

HOSPICE

LUCKNOW

**A Thesis Submitted
in Partial Fulfillment for the Requirements
for the Degree of**

BACHELOR OF ARCHITECTURE

in

Field of specialization(ARCHITECTURE)

by

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Under the guidance of

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LUCKNOW

2019-20

CERTIFICATE

I hereby recommend that the thesis entitled “**HOSPICE , LUCKNOW**”, prepared by **Ms. RASHMI DIKSHA** under my supervision, is the bonafide work of the student and can be accepted as a partial fulfillment for the award of Bachelor Degree in Architecture, School of Architecture BBDU, Lucknow.

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Recommendation :

Accepted :

Not Accepted :

EXAMINER 1

EXAMINER 2

ACKNOWLEDGEMENT

The journey which started 5 years ago has culminated....as I step into the world a series of people flash in my memory without whose support and good will this journey wouldn't have been easy and free flowing.....

To start with. First and foremost gratitude towards almighty GOD for his blessings. Then I would like to thank all my faculty and family members who have supported and guided me all these memorable 5 years.

I would like to thank my thesis coordinator **AR. SHAILESH K. YADAV, AR.URVASHI TIWARI**, who left no stone unturned to shape our thesis in the best possible way and also for his untimely help whenever required. Next in list is my thesis guide **AR. ARVIND SINGH** who has been extremely co-operative since the very beginning and who helped me to utilize my skills and creativity to the utmost...

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Last but not the least all friends and love one who give their all kind of support and concern .

I have put in my best of efforts and worked day and night to make this project a success .hope u too will appreciate my endeavor.....

I wish to dedicate this work to my love ones.....Who are always their in my heart.

BABU BANARASI DAS UNIVERSITY, LUCKNOW
CERTIFICATE OF THESIS SUBMISSION FOR EVALUATION

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4. Degree for which the thesis is submitted:...BACHELOR OF ARCHITECTURE.....
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6. Thesis Preparation Guide was referred to for preparing the thesis. YES ☐ NO ☐
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8. The contents of the thesis have been organized based on the guidelines. YES ☐ NO ☐
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INTRODUCTION

HOSPICE...?

- A Hospice is a space for terminally ill patients. It provides medical, psychological and spiritual support to the patients and their families.
- Usually , a hospice patients is expected to live 6 months and less.
- Hospice care take place
 - At home
 - At a hospice center
 - In a skilled nursing facility
- Hospice care is also known as END-OF-LIFE Care.
- The goal of the care is to provide peace, comfort and dignity.



NEED OF TOPIC

Some of the disease, which has less chance to getting cured with advancement of disease. Advance stage patients suffer a lot not just to the progression but also because of poor health due to co-existing disease, pain, side effects of treatment, psychosocial, emotional and financial problems. All these lead to poor quality of life and hence the patients need support to handle these issues. Hospice is an efficient means to overcome these problems to some extent.

“DO NOT COUNT THE DAYS, MAKE THE DAYS COUNT.”

AIM

The aim of the thesis is to design a care facility for terminally ill patients with an atmosphere that caters to their physical and psychosocial needs and puts them at the center of the care program until there last day of life.

OBJECTIVE

- 1.To study different examples of hospice care facilities designed.
- 2.To study needs and experiences of patients and residents in hospices.
- 3.To review literature and previous research pertaining to the topic.
- 4.To understand and interpret the concept of ‘home’ and incorporate the same in the design outcome.

SCOPE

Traditionally medical care has focused on the cure of disease at all costs. Hospice care developed out the dissatisfaction with the way in which medical care failed to deal effectively with the dying. With the development of hospice care services and greater understanding of cure of the dying, there has also been a significant in the last days from focus on “dying well” to “living well until one dies”.

GOALS

- Provides relief from pain and other distressing symptoms.
- Affirms life and regards dying as a normal process.
- Intends neither to hasten nor postpone death.
- Offers a support system to help patients live as actively as possible until death.
- Offers a support system to help the family cope during the patients illness and their own bereavement.
- Uses a team approach to address the needs of patients and their families, including bereavement counseling, if indicated.
- Will enhance quality of life, and may also positively influence the course of illness.
- Is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications.

LIMITATION OF PROJECT

The advantage of the site are also the major factor to be considered while planning since the site is situated in the Uttar Pradesh . It has to be developed in a manner that it can enforce the calmness of mind of the patient who come to the place.

METHODOLOGY

1. Study of demographics, data collection and literature study

- Study of site and analysis of available information.
- Frame objective, scope and limitation of the project.
- Collect all the necessary information of the project and its client. Consultancies and reference shall be taken from time to time to established books of standards like NBC, Neuferts, and time savers.
- Apart from this, a detailed study of the site, it's potential to the root level.
- A demographic study of the surrounding areas is also imperative as it will influence important decisions regarding the usage pattern of the facility and the level of involvement and contact with the adjoining areas.

2. Case studies

- Study the special configuration of buildings.
- Study of the activity and movement inside the site.
- Study of its impact on the city.
- Area program based on the results from case study reviews.
- Comparative analysis between the buildings and relevant justification.

3. Literature study

- Further study on some more similar topics and making a comparison note for all of them emphasizing on the merits and demerits.

4. Framing of requirements and area analysis

- Requirements are framed out and area chart finalized which may be altered as per the design

5. Concept design development

- Literature study, site study and analysis, case study to develop appropriate design language.
- Centralize the same process spaces to maximize the efficiency.
- Develop integrated design solution.

6. Understanding the planning objectives

- Orientation and sitting.
- Floor layouts
- Planning efficiency

7. Design aspects

- Refinement of conceptual design.
- Detailing of project requirements.
- Final design solutions.

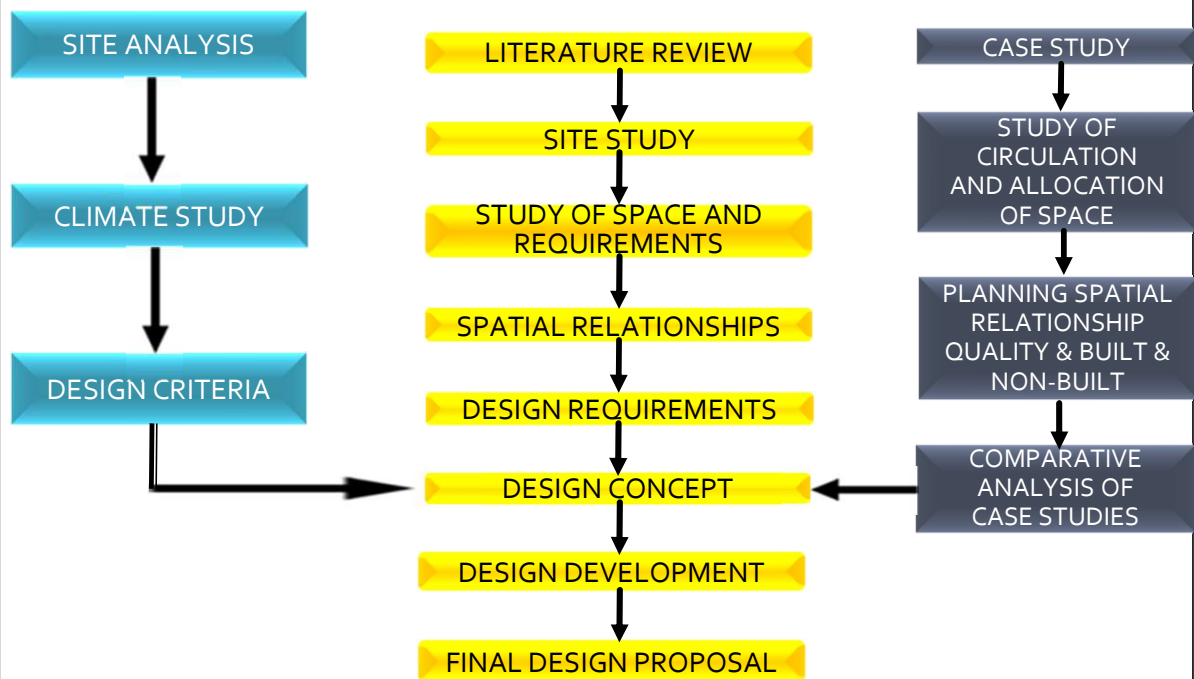


Fig :- Flow Chart Daigram of Methadology

INTRODUCTION

ABOUT CITY

ABOUT THE CITY, LUCKNOW

- Lucknow is the capital and largest city of the Indian State of Uttar Pradesh was historically known as Awadh Region.
- Today, it is the administrative headquarters of Lucknow district and Lucknow division. Fondly known as the “City of Nawabs” or the “City of Tehzeeb”.
- The city has seen a steady increase in population arising from natural growth, the incorporation of Peri Urban Areas in 1980’s and migration.
- The Master Plan 2001 estimated the population at 4.5 million.

GEOGRAPHY AND CLIMATE

COUNTRY-INDIA

STATE-UTTAR PRADESH

DISTRICT-LUCKNOW

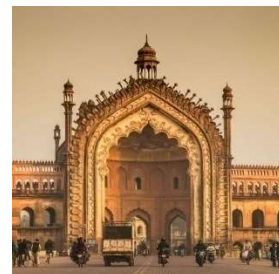
ELEVATION-123 METERS(404 FT.) ABOVE SEA LEVEL

TEMPERATURE-

- SUMMER(APRIL TO JUNE):- MAX.-43C,MIN.-25C
- WINTER(DEC TO FEB):- MAX.-12-25C,MIN.-7-8C
- RAINFALL(MID-JUNE TO MID-SEP):-AN AVERAGE RAINFALL OF 1010 MM(40 IN)(MOSTLY FROM SOUTH-WEST WIND)

POPULATION(2001)-28.2 LAKHS

LANGUAGE-HINDI,URDU AND AWADHI



LINKAGE

•DELHI TO LUCKNOW

BY AIR-(INDIRA GANDHI AIRPORT TO CHAUDRY CHARAN SINGH AIRPORT)(1 HOUR)

BY ROAD-(ANAND VIHAR BUS STAND TO KESHAR BAGH BUS STAND)(526KM)(7 HOURS)

BY RAILWAY-(ANAND VIHAR STATION TO CHARBAGH STATION)(10 HOURS)

•MUMBAI TO LUCKNOW

BY AIR-(MUMBAI MAHARASTRA TO CHAUDRY CHARAN SINGH AIRPORT)(2 HOUR)

BY ROAD-(MUMBAI MAHARASTRA TO KESHAR BAGH BUS STAND)(1376KM)(25 HOURS)

BY RAILWAY-(MUMBAI MAHARASTRA STATION TO CHARBAGH STATION)(24 HOURS)



SITE ANALYSIS

ABOUT SITE

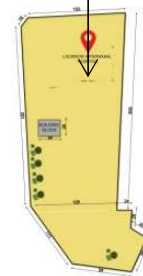
❖SITE DETAILS

- **LOCATION**:BHAISORA ,LUCKNOW,UTTAR PRADESH (226010)
- **SITEAREA**:13.8ACRES
- **SHAPE**-IRREGULAR
- **TOPOGRAPHY**: THE SITE IS GENTLY SLOPE TOWARDS SOUTH SIDE.
- **SITE FEATURES**:SITE IS IN GOMTI NAGAR EXTENSION.
- AND SITE IS ALSO NEAREST TO EKANA CRICKET STADIUM(3.12 KM) AND PANACEA HOSPITAL(2.45KM) .

LUCKNOW



SATELLITE MAP



SITE

NEAREST BUS STAND:

GOMTI NAGAR BUS STAND-9.1 KM



NEAREST RLY.STN :

GOMTI NAGAR STN:- 6.7KM

CHARBHAG RAILWAY STN.- 15.2 KM



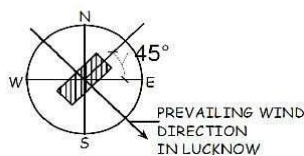
NEAREST AIRPORT :

CHAUDHARY CHARAN SINGH AIRPORT-20.6 KM

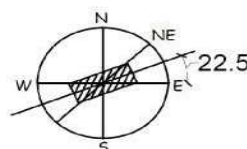


ORIENTATION

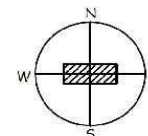
- Orientation on east-west axis.
- Long elevations facing north and south i.e-reduction in exposure to sun.
- Depending on the wind flow,the orientation of the building will be on north east-south west axis.



ORIENTATION FOR WIND



FAVOURABLE ORIENTATION



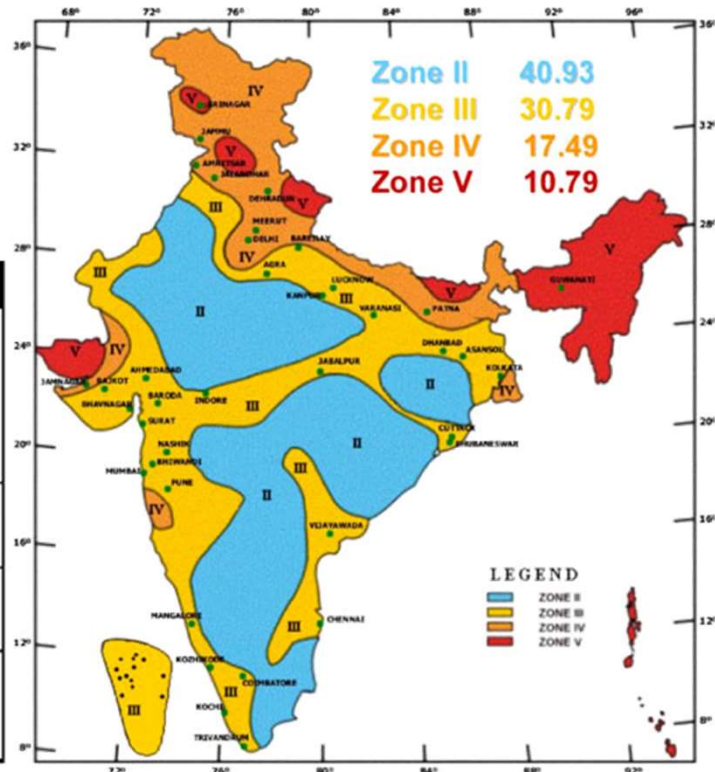
ORIENTATION FOR SUN

SEISMIC ZONE

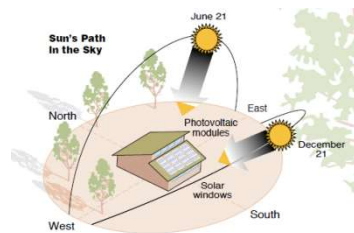
Seismic Zone Map of India: -2002

About 59 percent of the land area of India is liable to seismic hazard damage

Zone	Intensity
Zone V	Very High Risk Zone Area liable to shaking Intensity IX (and above)
Zone IV	High Risk Zone Intensity VIII
Zone III	Moderate Risk Zone Intensity VII
Zone II	Low Risk Zone VI (and lower)



SUN MOVEMENT



NEARBY UTILITIES

NEAREST POLICE STATION
GOMTI NAGAR POLICE STATION
11.6 KM



NEAREST FILLING STATION
INDIAN OIL STATION
(3.4 KM)(17 MIN)



NEAREST HOSPITAL
PANACEA HOSPITAL
(3.6 KM)(10 MIN)



NEAREST ATM
HDFC BANK ATM
3.3 KM(9 MIN)



ON SITE CONDITION

SOIL

- The soil present is coarse sand.
- Bearing Capacity: 120-150 KN/M2.

TOPOGRAPHY

- The site is gently slope towards south side.

VEGETATION:

- The vegetation comprises of grass ,weed, small bushes etc.
- Also there are ashoka and neem trees on site.

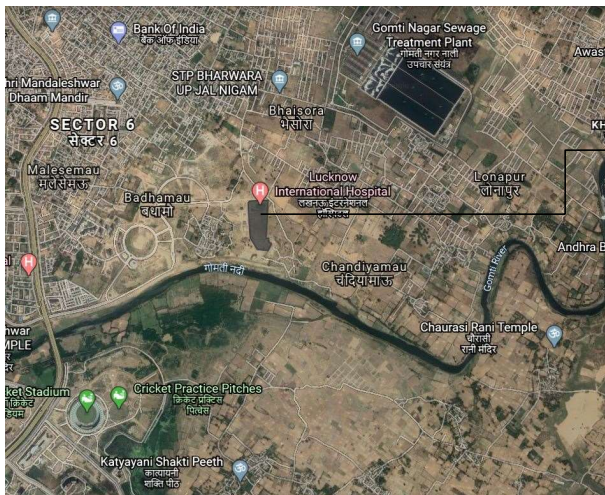
TRAFFIC MOVEMENT

- There is very less traffic movement on site because more of the near by area is just a plain land.

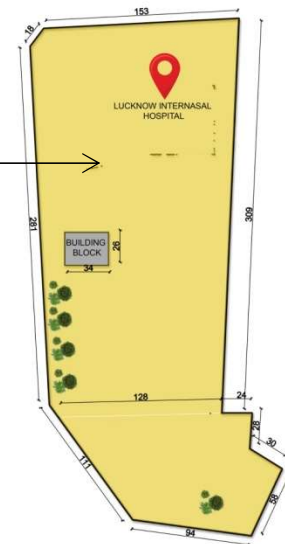
WATER BODIES

- Underground drainage line is present nearby the site whose drainage goes to the Gomti Nagar river.
- Gomti river in monsoon get filled due to rain water.
- Approx 500m Gomti river is situated from site.

