The estimated schedule for completion of the recommended plan is 30 weeks, as follows:

<u>Project Activity</u>	<u>Time to Complete</u>
- Prepare Construction Documents	4 weeks
- Bidding and Award	6 weeks
- Mobilization and Construction	<u>20 weeks</u>
Total Duration	30 weeks