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An evaluation on the change of healing perception at healthcare facilities: The Royal Children's Hospital

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Abstract

Healthcare constructions are public buildings that necessitate technical, healing and medical conditions, require common action from a number of disciplines and accommodate differing scales within themselves. According to the World Health Organization definition which stated that 'Health is not only protection from diseases and microbes but also a state of well-being physically, mentally and socially'. Healthcare constructions include places that have negative connotations in the conscious of the society. The design of modern healing places as livable spots, environments to where feelings of belonging can be attached and environments of relaxing and healing therapeutics have become a delayed requirement. Therefore, in this study, efforts made to create a theoretical background in order to evaluate the relation between healthcare constructions and perception of places to provide reading over hospitals. According to the evaluation made, today's spatial construction perception will be evaluated over The Royal Children's Hospital, Melbourne, Australia and providing recommendations on construction design is targeted.

Keywords: Healing places, hospitals, hospital design, healing design, healthcare constructions, spatial perception.

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1. Introduction

A hospital is a healthcare facility, which is to take care of human health, to examine and to treat patients such as inpatients and outpatients, to study and to prevent diseases, to educate people on health care as well as to educate and to train medical students and staff. It also conducts health research, applies technology in order to improve human health.

Designing a new general hospital is a complicated process and requires a lot of attention and knowledge from a design team. Generally, the design process consists of two phases: a planning phase and a design phase. The planning phase is very important and will decide the success of the general hospital. Kunders (2004, p. 61), an Indian professional hospital administrator and a healthcare facility planner, has stated 'Failing to plan is planning to fail'.

The discipline of architecture encompasses the design of different types of structures. Within the space frame, the area of study has been narrowed down in specific terms with health facilities. Health care can be considered as a whole, which serves all the community and includes medical necessities. In addition to the spatial requirements, it needs to be considered as a place that can be improved in terms of design.

2. The healthcare facilities the perception of place in historical process

Historical improvement of healthcare facilities has started with traditional methods in a home environment. It has advanced with great changes in miasmatic theory has begun to differentiate between architectural and spatial sense both in terms of space and technical sense by the adoption of microbe concept. Briefly, in these historical processes, changes have been occurred under the base of the social health sense and the acceleration of the medical sciences. In particular, after the Industrial Revolution, the spatial spaces have started to change as more mechanic and it brought a new perception that only mechanical instruments are necessary for treatments. During the time, the guide response need in healthcare caused fast constructions without an adequate search on the impact of spatial space on treatment process of healing.

Medicine in the modern sense starts with Hippocrates in ancient Greece. Historically, the first developments of hospitals have been seen in ancient Greek, the treatment of patients was in doctors' houses. In the fifth century BC, constructions were consisting of particulate courts surrounded by patient rooms called 'Akslepois' were accepted as the first examples of hospitals (Aydin, 2009; Terzioglu, 1964).

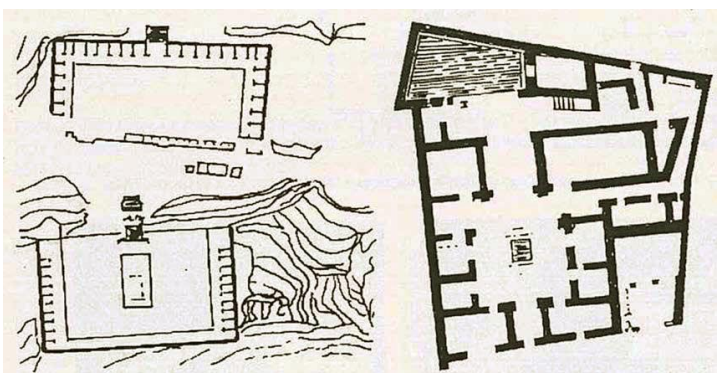

Figure 1. The surgeon's house in Akslepios and Pompei excavations in the BC fifth century (Aydin, 2009).

Before the Middle Ages, people were usually trying to be treated from a disease that would bring their end. Before the last quarter of the Middle Ages, the traditions of the hospital structure concept begun to be laid (Hosking & Haggard, 2002). The main change has been occurred as; the formation of health structures was based on the need to distinguish sick people and non-sick people. Spatial

perception was very far from the improvement area. The pre-medieval hospital space was much farther away from the basic thinking of the healing process. That times, all the patients were been kept in the same place without dividing the area into rooms which caused the spread of infection between patients.

The first hospital in Europe is 'Hotel Dieu', which means the house of the god which was founded in France. Starting from the 16th century, it has been seen that hospitals began to develop as a social necessity (Eren, 1989). Also, the first medical hospitals were established in the 18th century. These healthcare facilities had been transformed to 'block' type which resembled other governments and public buildings in terms of the facade in Europe and America. The block type hospital structure was followed by discrete units.

By the 19th century, hospitals were perceived as institutions for researching and medical examining facility rather than medical treatments for patients. With these changes, the 'Pavilion' plan type of construction. With the pavilion plan type, the hospital building had been transformed into multiple units connected by exterior corridors (Ergenoglu, 2006). In the 1900s; with technological inventions and economic changes, the shape and architectural design of hospital buildings had begun to change. The invitation of the elevator and land valuation had quite a big impact on major development in healthcare construction (Ergenoglu, 2006). Since the pavilion system requires large areas, the 'mono-block' system has resulted in the construction of 'skyscraper' hospital systems and health campuses, with the need to increase the capacity of the hospital units and the change of land values.