SITE DIMENSIONS



SATELLITE MAP

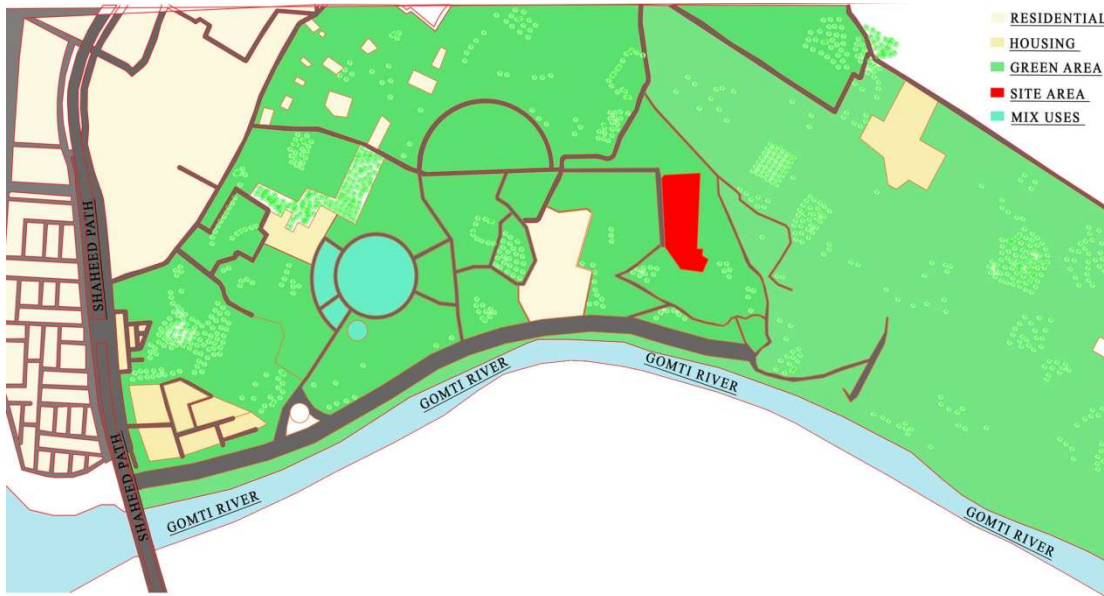


SITE

BYE-LAWS

- F.A.R-1.5
- PLOT AREA-15874.2 SQ.M(13.8 ACRES)
- GROUND COVERAGE-35%
- ACHIEVED BUILT-UP AREA-8437SQ.M
- SET BACKS- 9M FRONT SETBACK
5M REAR SETBACK
5M BACK SETBACK

LAND USE MAP



- The land use map showing that the site lies in the residential zone.
- Most of the site is still vacant and also lots of development proposed adjacent to site.

TOPOGRAPHY

The site surface is mostly flat with a gentle slope towards south direction.

Max. ele.-116M

Min. ele.-114 M

HYDROLOGY

Ground water at approx.150-200ft. Below the ground level, depending upon the different season.

SOIL PROFILE

Soils of the region are of mixed type and there is no strict boundary between different types of soil as lucknow has silty clay loamy soil, silty loam and loamy soil type which is medium texture, and has high moisture and nutrients retaining capacity, soil particles become sticky when wet.



SERVICES

ELECTRICITY

A transformer is located on the edge of 11 KVA which is stepped down to 220V on site.

WATER

Boring has been done on site.

DRAINAGE

Underground drain line is running towards west which terminates into river gomti.

SWOT ANALYSIS

STRENGTH

Site is located near gomti river which will enhance the micro climate of the area which is essential for the proposed project.

WEAKNESS

No interesting view from the site as the surrounding area is for high rise apartments.

OPPORTUNITIES

To create a peaceful and happy atmosphere for the one who is admitted with proper hospitality.

THREAT

All the waste during construction process in site surrounding will be disposed in river gomti which will a major threat in future.

CASE STUDY-1

**BHAKTIVEDANTA HOSPICE AND
HEALTHCARE, VRINDAVAN**



BHAKTI VEDANTA HOSPICE

ABOUT BHAKTI VEDANTA HOSPICE

• Bhaktivedanta Hospice, is situated in the core of Vrindavan, the city of Lord Krishna, near to ISKCON Temple and Prem Mandir on Parikarma Marg. The Hospice offers palliative care services to poor and needy patients in society. The hospice is adjacent to Madan Teer Forests.

• Giriraj Swami project founder and spiritual advisor for Bhaktivedanta Hospice, wanted to focus on the consciousness of people while leaving their body. As a result a **40,000 sq. feet** Hospice structure was built in the holy land of Vrindavan. Here along with medicine, it's the emotional, psychological and personal relationship that helps people to rise above fear associated with death.

• Giriraj Swami was inspired by Archana vigraha Devi Dasi (Aileen Lipkin) to start this project. Her travels to Vrindavan highlighted the need for such facilities.

• Giriraj Swami Says-

“DEATH CAN BE A TERRIFYING, FRIGHTENING JOURNEY INTO THE UNKNOWN. WE WANT TO HELP PEOPLE RISE ABOVE THE GLOOM, DARKNESS AND FEAR ASSOCIATED WITH DEATH”. .

▪ **ADDRESS**-PARIKRAMA MARG, VRINDAVAN, DISTRICT MATHURA, U.P

▪ **SITE AREA**-40,000 SQ.FEET(9.884 ACRES)

▪ **CLIENTS**-SHRI CHAITANYA SEVA TRUST

▪ **HOSPICE STARTS**-IN 2005(IN RENT BUILDING)

▪ **PERIOD OF CONSTRUCTION**-2008

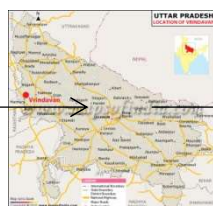
▪ **PROJECT COMPLETION**-26 AUGUST 2010

▪ **ARCHITECT**-S.C KUSHWAHA

▪ **CAPACITY**-30 PATIENTS



APPROACH TO THE SITE



ACCESSIBILITY

- Two 12 M Wide roads on WEST AND SOUTH side (PARIKRAMA MARG)
- Railway station**-Mathura Junction(12.8 km)
- Bus stand**-Mathura Bus Stand(10.8km)
- Airport** –Agra airport(73.5km)



CLIMATE

•The Vrindavan lies on 174m above sea level. The climate here is considered to be a local steppe climate. During the year there is little rainfall. This climate is considered to be Bsh According to the koppen-geiger climate classification. The temperature here average 25.5 °C/ 77.9 °F.(Composite climate)

ABOUT SITE

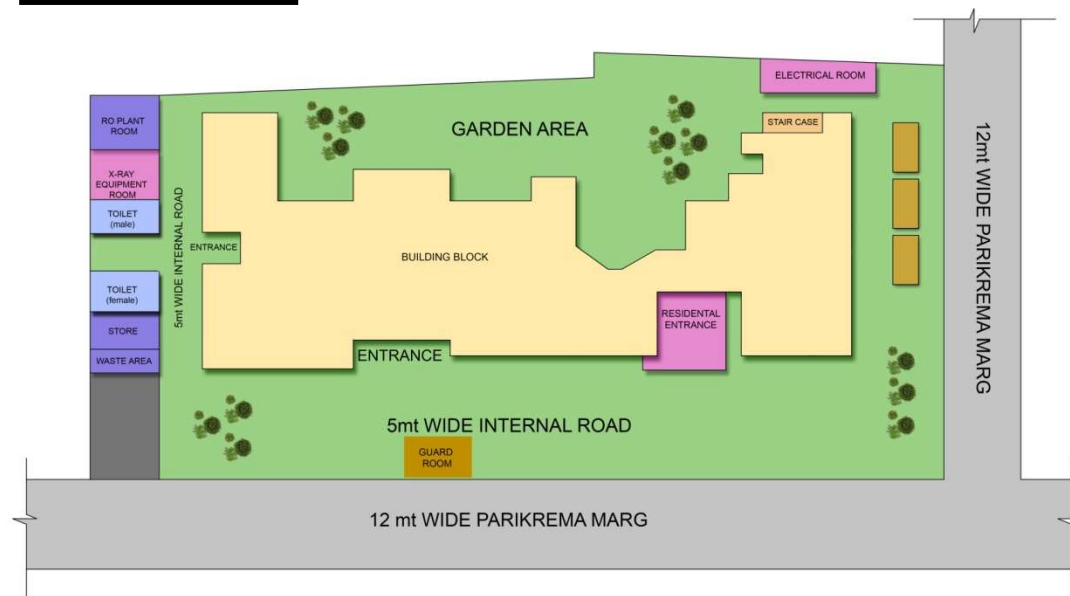
- TOPOGRAPHY**-FLAT AND PLAIN
- SOIL TYPE**-BHANGAR AND KHADIR SOIL
- ORIENTATION**-WEST –SOUTH
- TRAFFIC PATTERN**-NOT AFFECTED BY SURROUNDING TRAFFIC PATTERN AND SOUND

SERVICES PROVIDED

Hospice provides 5 types of care:-

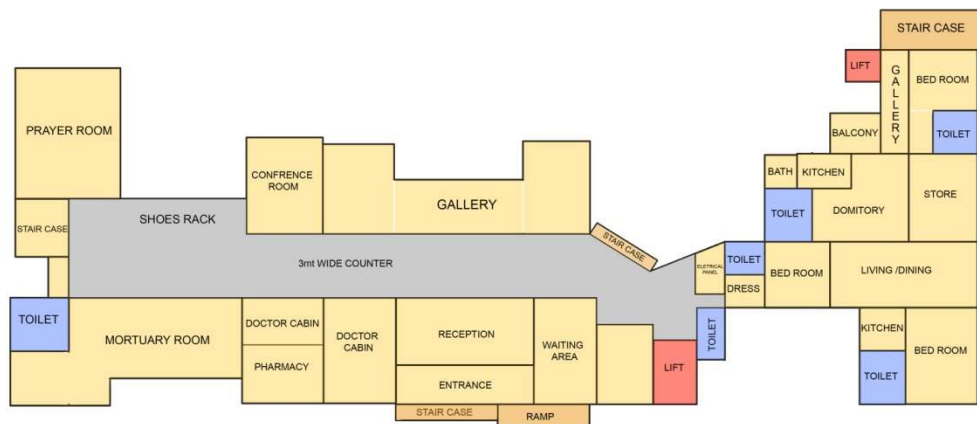
- In-Patient Care**, is when patient gets admitted into the Hospice.
- Home Care**, is offered by the team of medical and para-medical staff at the home of the patient. About 70% of the registered patients get Hospice services at their homes.
- Respite Care**, is when care-takers of the terminally ill patient get exhausted physically, mentally and emotionally. Break for the care taker is provided to rejuvenate themselves up to 15 days.
- End-of-Life Care**, is a very important aspect of Hospice services at the death where spirituality takes the centre stage.
- Bereavement Care**, is spiritual and emotional care offered for the bereaving family and relatives of the deceased patient till 1.5 months after the death of the patient.

SITE PLAN

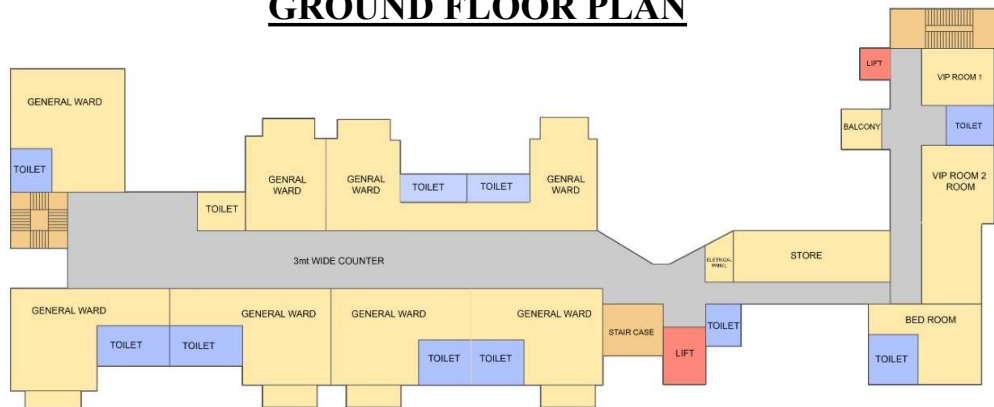


PLANNING

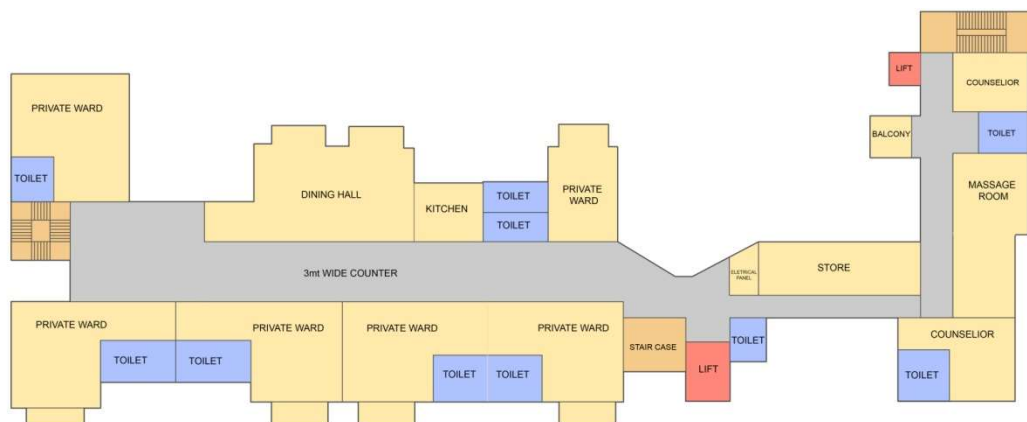
- The shape of the building block is very irregular.
- The admin area is located on the ground floor.
- The display gallery has ample windows to lit the entire reception area.
- Also, the residential area is provided for the devotees or the family members of the patients (Dormitory, single bedroom and double bedroom)
- The prayer hall has mobile temple.
- The pharmacy is accessible from the outside too for the out patients.
- There are 8 triple bedded general wards (36sq.m each) on the first floor with attached toilets and pantry with sufficient daylight through the huge French windows which gives a beautiful view of the garden.
- The floor has one nursing station for all the general wads.
- Also, facilities of water are available on each floor.
- There are 2 VIP areas (one with single bedroom and other double bedroom).
- There are 6 private wards (36sq.m each) on the second floor with attached toilets and pantry with sufficient daylight through the windows and view of the garden. Also there is provision of waiting.
- The floor has one nursing station for all the private wards.
- The dining hall has a capacity of 15 at a time.



GROUND FLOOR PLAN



FIRST FLOOR PLAN



SECOND FLOOR PLAN

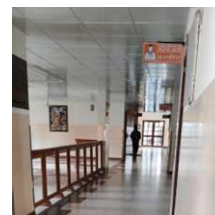
CONSTRUCTION TECHNOLOGY

•Structure-

- i. Frame structure building.

•Flooring-

- i. Tiles in the entrance lobby, admin area, wards, dining area, kitchen, toilets, etc.
- ii. Wooden flooring in the prayer room.
- iii. Granite flooring in the lift lobby.
- False ceiling in corridors and rooms.
- Brick walls with plaster and paint.



SERVICES

- Provision of two lifts(with capacity of 20 and 6 of brand- johnson).
- There are two underground water tanks of capacity 20,000L each. Also, RO water treatment plant is provided on the site.
- The water is supplied by the Uttar Pradesh Jal Nigam.
- Fire fighting provisions are given. There is a fire hose reel in every floor on the corridors.
- Also, emergency fire staircase is provided which is open from three sides.
- There is a main electrical room at the back of the site. Also, one electrical room is provided in each floor.
- For power backup, three generator sets are provided.

MERITS

- Provision of enough windows and openings for ample daylight.
- The view from the rooms is refreshing and peaceful.
- Facilities are provided for bed-ridden patients in the form of mobile temple.
- The hospice is very well facilitated with facilities for patients as well as their families.

DEMERITS

- Wastage of the area in providing extra large rooms for the patients. The private wards and the three bedded general wards have the same area.
- There are no handrails in the bathroom.
- No provision of ramps.
- There is no segregation of wastes.

CASE STUDY-2

SANTI AVEDNA SADAN, DELHI



INTRODUCTION

The Santi Avedna Sadan is India's first hospice, an institute that takes care of the advanced terminally ill cancer patients. It is neither a hospital nor a home, but is in fact both, offering the specialized care of a hospital together with love of a home.

LOGO

•The logo shows a strong hand holding a weak hand to signify support, comfort and consolation in the hour of need, within the flame of love under the roof of the sadan. Santi means peace, Avedna signifies absence of pain and Sadan is home. Santi Avedna Sadan therefore literally means "Peace in the absence of pain home". The logo also has words St. Augustie:- "where there is love, there is no pain" which continues as, "if there is pain, it is a pain that is loved!"



AIM

- To care for the advanced and terminally ill cancer patients and those cancer patients suffering from AIDs also.
- To offer this care to who need it, irrespective of community caste or creed.
- To give preference to the poor and needy.
- To give this care totally free of cost.
- To conduct research for palliation in advanced cancer.



- **ADDRESS-1**, SAFDARJUNG ENCLAVE, FACTORY ROAD, NEAR SAFDARJUNG HOSPITAL, NEW DELHI, DELHI (110029)
- **SITE AREA**-5 ACRES
- **CLIENT**-SANTI AVEDNA SADAN CHARATABLE TRUST
- **HOSPICE STARTS**-25 YEARS AGO
- **CAPACITY**-40 BEDED
- **TOPOGRAPHY**-FLAT AND PLAIN
- **SOIL TYPE**-BHANGAR AND KHADIR SOIL
- **ORIENTATION**-WEST –SOUTH
- **TRAFFIC PATTERN**-NOT AFFECTED BY SURROUNDING TRAFFIC PATTERN AND SOUND

APPROACH TO THE SITE



INDIA



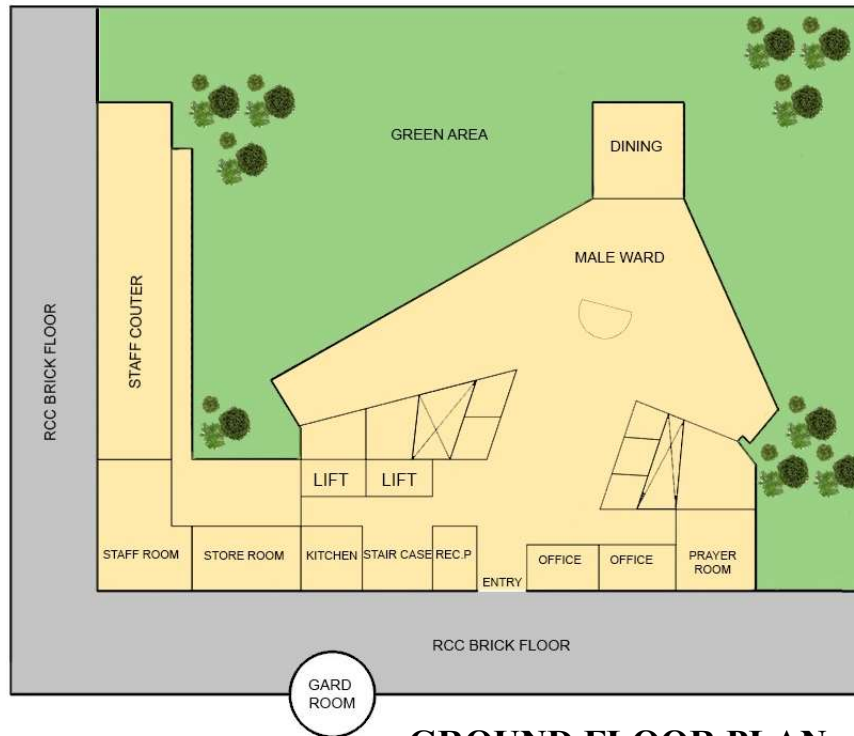
DELHI



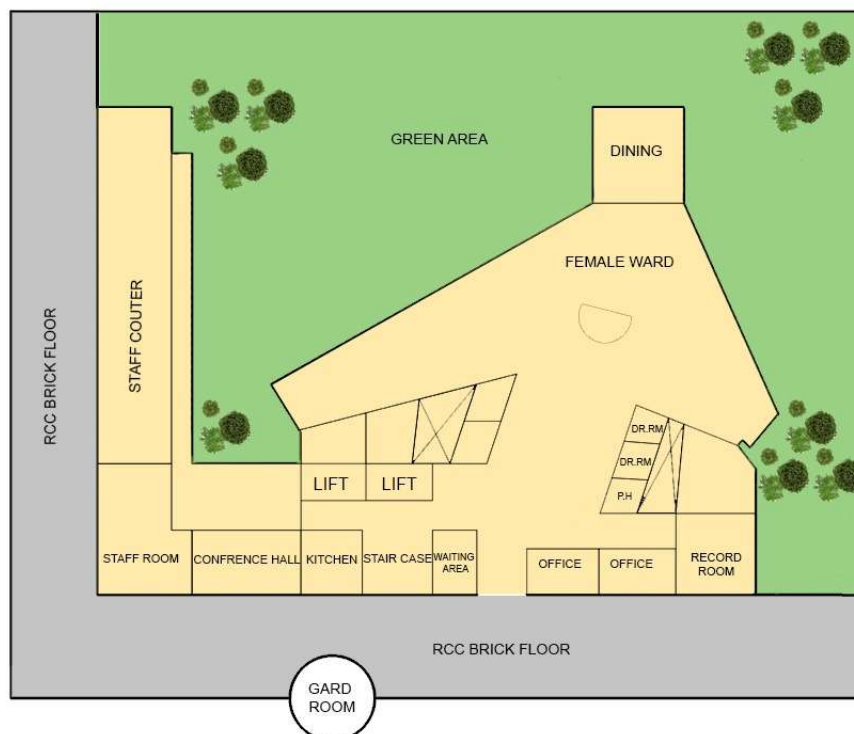
HOSPICE



SATELLITE MAP



GROUND FLOOR PLAN



FIRST FLOOR PLAN



PLANNING

- The shape of the building block is very irregular
- The admin area is located on the ground floor.
- There is player room.
- There are male ward on ground floor and female ward on first floor.
- The floor has one nursing station for all the patients.
- There is provision of waiting area.
- The dinning hall and TV room for patients.
- There are 2 lifts and no ramp.
- There is one conference room of capacity 70.
- There is one record room.
- There are staff counters for staff of the hospice.



FACILITIES IN HOSPICE

- ENTRANCE
- LOBBY/RECEPTION/WAITING AREA
- DOCTOR CABIN-2
- ADMINISTRATION ROOM
- CONFERENCE ROOM
- PLAYER ROOM
- WARDS(WITH INDIVIDUAL TOILETS)
- KITCHEN
- STORE ROOM
- GARDEN
- PARKING
- LIFT FOR PATIENTS
- ROOMS FOR STAFF
- KITCHEN





LINKAGE

RAILWAY STATION

ANANDVIHAR RAILWAY STATION-21 KM

AIRPORT

IGI AIRPORT-10.4KM

BUS STAND

S.N BUS DEPORT-1.8KM



CLIMATE

•In New Delhi , the capital of India, the climate is subtropical, with a very mild and sunny winter, a very hot season from mid-march to mid- june (before the mansoon), and muggy and rainy due to the mansoon. Here are the average temperature

SERVICES

❖WATER SUPPLY

•There are terrace water tank of capacity 20,000L .

❖ELECTRICITY SUPPLY

- There is a main electrical room at the back of the site.
- Also ,one electrical room is provided in each floor.
- For power backup, two generators sets are provided.

❖AIR-CONDITIONING

•Split and window A.C are provided in doctors rooms, admintration room, conference room, private wards.

❖FIRE PREVENTION

- Fire fighting provisions are given.
- There is fire hose reel in every floor on the corridors.
- Also, emergency fire staircase is provided.

❖OTHER SERVICES

- There is a ramp for patients(1:10)
- 24X7 kirtan with audio system
- Provision of lift(stretcher lift)(only for patients)

❖LANDSCAPE

- Small garden in the backyard.
- Vegetation –seasonal flowers,neem,ashoka, banana, papaya, palm trees,etc

•**❖DRAINAGE**-covered drainage carrying waste water.





CONSTRUCTION TECHNOLOGY

•STRUCTURE

- Frame structure building

❖MATERIAL FINISHES

•FLOORING:-

- Tiles in the entrance lobby, admin area, wards, dinning area, kitchen, toilet, etc.
- Cemented flooring outside the building
- Brick walls with plaster and paint.

MERITS

- Provision of enough windows and opening for ample daylight.
- Facilities are provided for bed-ridden patients.
- The hospice is very well facilitated with facilities for patients as well as their families.

DEMERITS

- Wastage of the area in providing extra large room for the patients.
- Surrounding is too much noisy.
- There are no handrail in the bathroom.
- No ambulance in hospice.



LITERATURE
STUDY-1
KARUNASHRAYA,BANGLORE



INTRODUCTION

- The Bangalore hospice trust Karunashraya meaning an “abode of compassion” ,was formed as a registered charitable trust by the Indian cancer society (Karnataka chapter) and rotary club of Bangalore Indiranagar to provide free professional palliative care for advance stage cancer patients who are belong cure.
- This organization offer patients the flexibility of alternating between the hospice and their home, they help patients live without pain and in dignity and peace offering in-patients care since 1999 and home care since 1995



•LOCATION-

BENGALORE,KARNATAKA

•CAPACITY-55

•SITE AREA-5 ACRES

•ARCHITECT-SANJAY MOHE

•CLIENT-BANGALORE HOSPICE TRUST

•PERIOD OF CONSTRUCTION-1999

•NEAR BY BUILDING-ASHITHA HOSPITAL,SHANKAR EYE HOSPITAL.



ARCHITECT SANJAY MOHE...

□ABOUT SITE

•TOPOGRAPHY-FLAT AND PLAIN

•SOIL TYPE-RED LOAMY AND LATERITE SOIL

•ORIENTATION-NORTH SOUTH

•WATER TABLE-1.77 TO 12.02 mbgl

•VEGETATION-DENSE EVER GREEN TREES IN ENTRANCE AND EDGES TO CUT EXTERNAL SOUND. FLOWING PLANTS,SHRUBS, AND GRASS LAWNS,IN INTERIOR AND PATIENT ACCESS SPACE.

•TRAFFIC PATTERN-NOT AFFECTED BY SURROUNDING TRAFFIC PATTERN AND SOUND.

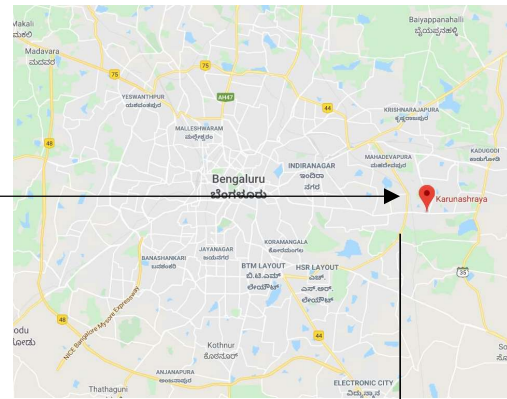
•LOCAL CLIMATE-TROPICAL CLIMATE



APPROCH TO THE SITE



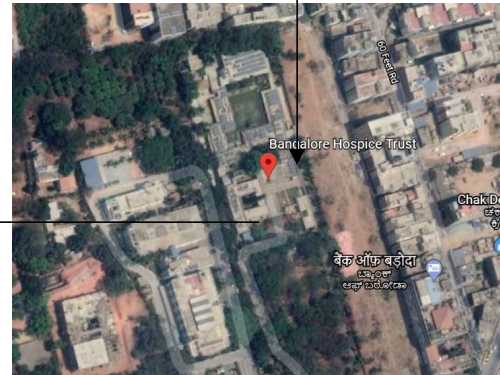
INDIA



BANGALURU



HOSPICE



SATELLITE MAP

CLIMATE

Bangalore has a tropical savanna climate with distinct wet and dry seasons. Due to its high elevation, Bangalore usually enjoys a more moderate climate throughout the year, although occasional heat waves can make summer somewhat uncomfortable.

LINKAGE

RAILWAY STATION

BANGALORE JUNCTION(19 KM)

AIRPORT

BANGALORE AIRPORT(42.9KM)

BUS STAND

WILSON BUS STAND(17.3 KM)



SERVICES PROVIDED

- 55 in-patient service with a future expansion of 85 patients.
- Home care facility.
- Residential Health Assistants Training Programme for adult women from lower economic group who are later employed as health assistants in the hospice.
- Donated good if cannot be used, are sold at a shop or through charity sales to support needs of the poor.

SITE PLAN AND ORINTATION

- Clustered organization relies on physical proximity to relate its spaces to one another.
- Often consists of repetitive , cellular spaces having similar functions & share a common visual trait such as a shape or orientation.

Study of Open Spaces :

- Open Spaces are merged with whole composition.
- Activities surrounding focused with the open space in between with a water body and courtyards.
- Open Spaces are providing an experience of pleasant stay, mental & physical relief to the user & also a place for gathering.





KARUNASHRAYA
When cure is no longer an option...



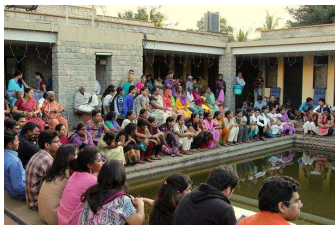
SOUTH ELEVATION



WEST ELEVATION

PLANNING

- The layout allows flow of activities through various spaces, simple and clearly demarcated layout and incorporates nature in and around the buildings.
- Staircases and ramps are used for vertical circulation. However, these are not in use by the patients due to the ongoing construction.
- The **verandah** runs all along the **water body** which is centralized between the wards. The slab placed keeps off the breeding of mosquitos. Bushy trees all around acts as a good buffer, from the noisy surroundings.
- Seating area faces the fountain and the 3 sides of the mediation.
- The **space for prayer** is placed outside the main building block to keep religion out of the hospice. It supports and equalises all religions.



GENERAL PATIENT WARDS- (125sq.m each)

• There are four 12-bedded wards:

1. Malliage
2. Kamala
3. Samige
4. Shaivantige



- Nurse stations are centrally located such that they can keep a check on all the patients. Also, there is a common toilet in each ward (with 2 wash basins, 2 WC's and a bathing area).
- Every patient has a separate door leading to the verandah outside, enabling sufficient amount of light entering inside as well as good cross-ventilation. The doors used are known as the **Dutch Doors**, an opening that work as both door and window.
- In case of death, the body is taken out of the ward through their individual doors without letting their neighbouring patient know about the death and is kept in the morgue.

PRIVATE WARDS- (15sq.m each)

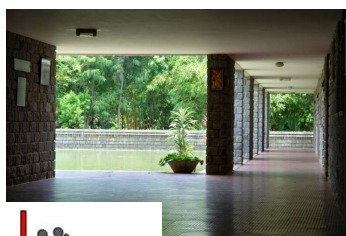
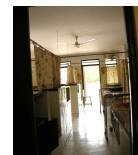
• There are 7 private wards.

• The individual rooms have two doors, one opening to the verandah and another to the closed corridor. It also follows the same concept as of the wards.



MATERIALS FINISHES

- Most of the materials used are natural materials like stone.
- Flooring-Red mud tiles for corridors (anti-skid), ceramic tiles for the patient room.
- Walls-most of the walls are stone walls, internal walls with bricks
- Ceiling-no specified treatment for ceiling
- Furniture-movable



SERVICES

- Solar power is used for electricity along with main grid supply.
- Water from the boreholes is treated and pumped to serve the facility. There is an overhead tank of 20,000L capacity.
- Grating is used for the drainage because it is easily cleaned and maintained.
- Provision of adequate dustbins.Sewarage waste and effluent from the sanitary areas is channelled into a bio-digester with a soak away.
- Segregation of wastes is done.

MERITS

- Planning meets the functional requirements till date with nature as a part of design concept.
- The design meets the patients and user psychology with large open space and scenery.
- Basic requirements of scale proportions and standards of hospice have been achieved.
- Simple form and local materials enhances the theme of hospice.

DEMERITS

- No provision of separate examination rooms for the patients.
- No provision of waiting space in the general wards near the patients.
- No provision of proper fire fighting system.



LITREATURE STUDY-2

INSTITUTE OF PALLITATIVE MEDICINE



Institute Of Palliative Medicine



WHO Collaborating Centre for
Community Participation in
Palliative Care and Long Term Care



IPM, Calicut

ABOUT INSTITUTE OF PALLIATIVE MEDICINE

Institute of Palliative Medicine, the training, research and outreach arm of Pain and Palliative Care Society was designated as World Health Organization Collaborating Center for community participation in Palliative Care and Long Term Care . The Institute was designated as W.H.O collaboration center in October 2010. It is the first institution in the area of Palliative Care in Low and Middle income countries to be designated as WHOCC. Institute of Palliative Medicine is located in Medical College campus, Kozhikode, Kerala, India.

The building was constructed through financial support from W.B.Davis Trust U.K, on a piece of land provided by the Govt. of Kerala. The first patient was admitted on 14th July 2004. The Institute was designated as W.H.O collaboration center in October 2010.

ABOUT PAIN AND PALLIATIVE CARE SOCIETY

Pain and Palliative Care Society(PPCS) is a right based Civil Society Organization for people living with incurable and debilitating illness. Formed in 1993, it is the charitable society for community based palliative care in Low and Middle income countries. PPCS has the distinction of initiating the first community volunteer program and the first home care program for the bedridden patients to its credit.

LOCATION-Calicut, Kerala

SITE AREA-8 Acres

BUILT-UP AREA-3.5 Acres

CAPACITY- 32

ARCHITECT-Benny Kuriakose

PERIOD OF CONSTRUCTION-2002

ACCESSIBILITY-12m, wide road in the front (south of the site)

LOCAL CLIMATE-Tropical Climate





Institute Of Palliative Medicine

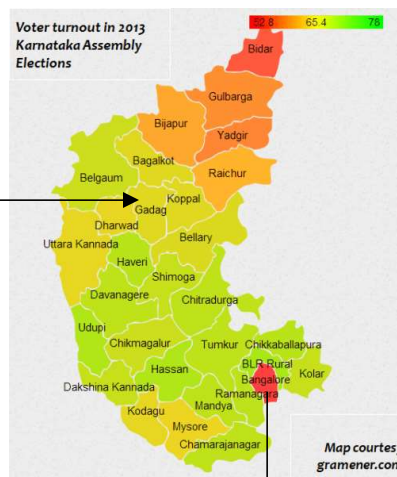


WHO Collaborating Centre for
Community Participation in
Palliative Care and Long Term Care

APPROCH TO THE SITE



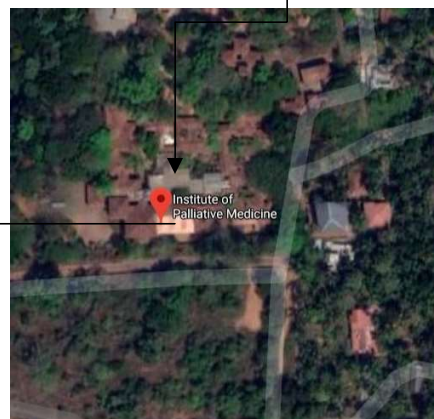
INDIA



CALICUT, KERALA



HOSPICE



SATELLITE MAP

LINKAGE

Railway Station-Kozikhode railway station(8.8km)

Airport-Kochi Airport(174km)

Bus stand-KSRTC Bus Stand(7km)





Institute Of Palliative Medicine



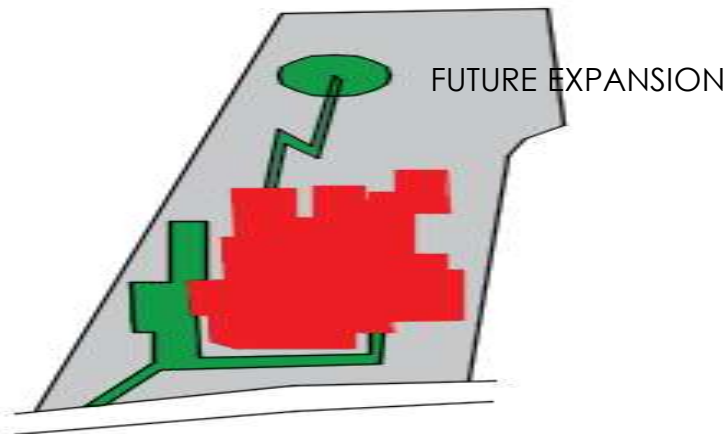
WHO Collaborating Centre for
Community Participation in
Palliative Care and Long Term Care



HOSPICE BLOCK



SERVICE BLOCK



SITE PLAN



DESIGN CONCEPT

- Clustered Planning
- Green Pockets
- Ample Lighting
- Vernacular Architecture

SPACE ANALYSIS

- It is planned in such a way that the serene environment is incorporated in every way as a part of the natural therapy they believe in.
- The interior is very simple and elegant. Furniture alignment inside the wards is made in such a way that the movement in the wards is not affected.





PLANNING

- The plan forms a clustered form with the in-patient wards placed irregularly.
- The landscape pockets are placed carefully in order to maximize natural lighting and ventilation. These pockets also act as buffer zones and helps in cutting out the sound from outside.
- The orientation of the building is east-west. Thus most of the part of the building have induced day lighting and does not require artificial lighting.
- There are individual as well as general wards with toilets.
- The common wards are placed in such a way that each room overlook the courtyard.
- There is a large nursing station in the common area.
- Admin area includes waiting and reception, office, observation room, consultant's room, clinical teaching room in the ground floor. Patient betterment areas includes the landscape pockets, quite room and prayer rooms.

PARKING

- Provision of parking for 18 cars and 9 two wheelers on the site near the entrance.

MATERIAL FINISHES

- Flooring-Ceramic Tiles
- Walls-Brick work and Mortar
- Jali work is used in staircases and landscape pockets



STAFF

- IPM has co-operating and a caring staff of strength of 30.
- A total of 11 doctors, 14 nurses, 5 kitchen staff and 5 service staff make up the total strength.
- Every day some doctors visit the nearby villages to treat the people in need.
- There are courses and trainings available for doctors and nurses.



Institute Of Palliative Medicine



WHO Collaborating Centre for
Community Participation in
Palliative Care and Long Term Care



SERVICES PROVIDED

•Inpatient Facility

There is 32 bedded inpatient facility to take care of those who need admission. Patients are offered admission for relief of symptoms, respite for the family and for terminally care. The ambience of the hospital is set as to give maximum comfort and relaxation to the patients with good ventilation and moving spaces.

•Guest Houses

The three guest houses (one air conditioned and two non air conditioned) can accommodate a total of 40 guests on a twin sharing basis with all basic facilities provided for guests and trainees for a minimum daily rental.

•Santhwana Vanam

‘Santhwanam’ in Malayalam means ‘consolation’ and ‘vanam’ is forest. So many be translated as ‘consolation forest’. It is a space and concept to provide a green and beautiful ambience for our patients who generally suffer with lot of mental and physical stress. With trees and plants and pavements for them to move even in wheelchairs ‘Santhwana Vanam’ is a real relaxation point.

Wild growths, flowers and fruits attract a variety of butterflies and birds adding serenity to the place.

•Sree open air theatre

Amphitheatre used for various entertainment programs for patients especially for those who are suffering from long term bedridden conditions like Paraplegia and their relatives.

•Other offices

We provide space for some like-minded organizations in our institute like ANGELS (a network of ambulance service), KIP(Kozhikode Initiative of Palliative care), NRHM(National Rural Health mission palliative care project), MHAT(Mental Health Action Trust, an initiative providing counselling and treatment for mentally challenged patients at their homes), IAPC(Indian Association of Palliative Care).





SERVICES

- Drainage of the building is connected to the main drain of the Chest Hospital which is nearby.
- Separate way for ambulation is also provided.
- The waste is collected on the daily basis by the Calicut Municipal Corporation (Kozhikode Corporation).
- Electricity is provided by the CMC and there is provision of MCB distribution boards.
- Provision of generator as backup.

MERITS

- The architect has made good use of the existing vegetation making it a serene environment.
- There are ample amount of openings to make it more ventilated and helps in bringing more induced daylight.
- The room layout is planned in such a way that it does not affect the interaction and privacy of the patient.
- Use of locally available materials (Vernacular Architecture).

DEMERITS

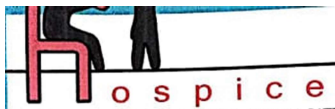
- The nurse station provided is not sufficient.
- The landscape pockets are not maintained properly.
- Toilet lack holding bars.
- No morgue room is provided.
- There is no provision of lifts or ramps.



COMPERATIVE ANALYSIS

S.NO	PARAMETERS	CASE STUDY		LITREATURE STUDY		INFERENCE/ STANDARD
		BHAKTI VEDANTA HOSPICE, VRINDAVA N	SANTI AVEDHNA SADAN,DE LHI	KARUNASHR AYA, BANGALORE	IPM,CALICU T	
1.	SITE AREA	30000 SQ.M		5 ACRES	8 ACRES	-
2.	BUILT-UP AREA	18000 SQ.M		1.5 ACRES	3.5 ACRES	-
3.	FACILITIES PROVIDED					
(a)	IN-PATIENTS(IN NOS.)	30	30	55	32	-
(i)	GENERAL WARD	8X3 PATIENTS (36 SQ.M)	15	12X4 PATIENTS (125 SQ.M)	8X3 PATIENTS (50 SQ.M)	10 SQ.M EACH
(ii)	PRIVATE WARD	6 PATIENTS (36 SQ.M)	-	7 PATIENTS (15 SQ.M)	8 PATIENTS (21 SQ.M)	15-18 SQ.M
(b)	OUT-PATIENT	AVAILABLE	AVAILABL E	-	AVAILABLE	-
(c)	DAY CARE	-	-	-	AVAILABLE	-
(d)	TRAINING PROGRAMMES	-	-	AVAILABLE	AVAILABLE	-
(e)	FAMILY ACCOMMODATION	SINGLE,DOU BLE AND DORMITORY	-	SINGLE AND DOUBLE BEDROOMS	8 SET OF TWO ROOMS WITH ATTACHED TOILETS	SHOULD BE PROVIDED
4.	PLANNING CONCEPT	IRREGULAR PLAN WITH NO ACCOMMOD ATION OF WATER BODIES AND OPEN SPACES.	IRREGULA R PLAN WITH NO ACCOMMO DATION OF WATER BODIES AND	FOCUS ON THE CIRCULATION AND VIEWS FROM THE ROOMS WITH WARDS PLACED AROUND THE WATER BODY	CLUSTERED PLANNING WITH OPEN SPACES BUT NO WATER BODY	PLANNING SHOULD BE DONE SUCH THAT THERE IS PROPER CIRCULATION AND PEACE IS ATTAINED IN THE WARDS.
5.	CIRCULATION					
(a)	CORRIDOR(WIDTH)	3M	3M	3M	2-3M	2.4M
(b)	STAIRCASE(WIDTH)	1350MM	1500MM	900MM	2000MM	1.5 M (TWO- WAY TRAFFIC)
(c)	FIRE STAIRCASE(WIDTH)	900MM	-	-	1500MM	2000MM
(d)	LIFT	CAPACITY 20 AND 6		-	-	1100X2000MM (13 CAPACITY)
(e)	RAMP	-	-	1.2M WIDE,SLOPE (1:10)	-	2.4M WIDE (1:12)
6.	SERVICES					
(a)	ELECTRIC SUPPLY WITH BACKUP	BACKUP PROVIDED	BACKUP PROVIDED	THROUGH SOLAR PANELS	BACKUP PROVIDED	-
(b)	WATER SUPPLY	UNDERGRO UND TANK AND OVERHEAD TANK	OVERHEA D TANK	OVERHEAD TANK	OVERHEAD TANK	-
(c)	FIRE FIGHTING	HOSE REEL ON EACH FLOOR	-	-	-	SHOULD BE PROVIDED
(d)	PARKING					
(i)	TWO-WHEELER	5	10	8	9	1.5X3M EACH
(ii)	FOUR-WHEELER	10	8	18	18	2.5X5M EACH

CONCEPT



A HOSPICE IS SPACE FOR TERMINALLY ILL PATIENTS. IT PROVIDES MEDICAL, PSYCHOLOGICAL AND SPIRITUAL SUPPORT TO THE PATIENTS AND THEIR FAMILIES. USUALLY, A HOSPICE PATIENTS IS EXPECTED TO LIVE 6 MONTHS AND LESS.

HOSPICE CARE TAKE PLACE

AT HOME

AT A HOSPICE CENTER.

IN A SKILLED NURSING FACILITY.

HOSPICE CARE IS ALSO KNOWN AS END-OF-LIFE CARE.

THE GOAL OF THE CARE IS TO PROVIDE PEACE, COMFORT AND DIGNITY.



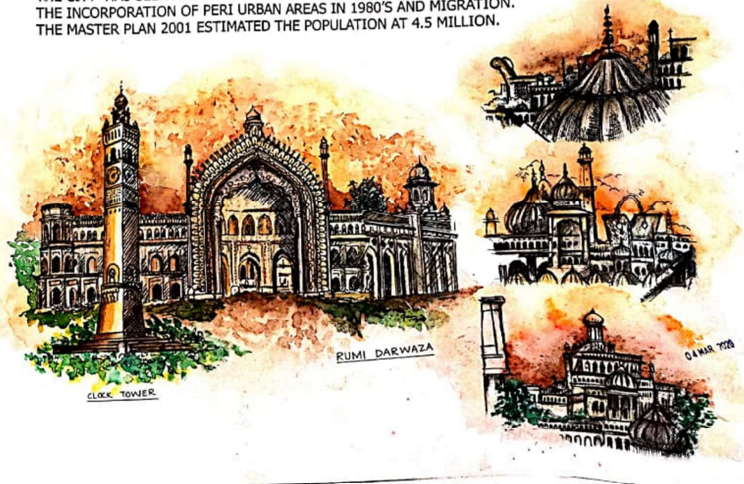
ABOUT PROJECT

THE SITE IS PROPOSED AT GOMTI NAGAR EXTENSION IN LUCKNOW DISTRICT OF (UP) BUILT ON 13.8 ACRE OF LAND.

ABOUT THE CITY

LUCKNOW IS THE CAPITAL AND LARGEST CITY OF THE INDIAN STATE OF UTTAR PRADESH WAS HISTORICALLY KNOWN AS AWADH REGION.

TODAY, IT IS THE ADMINISTRATIVE HEADQUARTERS OF LUCKNOW DISTRICT AND LUCKNOW DIVISION. FONDLY KNOWN AS THE "CITY OF NAWABS" OR THE "CITY OF TEHZEEB", THE CITY HAS SEEN A STEADY INCREASE IN POPULATION ARISING FROM NATURAL GROWTH, THE INCORPORATION OF PERI URBAN AREAS IN 1980'S AND MIGRATION. THE MASTER PLAN 2001 ESTIMATED THE POPULATION AT 4.5 MILLION.



CLIMATE CONDITION

GEOGRAPHY AND CLIMATE

COUNTRY-INDIA

STATE-UTTAR PRADESH

DISTRICT-LUCKNOW

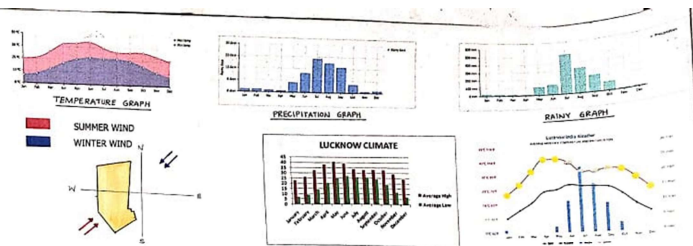
ELEVATION-123 METERS(404 FT.) ABOVE SEA LEVEL

TEMPERATURE-

SUMMER(APRIL TO JUNE):- MAX.-43C, MIN.-25C

WINTER(DEC TO FEB):- MAX.-12-25C, MIN.-7-8C

RAINFALL(MID-JUNE TO MID-SEP):-AN AVERAGE RAINFALL OF 1010 MM(40 IN)(MOSTLY FROM SOUTH-WEST WIND)



LOCATION

ABOUT SITE ... ?

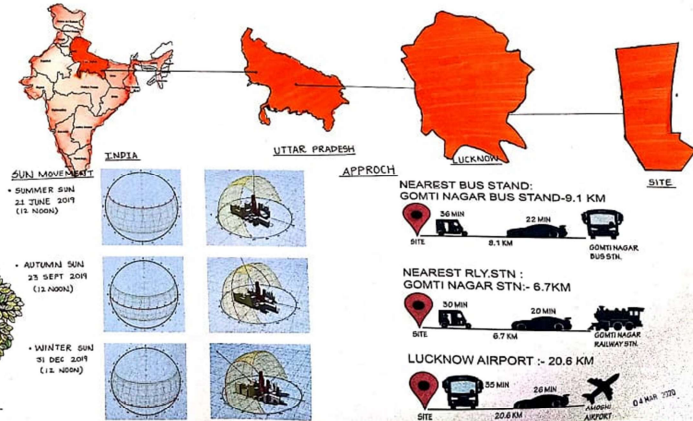
LOCATION:BHAISORA, LUCKNOW, UTTAR PRADESH (226010)

SITE AREA:13.92ACRES

SHAPE-IRREGULAR

TOPOGRAPHY: THE SITE IS GENTLY SLOPE TOWARDS SOUTH SIDE.

SITE FEATURES: SITE IS IN GOMTI NAGAR EXTENSION, AND SITE IS ALSO NEAREST TO EKANA CRICKET STADIUM(3.12 KM) AND PANACEA HOSPITAL(2.45KM). SITE VEGETATION-



CONCEPT:-SYMBOL OF CARE

IN THE CROWD OF DENSE URBAN CIVILIZATION, SOME OF THE ELDER WHO ARE WITHOUT ANY GUARDIANS NEED SPECIAL (CARE) AT THEIR LATE LIFE. ALSO SOME OF THE PATIENTS WHO ARE REFERRD FROM HOSPITALS NEED SPECIAL CARES WHICH ARE NOT POSSIBLE AT HOME. FOR THE REASONS MENTIONED ABOVE, HOSPICE IS INTRODUCED.

Where Life & Death Meets
FORM EVOLUTION

MEDICINE WITH FOCUS ON PAIN AND SYSTEM CONTROL

COUSLING AND SUPPORT TO PATIENTS AND FAMILY

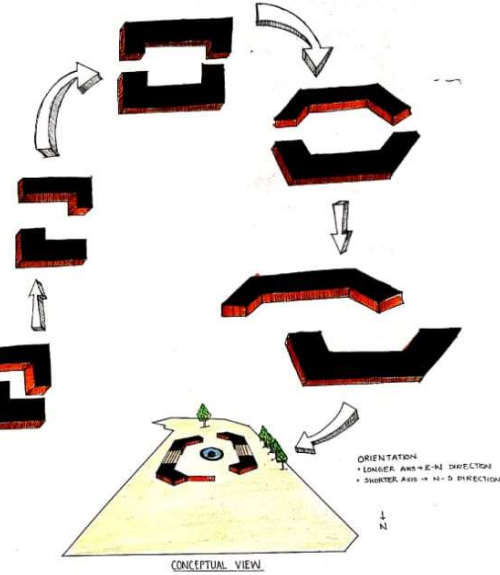
GUIDENCE WITH END-OF-LIFE ISSUES

BREAK FOR CARE GIVERS

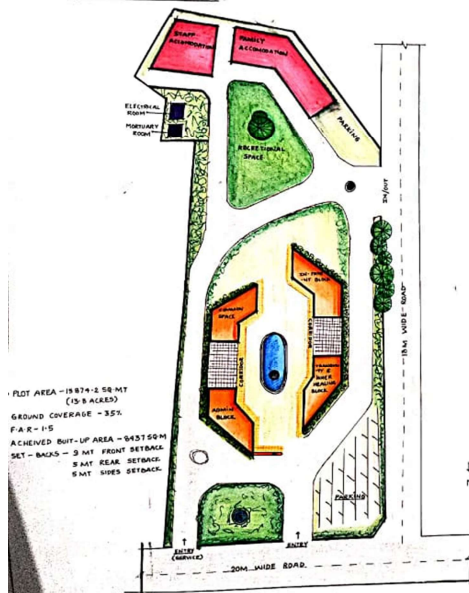
MEDICAL SUPPORT AND EQUIPMENT



CARE



ZONING



HORIZONTAL STACKING



ADMIN BLOCK

- RECEPTION
- LOBBY & WAITING AREA
- DOCTOR'S OFFICE
- CONFERENCE ROOM
- SECRETARY'S OFFICE
- MATRON'S OFFICE
- ADMINISTRATOR'S OFFICE
- STAFF LOUNGE AND DINING
- STAFF TRAINING ROOM
- NURSE STATIONS
- RECORD ROOM
- ACCOUNTANT'S ROOM
- PANTRY
- STORE
- TOILET (MALE)
- TOILET (FEMALE)



COMMON SPACE

- DINING AREA
- KITCHEN AREA
- FAMILY LOUNGE
- COUNSELLING ROOMS
- PRAYER ROOM
- SMALL LIBRARY
- MUSIC ROOM
- LIVING ROOM
- MEDITATION ROOM



IN-PATIENT BLOCK

- GENERAL WARDS
- ADVANCE STAGE PATIENTS PODS
- SINGLE BEDDED
- DOUBLE BEDDED
- PRIVATE WARDS
- SEMI-PRIVATE WARDS



TRANQUILITY & INNER HEALING BLOCK

- MULTI SENSORY ROOM
- COUNSELLING ROOMS
- THERAPY ROOMS
- DISPENSARY
- PHYSIOTHERAPY ROOM
- QUIET AREA / ROOM

FAMILY ACCOMMODATION

- PATIENT'S BEDROOM
- GUEST BEDROOM
- PATIENT SANITARY
- GUEST SANITARY
- KITCHENETTE
- FAMILY LOUNGE

STAFF ACCOMMODATION

- BEDROOM
- GUEST BEDROOM
- SANITARY
- GUEST SANITARY
- KITCHENETTE
- CHILDREN'S ROOM

ELEMENTS HEALING GARDEN

A GARDEN IN A HEALING SETTING DESIGNED TO MAKE PEOPLE FEEL BETTER. THE GOAL OF A HEALING GARDEN IS TO MAKE PEOPLE FEEL SAFE, LESS STRESSED, MORE COMFORTABLE AND EVEN INVIGORATED. THUS THERE IS THE NEED FOR HEALING GARDEN IN A HOSPICE FACILITY.



THE SLOPE OF A WALK MUST NOT EXCEED 5% OR 1 FOOT OF RISE FOR 20 OF FEET LENGTH.



- THE DESIGN OF HEALING GARDEN
- THE FOLLOWING TAKE ON SPECIAL MEANING IN HEALING ENVIRONMENTS: FUNCTIONALITY, MAINTAINABILITY, ENVIRONMENTALLY SOUND, COST EFFECTIVE AND AESTHETICALLY PLEASING.
- HEALING GARDENS MUST MAINTAIN THE PURPOSE FOR WHICH IT WAS DESIGNED. IT IS IMPERATIVE BECAUSE THE GARDEN NEEDS TO ACCOMMODATE THE LIMITATIONS OF THE USERS OF THE SPACE SUCH AS HIGH IMMOBILITY AND THE FAILURE OF SOME OF THE 5 SENSES.
- IT IS ALSO IMPORTANT THAT THE GARDEN DESIGN BE MAINTAINABLE BOTH FOR PHYSICAL SAFETY AND THERAPEUTIC BENEFITS.

PRINCIPLES OF DESIGNING HEALING GARDEN

THE GUIDING PRINCIPLES FOR DESIGNING AN EFFECTIVE HEALING GARDEN INCLUDE UNITY, SIMPLICITY, BALANCE, SCALE, FOCAL POINTS AND DESIGN PLANTING.



DESIGN GUIDELINES OF HEALING GARDENS

THE DESIGN GUIDELINES PERTAINING TO HEALING GARDENS ARE PATHS AND SURFACES, SPATIAL LAYOUT, TREATMENT OF SURFACES AND CIRCULATION

1. PATH AND SURFACES

- DESIGN 5-FOOT MINIMUM WIDTH AT PATH FOR ONE-WAY TRAFFIC TO ACCOMMODATE THE TURNING RADIUS OF A WHEELCHAIR
- AND 7-FOOT MINIMUM WIDTH FOR 2-WAY WHEELCHAIR TRAFFIC



2. SPATIAL LAYOUT

THE USE OF A GOOD SPATIAL LAYOUT PROVIDES A VARIETY OF SPACES TO ACCOMMODATE DIFFERENT ACTIVITIES AND DIFFERENT LEVELS OF PRIVACY, FROM SPACES THAT ALLOW GROUP ACTIVITIES TO SPACES THAT ALLOW SOLITARY CONTEMPLATION.



HEALING ELEMENTS (1. WATER)

- SOUND OF RUSHING WATER, SIGHT OF FISH IN A POND, REFLECTIONS ACROSS A POOL CAN ALL BE POTENTIALLY POSITIVE, MEMORABLE SENSORY EXPERIENCES.
- PROPER AMOUNT OF HUMIDITY IS IMPORTANT FOR PROPER HEALTH

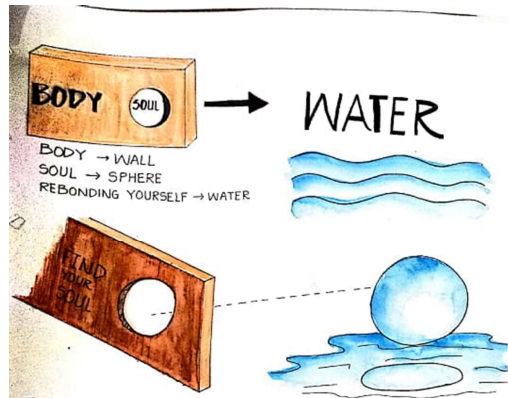
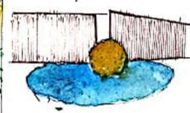
2. (ART)

- ART CAN BE UPLIFTING, THERAPEUTIC AND NON-VERBALLY CONNECT TO THE OCCUPANT, WHEN PROPERLY SELECTED.
- THEY CAN ALSO ACT AS LANDMARKS AND ASSIST IN WAY-FINDING.

3. (SOUND)

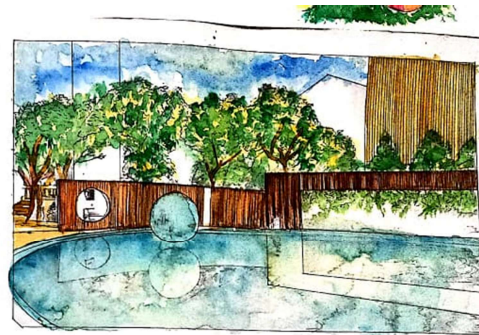
- IN THIS STRESSFUL ENVIRONMENT, MUSIC CAN BE THE GREAT EQUALIZER.
- THE SOOTHING SOUNDS CAN BRING PEACE AND CALMNESS.

- MUSIC CAN HELP DEFUSE THE TENSION FELT BY ANXIOUS PATIENTS AND THEIR FAMILIES.

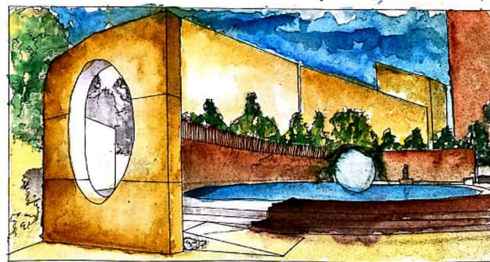


FIND YOUR SOUL WALL

- WHAT IS SOUL?
- WHEN A PATIENT IS ADMITTED AND HE/SHE DOESN'T IS GOING TO BE ALIVE OR NOT.
- THE INNER SOUL OF THAT PERSON IS SO ANXIOUS AND FELL SO DISCOURAGE (DESOLATE)
- BODY OF HUMAN IS SO DESOLATED SOUL WILL BE REBOUND BY THE SELF BULVING IN YOURSELF - WHEN THE SOUL (SPHERE) WILL REFLECT INTO WATER THE PERSON MAY REFORM HIMSELF BY REALISING REFLECTION INTO WORK.



THE SEMI- ENCLOSED OVAL REFLECTING POOL WITH A CONTINUALLU FLOORING WATERFALL FOCUSED ON 'PEACE' AS A STATE OF MIND BY INTERPRETING EQUILIBRIUM CONTEMPLATION AND PROTECTION



CONCEPTUAL VIEW

CONCEPTUAL VIEW



ENTRANCE WITH LANDSCAPE GARDEN



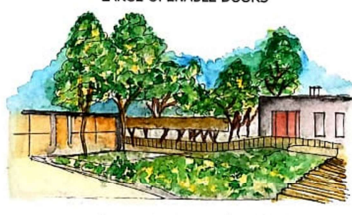
ACCESS TO NATURE THROUGH LARGE OPENABLE DOORS



OUTDOORS SITTING SPACE



ROOMS PATIENTS



OUTDOORS SITTING SPACE



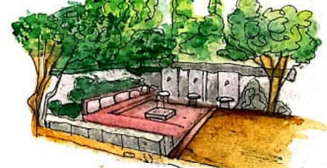
OUTDOORS SITTING SPACE



THERAPEUTIC GARDEN WITH WATER FEATURE

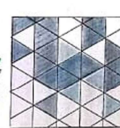
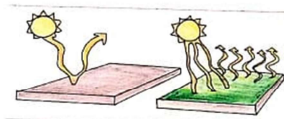


OUTDOORS SITTING SPACE

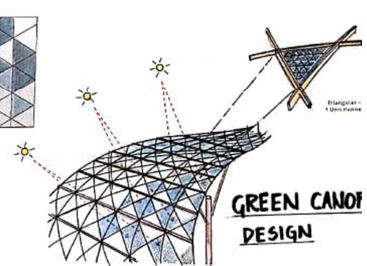


LANDSCAPED GARDEN

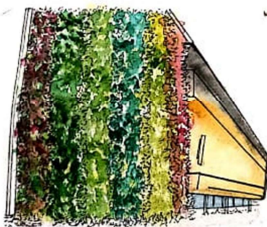
TECHNICAL IMPLICATIONS



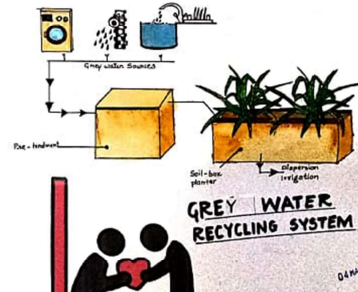
SMART LANDSCAPE : GRASS PAVERS



GREEN CANOPY DESIGN



VERTICAL GARDENING



AREA ANALYSIS

S. NO	FUNCTIONAL AREA	PROPOSED AREAS(FOR 100 PATIENTS)		
		AREAS(SQ. M)	NO.S(SQ.M)	TOTAL AREA(SQ.M)
(I)	ADMIN			
1	RECEPTION	25	1	25
2	LOBBY AND WAITING AREA	30	1	30
3	DOCTOR'S OFFICE	18	4	72
4	CONFERENCE ROOM	20	1	20
5	SECRETARY'S OFFICE	6	1	6
6	MATRON'S OFFICE	10	1	10
7	ADMINSTRATOR'S OFFICE	12	1	12
9	STAFF LOUNGE AND DINNING	30	1	30
10	STAFF TRAINING ROOM	25	1	25
11	NURSES STATIONS	4	1	4
12	RECORD ROOM	9	1	9
13	ACCOUNTANT'S ROOM	12	1	12
14	PANTRY	5	1	5
15	STORE	20	1	20
16	TOILET(MALE)	20(5WC)	1	20
17	TOILET(FEMALE)	20(5WC)	1	20
	TOTAL			332
(II)	TRANQUILLITY AND INNER HEALING			
1	MULTI SENSORY ROOM	30	1	30
2	COUNSELING ROOMS	25	4	100
3	THERAPY ROOMS	12	2	24
4	DISPENSARY	9	1	9
5	PHYSIOTHERAPY ROOM	25	1	25
6	QUIET AREA/ROOM	20	1	20
	TOTAL			208
				40

S.NO	FUNCTIONAL AREA	PROPOSED AREAS(FOR 100 PATIENTS)		
		AREAS(SQ.M)	NO.S(S Q.M)	TOTAL AREA(SQ.M)
(III)	RECREATIONAL SPACE			
1	HEALING GARDENS	-	-	-
2	OUTDOOR CHILDREN'S PLAY AREA	16	1	16
3	WATER FEATURES	-	-	-
4	WALKWAYS	-	-	-
6	BUTTERFLY SANCTUARIES	-	-	-
7	OPEN GYM	-	-	-
	TOTAL			16
(IV)	PARKING			
1	VISTOR'S CAR PARK(1/5 PER BED)	18	20	360
2	STAFF CAR PARK	18	50	900
3	SERVICE YARD	12	1	12
4	DROP-OFF ZONE	36	1	36
(V)	PATIENT SPACE			
1	GENERAL WARDS(48 PERSONS)(1ROOM-4 PERSON)+TOILET	42	12	510
2	ADVANCE STAGE PATIENTS PODS+TOILET(SINGLE BED)	20	4	80
3	(DOUBLE RESIDENCE)(2 PERSON EACH)	32	3	96
4	PRIVATE WARDS(20 BED)	30	20	600
5	SEMI PRIVAE WARDS(22 BED)	32	22	900
	TOTAL			2186
(VI)	COMMON SPACE			
1	DINNING AREA(80 PERSON)	256(3.25 PER PERSON)	1	256
	KITCHEN AREA	60%OF DINNING AREA	1	156
2	FAMILY LOUNGE(100 PERSON)	150(1.5 PER PERSON)	1	150
3	2 COUNSELLING ROOM	18	2	36
4	1 GROUP COUNSELLING ROOM	30	1	30
5	PRAYER ROOM	30	1	30
6	SMALL LIBRARY/READING ROOM	100	1	100
7	MUSIC ROOM	45	1	45
8	LIVING ROOM	100	1	100
				41

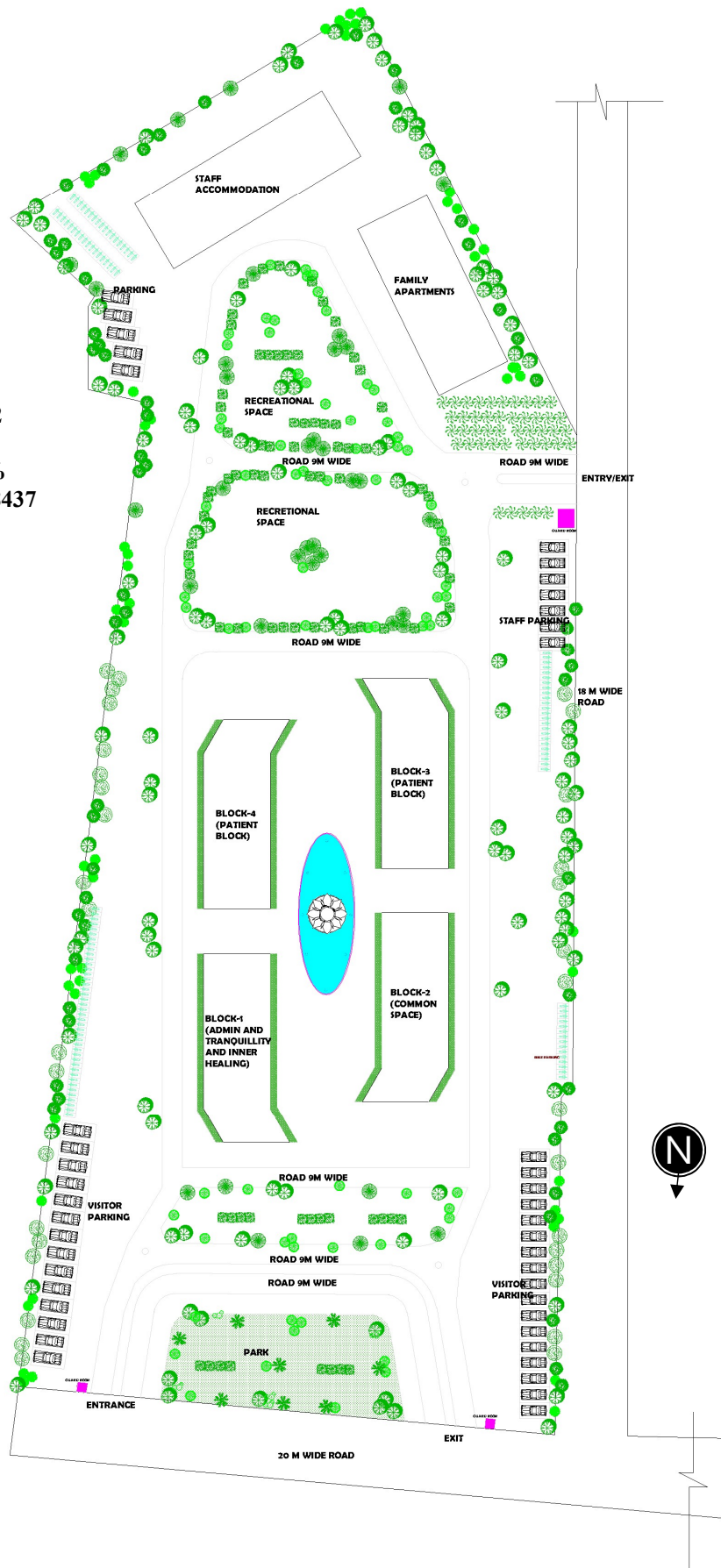
S.N O	FUNCTIONAL AREA	PROPOSED AREAS(FOR 100 PATIENTS)		
		AREAS(SQ.M)	NO.S(SQ.M)	TOTAL AREA(SQ.M)
9	MEDITATION ROOM	100	1	100
	TOTAL			1003
(VI)	FAMILY APARTMENTS(24)			
1	PATIENTS BEDROOM	12	1	12
2	GUEST BEDROOM	16	1	16
3	PATIENTS SANITARY	5	1	5
4	GUEST SANITARY	3	1	3
5	KITCHENETTE	16	1	16
6	FAMILY LOUNGE	4	1	4
				56
	TOTAL		24X56	1344
(VII)	STAFF ACCOMMODATION(15)			
1	BEDROOM	12	1	12
2	GUEST BEDROOM	9	1	9
3	SANITARY	5	1	5
4	GUEST SANITARY	6	1	6
5	KITCHENETTE	4	1	4
6	CHILDREN'S ROOM	10	1	10
				46
	TOTAL		15X46	690

S.N O	FUNCTIONAL AREA	PROPOSED AREAS(FOR 100 PATIENTS)		
		AREAS(SQ.M)	NO.S(SQ.M)	TOTAL AREA(SQ.M)
(VI II)	ANCILLIARY SPACES			
1	RECEPTION GIFT SHOP	10	1	10
2	SALOON	8	1	8
3	GENERAL LIVING AREA	30	1	30
4	GENERAL DINNING AREA	25	1	25
5	GAMES/HOBBY AREA	25	1	25
	TOTAL			98
(IX)	SERVICES			
1	LAUNDRY	16	1	16
2	CLEAN AREA	4	1	4
3	DIRTY AREA	4	1	4
4	CORPSE/DEPARTURE LOUNGE	20	1	20
5	STORE ROOMS	6	1	6
6	KITCHEN	30	1	30
7	JANITOR'S ROOM	9	1	9
8	GENERATOR/PLANT ROOM	12	1	12
9	SLUICE ROOM	16	1	16
10	WASTE DISPOSAL AREA	3	1	3
11	WATER TANKS	5	1	5
12	MORTUARY ROOM	25	1	25
	TOTAL			150
		TOTAL AREA		6027
		CIRCULATION(40%)		2410
		TOTAL AREA ACHIEVED		8437

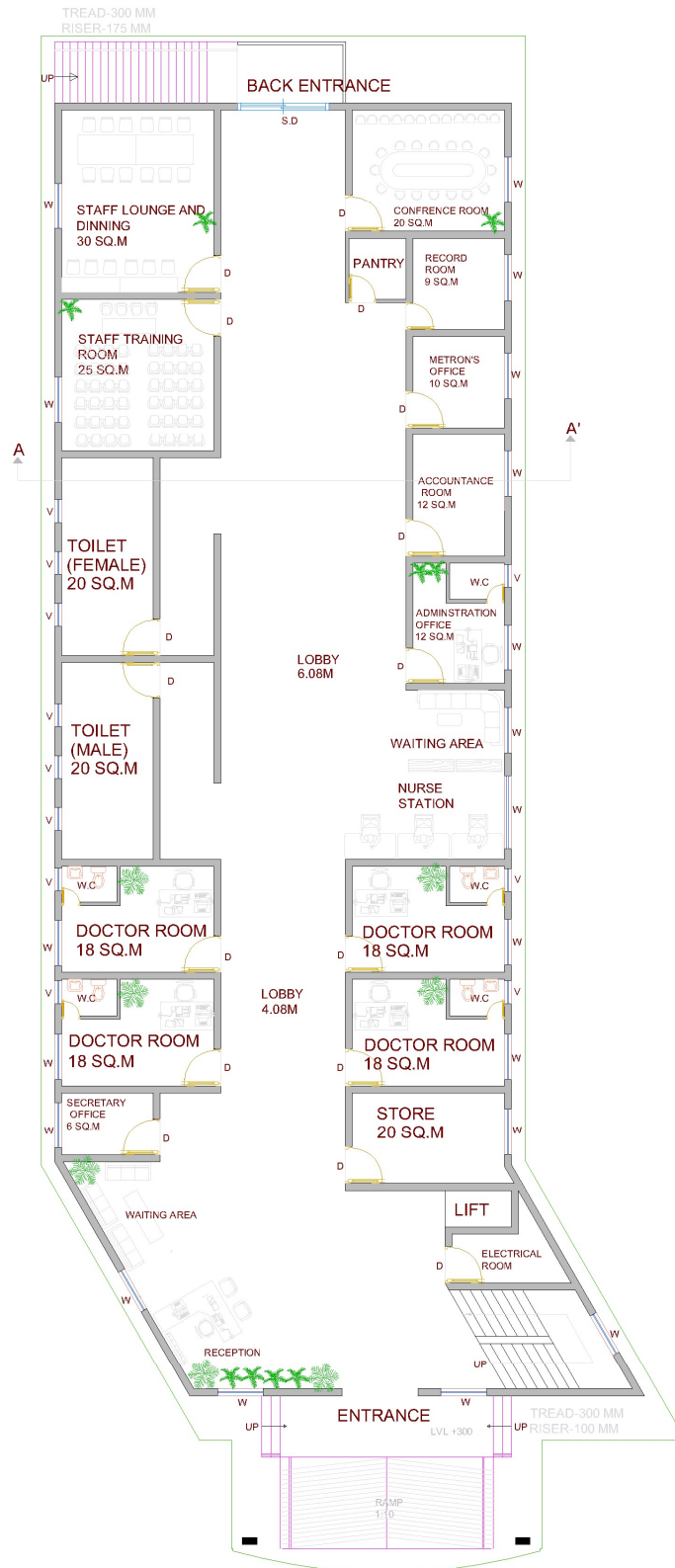
DRAWINGS

SITE PLAN

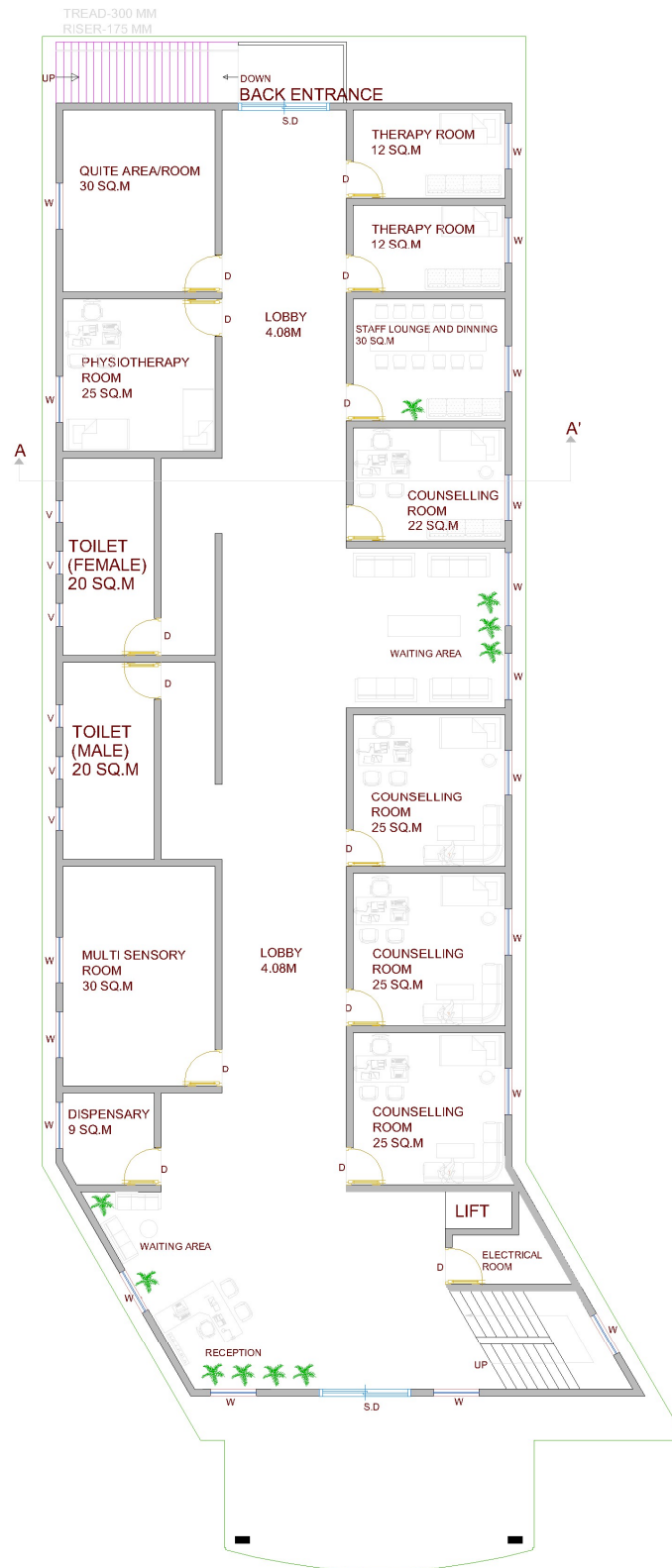
- PLOT AREA-15874.2 SQ.M(13.8 ACRES)
- CIRCULATION-40%
- TOTAL BUILT-UP-8437
- F.A.R-1.5
- SET BACK
FRONT-9M
SIDES-6M
REAR-6M



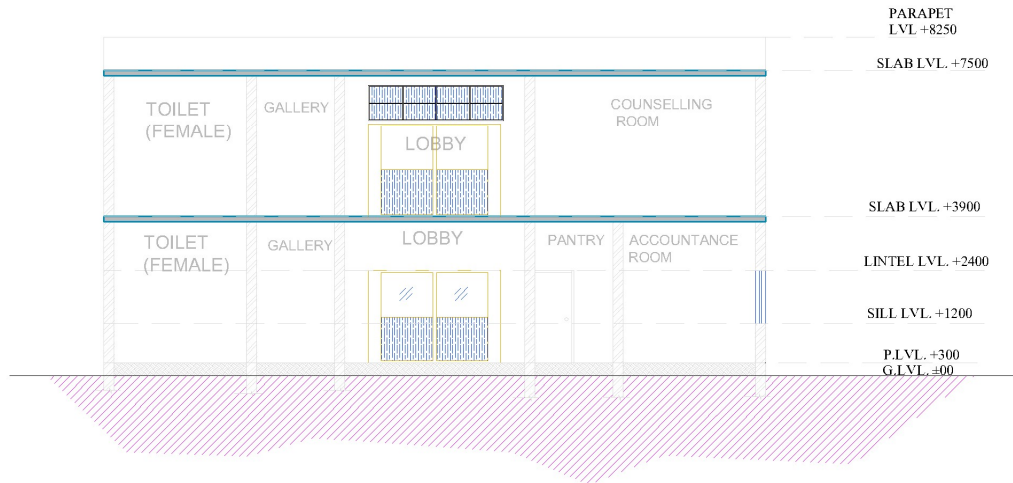
ADMIN AND TRANQUILITY AND INNER HEALING BLOCK (BLOCK-1)



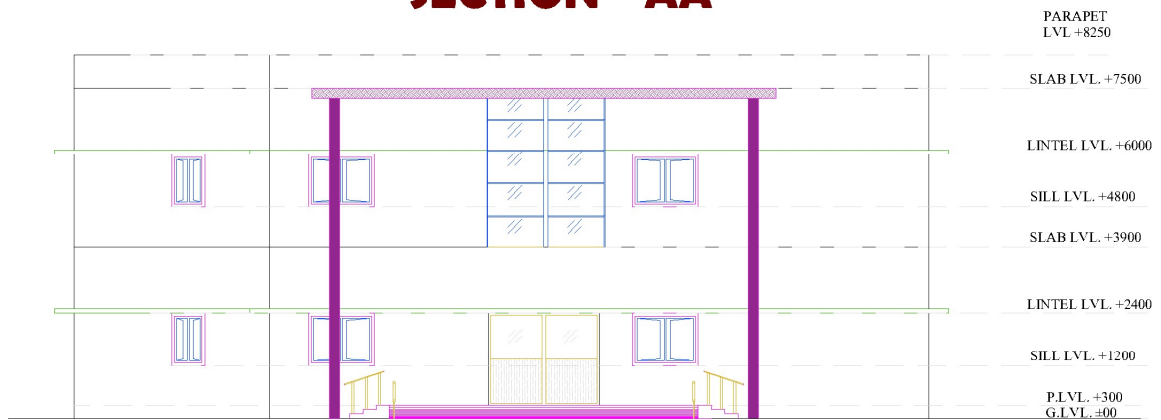
ADMIN AND TRANQUILITY AND INNER HEALING BLOCK (BLOCK-1)



ADMIN AND TRANQUILITY AND INNER HEALING BLOCK (BLOCK-1)

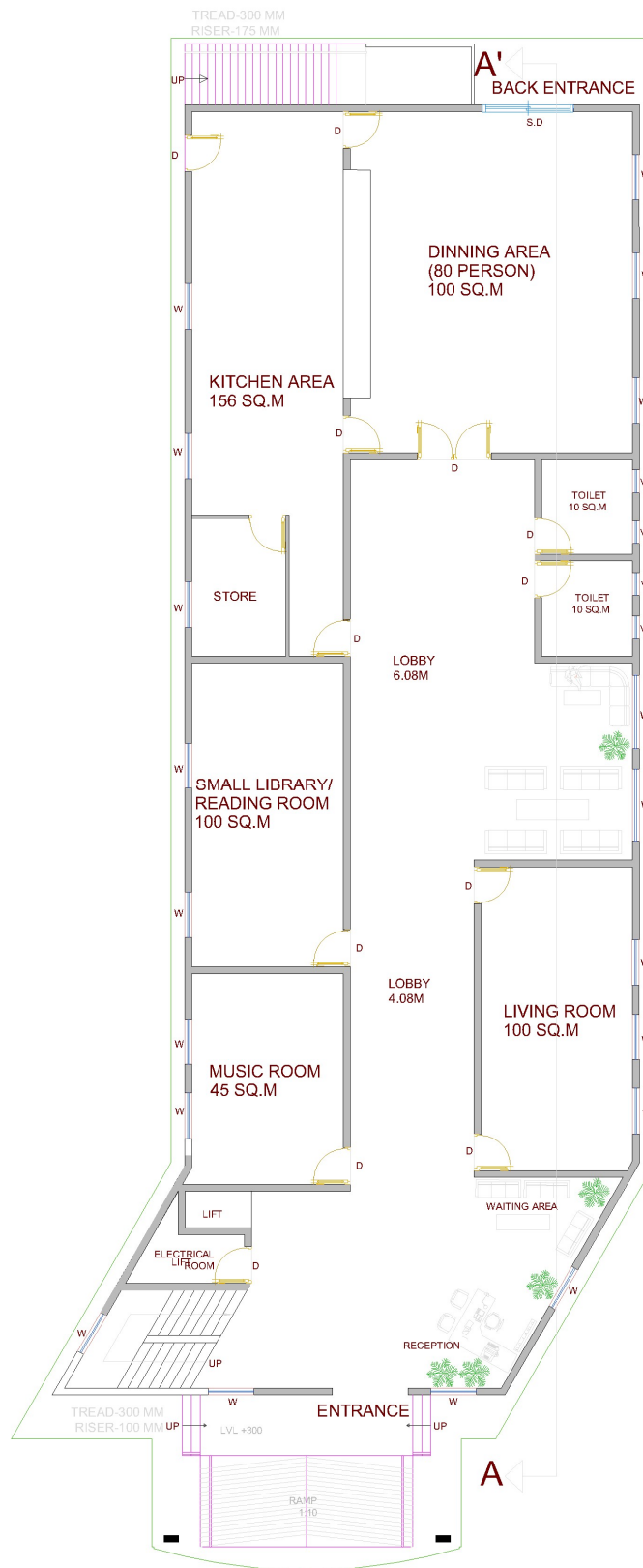


SECTION - AA'



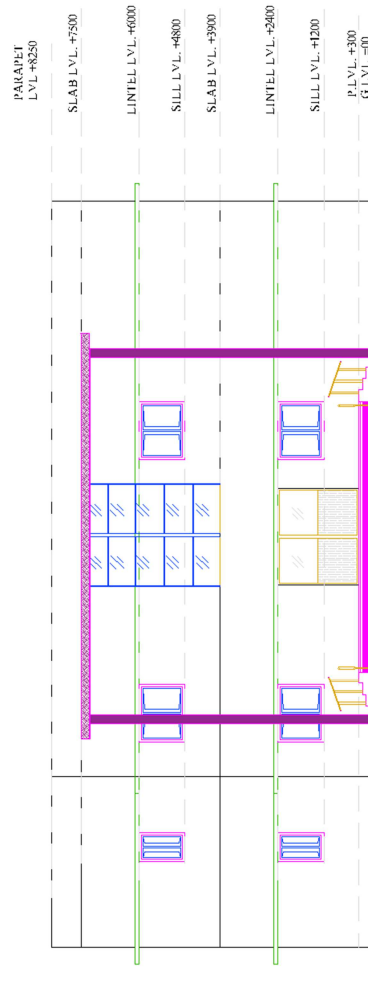
ELEVATION

COMMON SPACE **(BLOCK-2)**

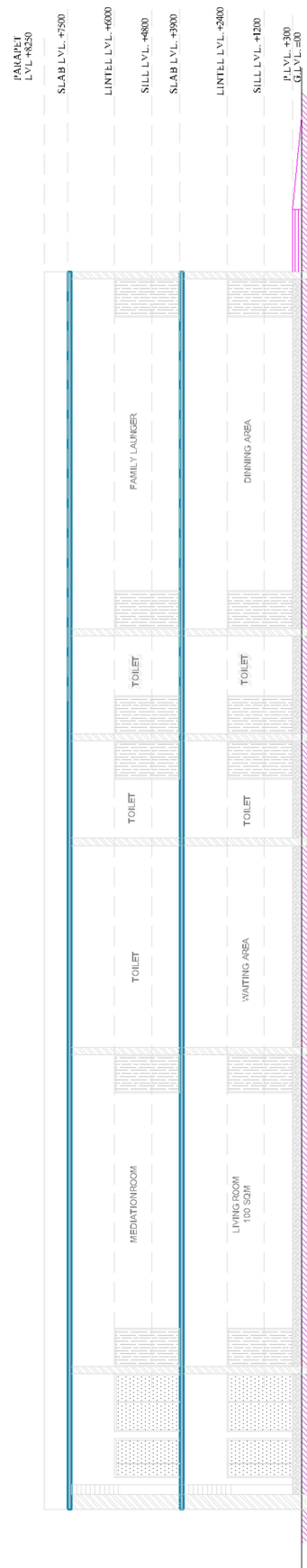


[illegible]

COMMON SPACE (BLOCK-2)

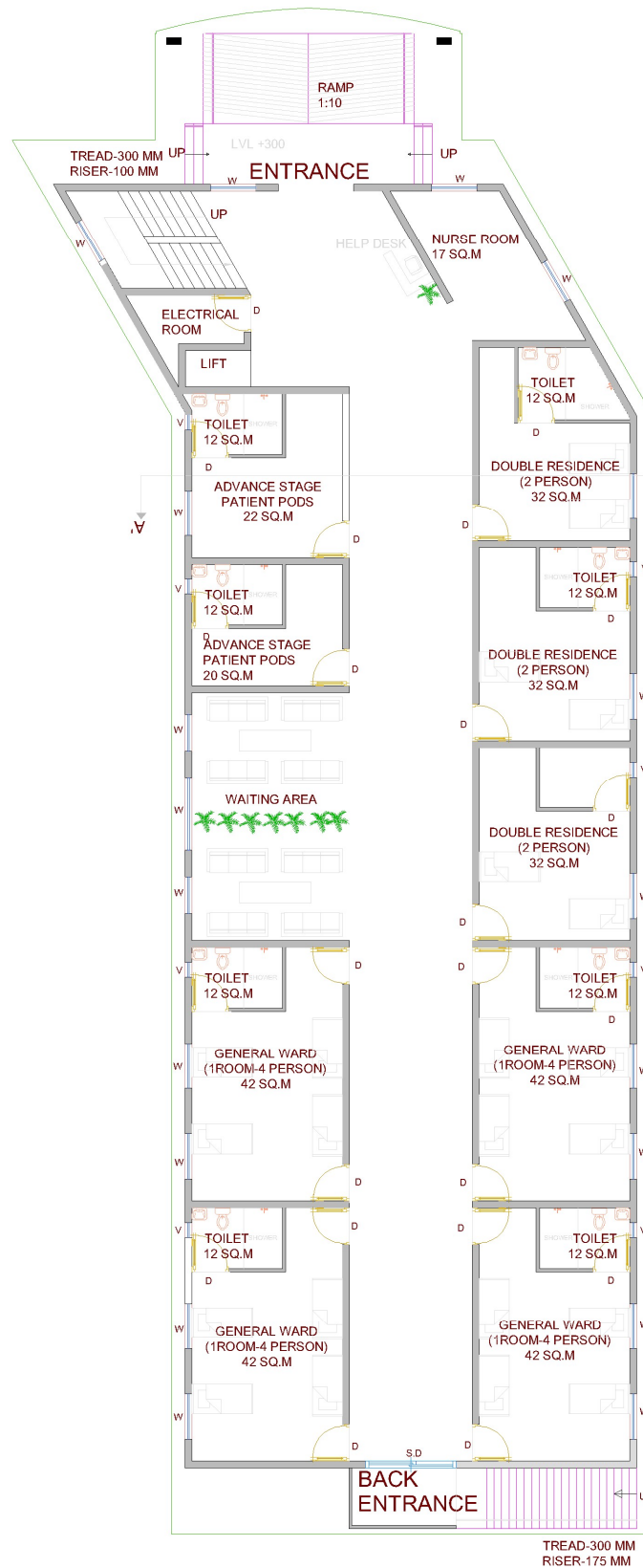


ELEVATION

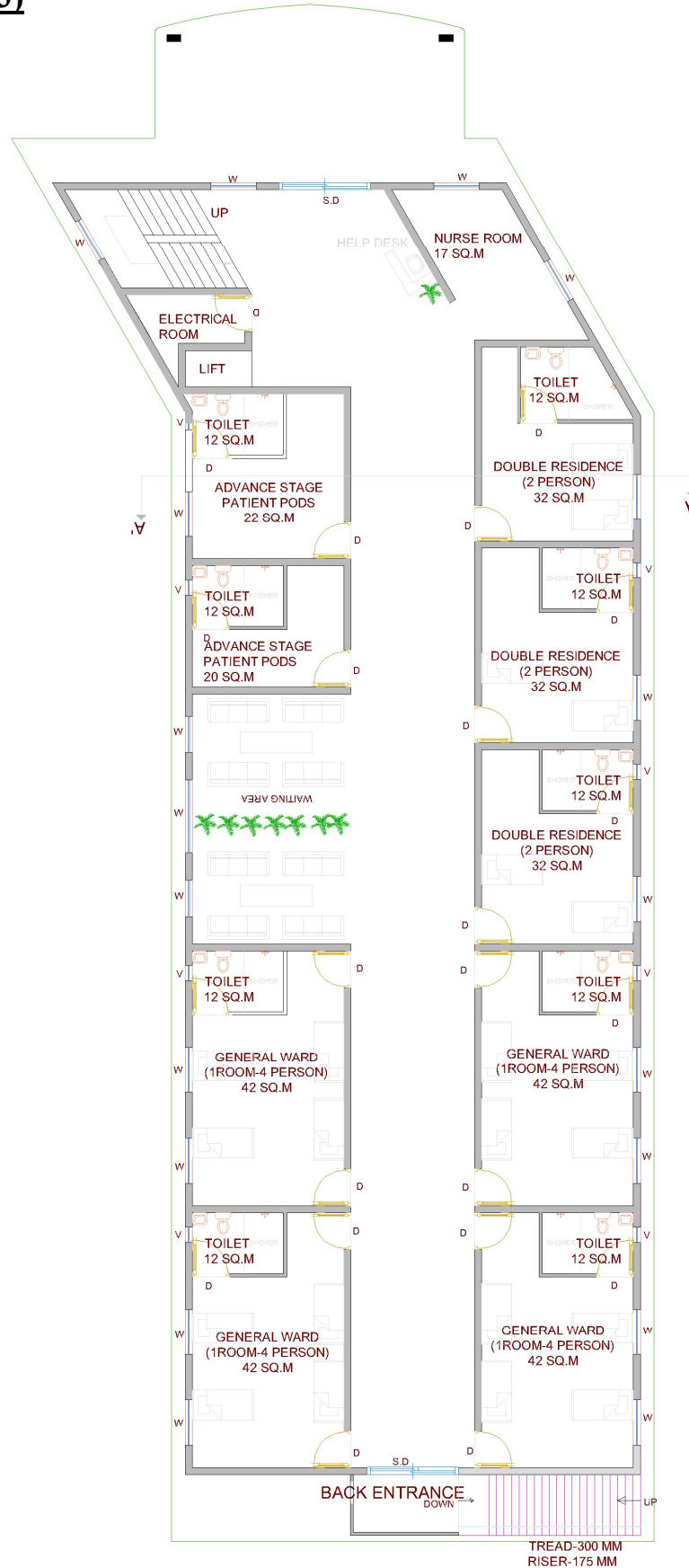


SECTION - AA'

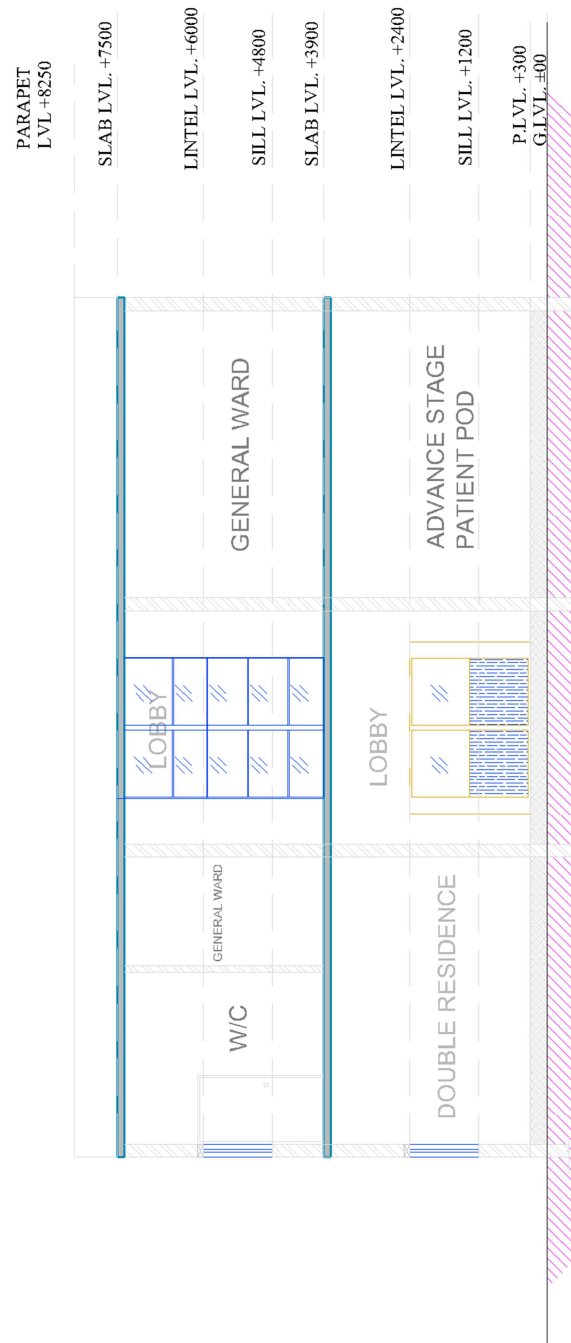
PATIENT BLOCK **(BLOCK-3)**



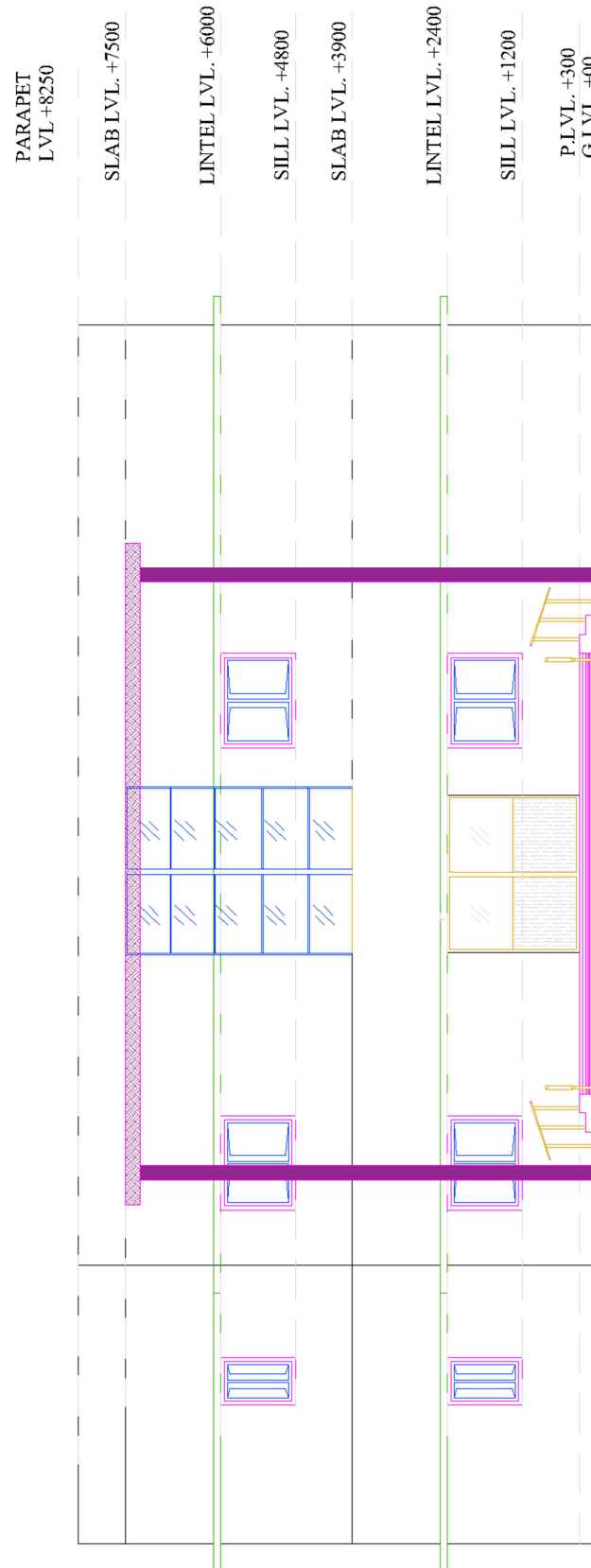
PATIENT BLOCK **(BLOCK-3)**



PATIENT BLOCK **(BLOCK-3)**



PATIENT BLOCK (BLOCK-3)

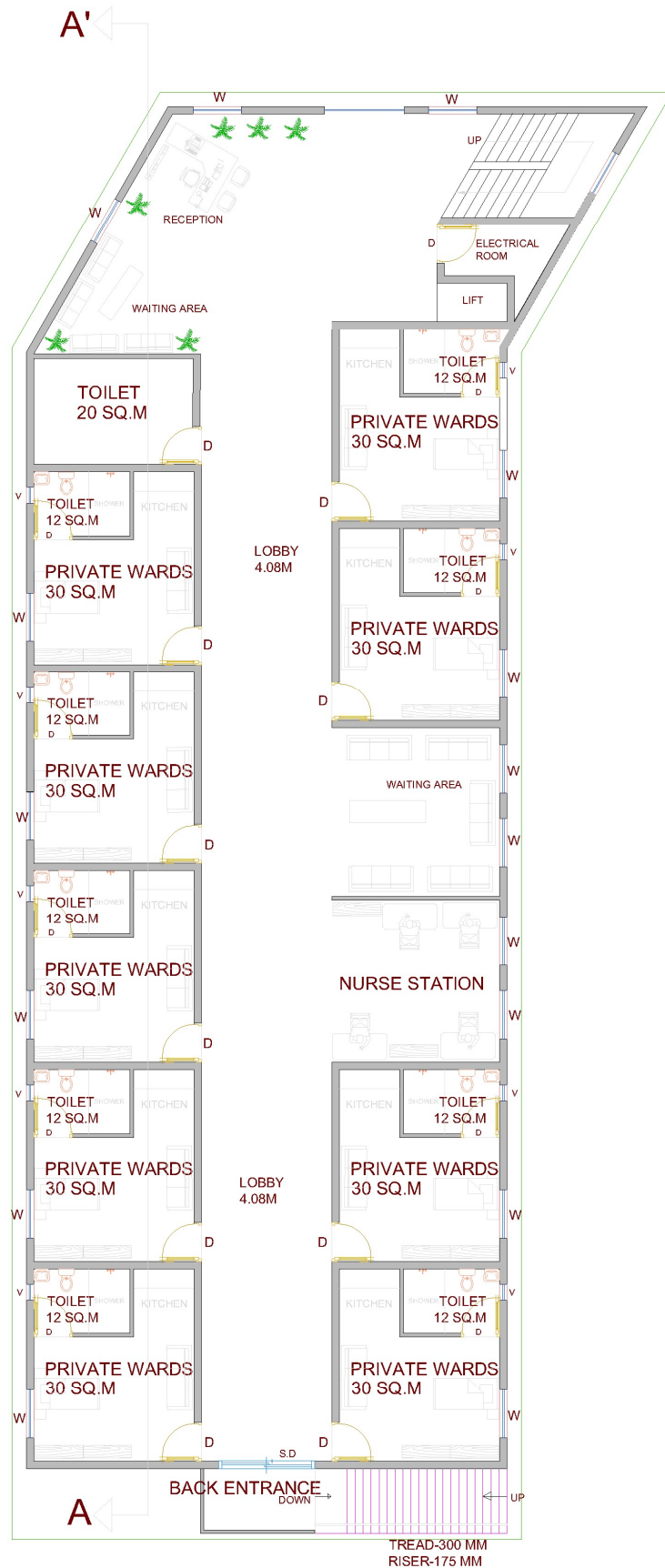


ELEVATION

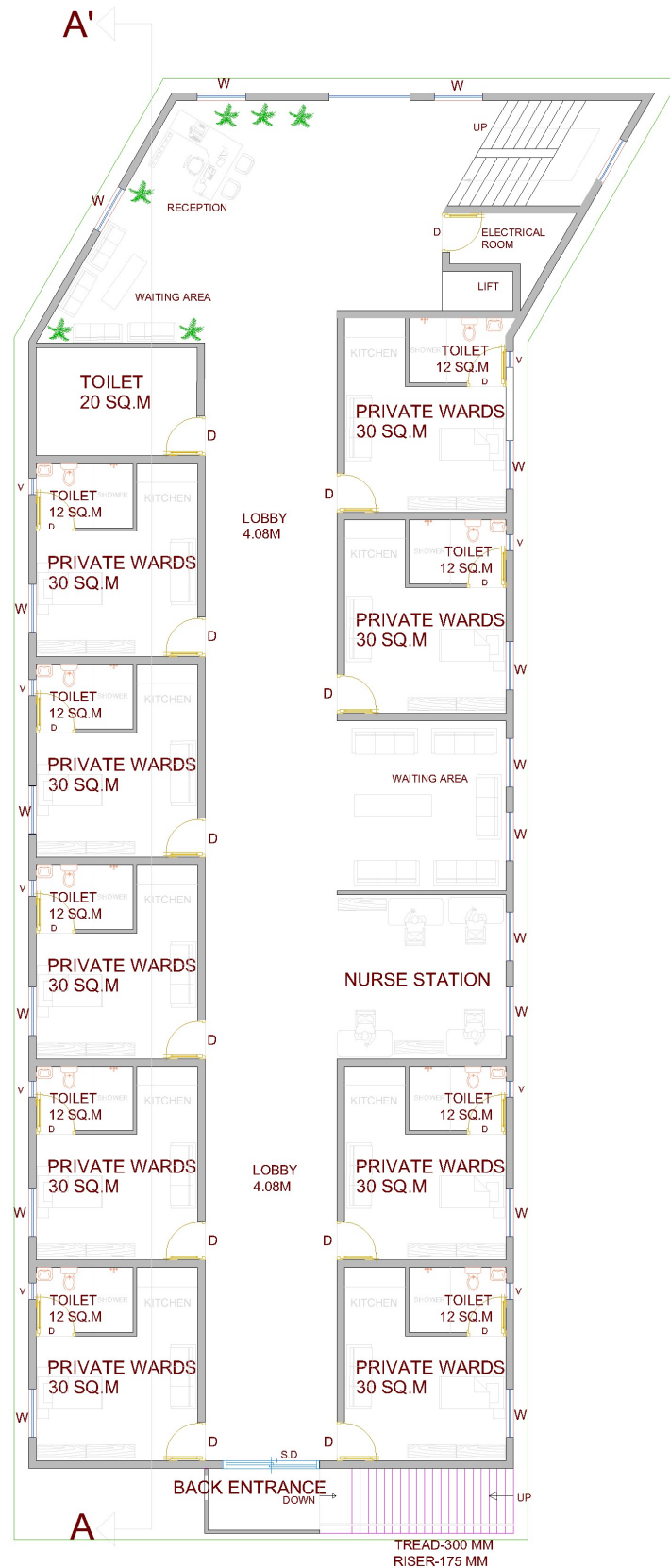
Floor Plan Details:

- Entrances:** ENTRANCE (Front), BACK ENTRANCE (Rear)
- Central Corridor:** A, A'
- Rooms and Areas:**
 - RECEPTION
 - WAITING AREA
 - TOILET 20 SQ.M
 - TOILET 12 SQ.M
 - SEMI-PRIVATE WARDS 32 SQ.M
 - KITCHEN
 - LOBBY 4.08M
 - STORE
 - NURSE STATION
 - LIFT
 - ELECTRICAL ROOM
 - RAMP 1:10
- Stairs:** UP, DOWN
- Dimensions:** TREAD-300 MM, RISER-100 MM, RISER-175 MM

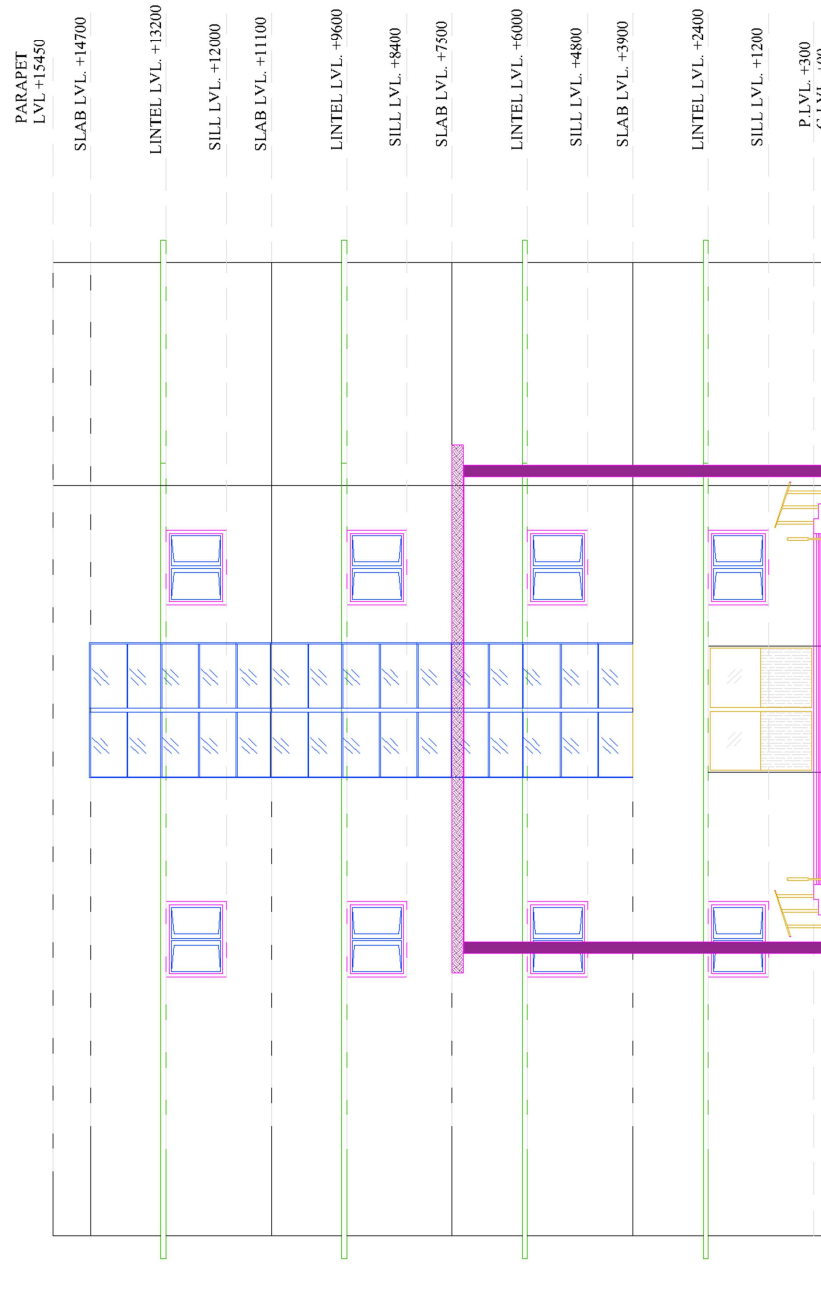
PATIENT BLOCK **(BLOCK-4)**



PATIENT BLOCK **(BLOCK-4)**



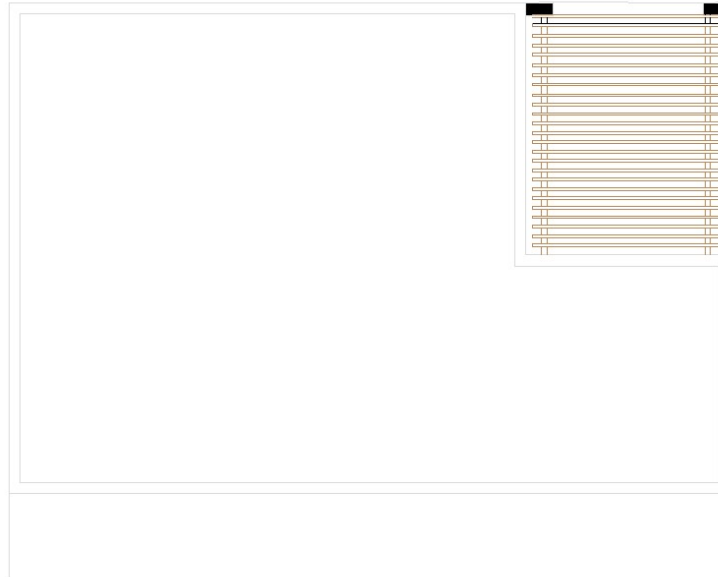
PATIENT BLOCK **(BLOCK-4)**



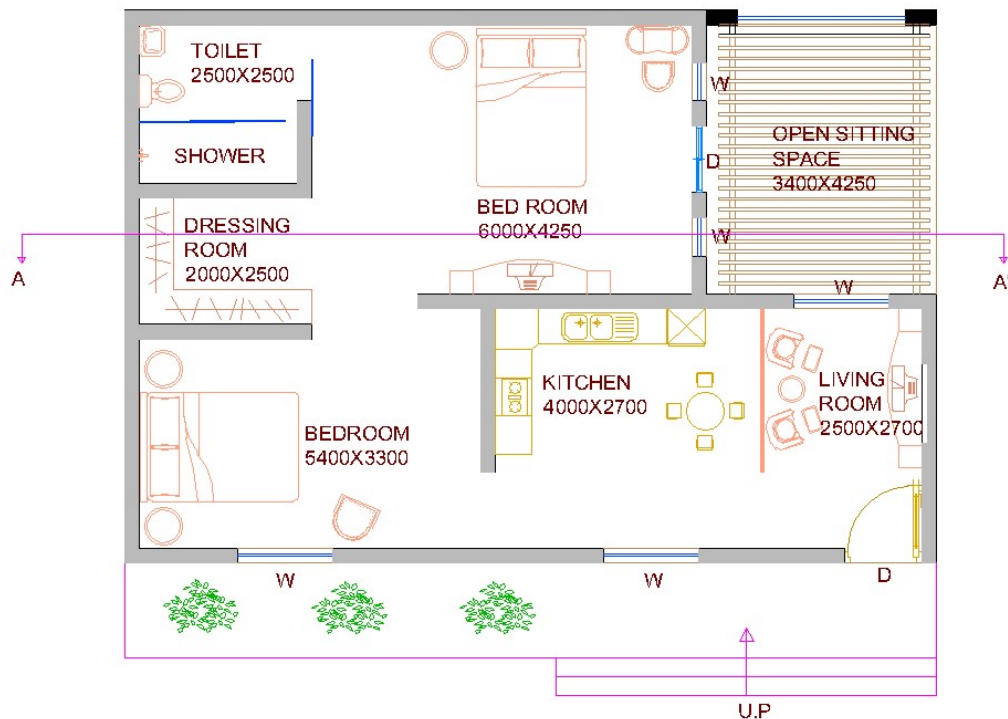
ELEVATION

SECTION - AA'

FAMILY APARTMENTS **(BLOCK-5)**



ROOF PLAN

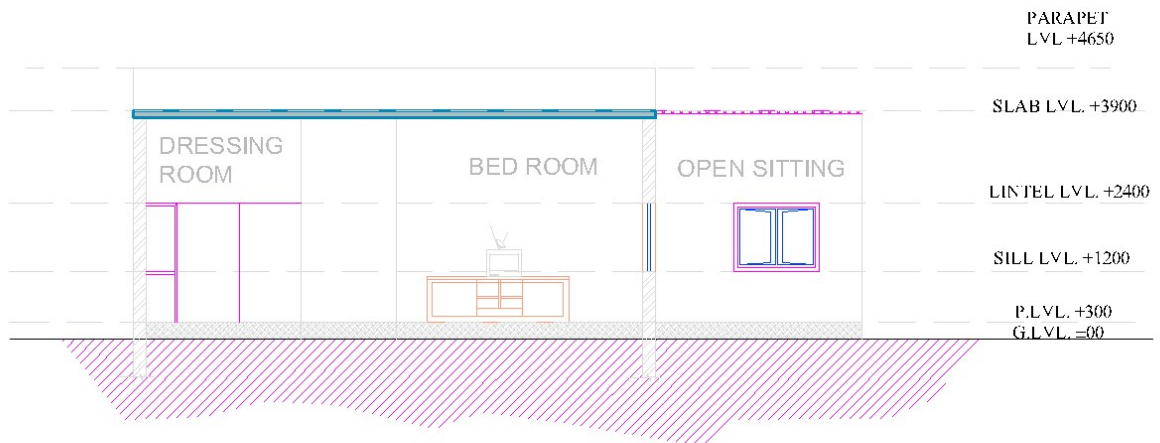


PLAN

FAMILY APARTMENTS **(BLOCK-5)**

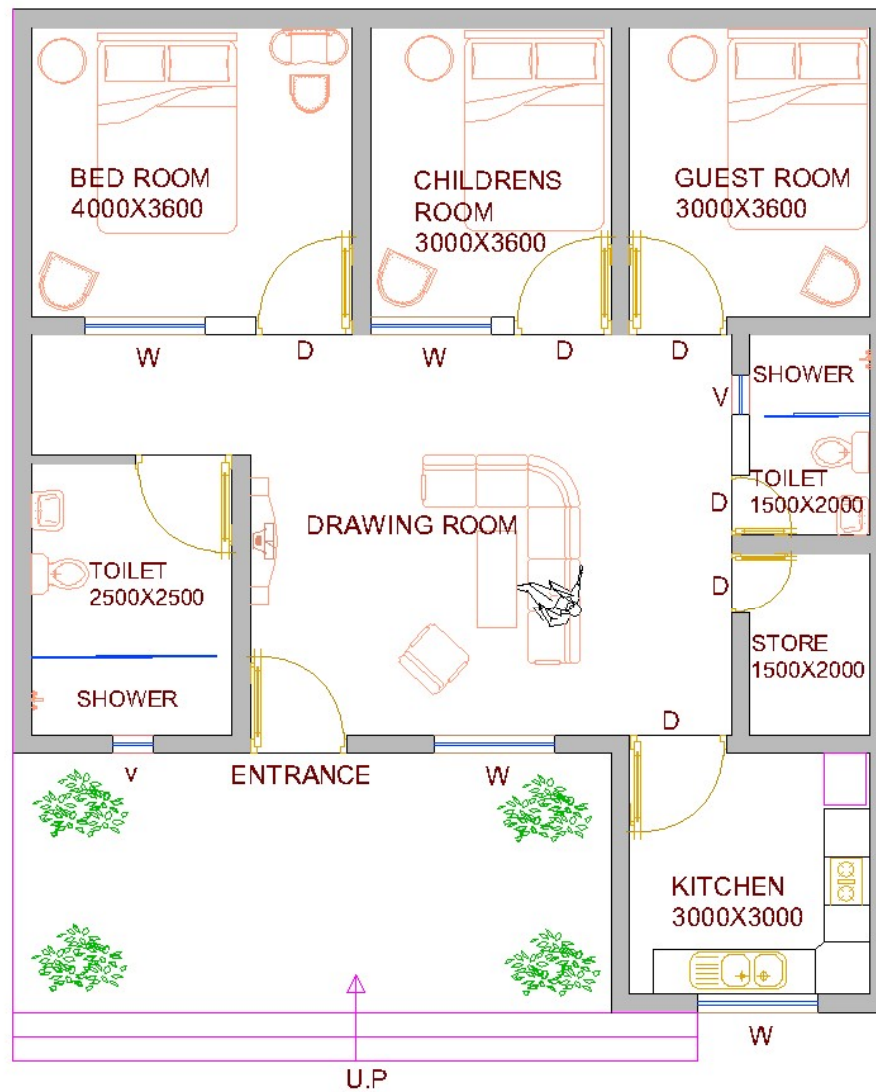


ELEVATION



SECTION A-A'

STAFF ACCOMODATION
(BLOCK-6)

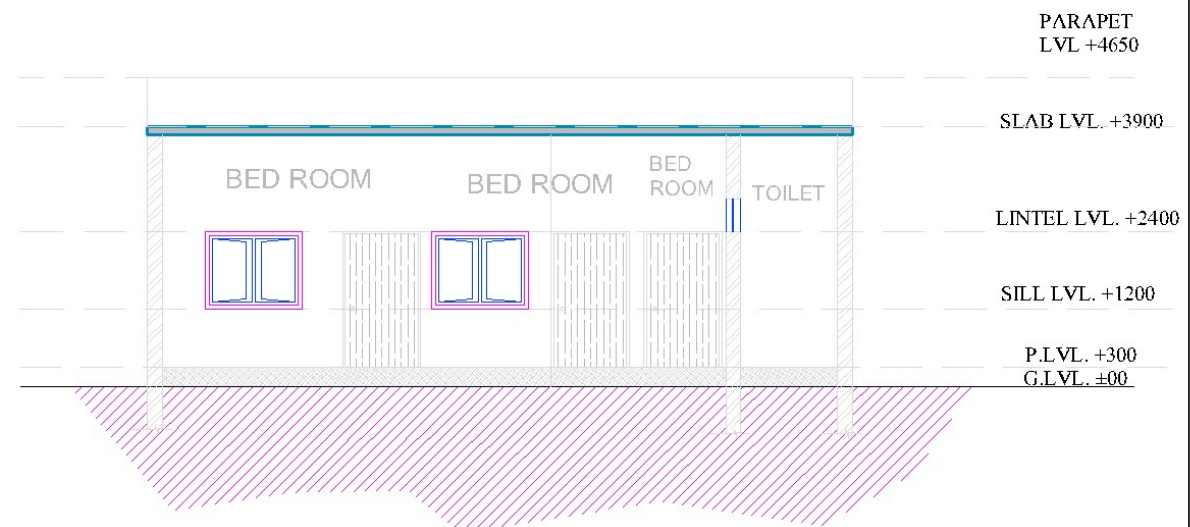


PLAN

STAFF ACCOMODATION **(BLOCK-6)**



ELEVATION



SECTION A-A'

ELECTIVES

CONCLUSION

I HEREBY DECLARE THAT THE WORK DONE IN THIS THESIS PROJECT IS MY OWN WORK AND I HAVE COLLECTED THE DATA FROM VARIOUS SOURCES, WHICH I HAVE DULY ACKNOWLEDGED IN MY REPORT.

DATE:-
PLACE- LUCKNOW

RASHMI DIKSHA
B.ARCH(ARCHITECTURE)
FINAL YEAR(2019-20)
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