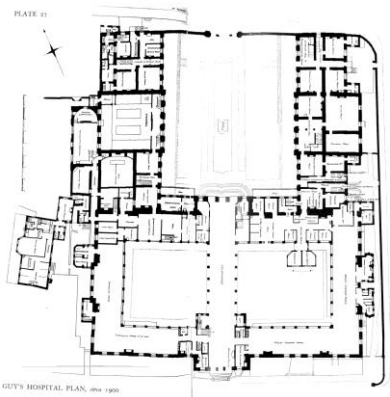

Figure 2. Guy's Hospital, London (1902encyclopedia.com, Date Accessed: 2017).

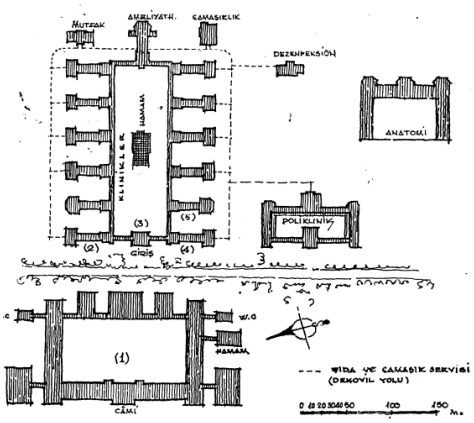

Figure 3. Haydarpasa Numune Hospital Pavilion Type Plan, Istanbul (Bolak, 1950).

3. The royal children's hospital, Australia

The Royal Children's Hospital was established 8 years ago in Melbourne, Australia near to the city centre which was a local renovation project and had a transportation facility. The reason why it is presented as an example in the study; Is to be thought of as being designed with the qualities to be separated from the examples. In this direction, the hospital received the 'Australian Interior Design' award in 'Color in Commercial Design' category in 2012.

The design of the hospital has been carried out in a way that has not been realised by considering children's diseases, but it is open, rehabilitative and easy to live for all users. In partnership with the University of Melbourne, there are approximately 4,000 employees working in the building.

The location of the building has been positioned as it can be seen in the Melbourne zoo, which provided to communicate with people through natural living. The approach to the hospital is made within the landscape with the green area with a defined entrance. The entrance area is a common space with high ceilings which is designed as a gallery space located in the centre. There is an artwork inspired by monkeys, ants and spiders, which have become symbols of this common space structure. The sculpture was designed by a Melbourne artist to improve the imagination of children. Most of the social spaces are located in this centre.

Figure 4. Hospital approach (hospitalsaccommodation.com, Date of Access: 24 May 2017)

Figure 5. Entrance area (hospitalsaccommodation.com, Date of Access: 24 May 2017)

Figure 6. Hospital common space (Personal Archive, 2017)

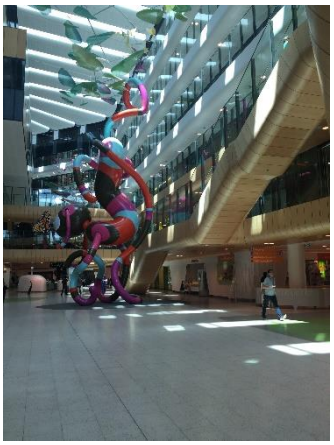

Figure 7. Artistic work (Personal Archive, 2017)

Joint space is the centre of the structure in terms of architectural organisation. There is a sense of space inside the green area and the water element. In order to increase the relationship, the waiting areas walls were made of transparent surfaces to make the waiting easier for children, there has been created a living area for markets. There are large garden and play area not visible from the main entrance. The use of all areas is open to both working staff and patients and their relatives.

Figure 8. Ground floor, waiting and mirket live area (Personal Archive, 2017)

There are many social areas within the building. There are applications in common venues where game related actions can be found. 'The Book Banker', which children can use free of charge, has a common space called 'Starlights Room' where they can spend time with their families.

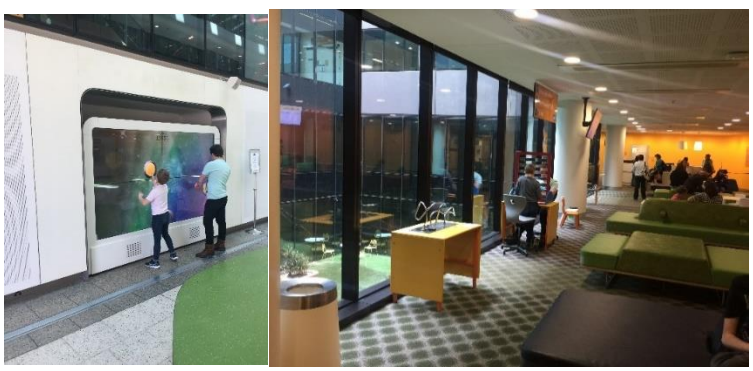

Figure 9. Play surfaces, social locations (Personal Archive, 2017)

Figure 10. The book banker and starlights room (Personal Archive, 2017)

There is one floor provided as an accommodation facility for patient relatives. The floors were separated into the clinics and every floor to enable easy room to be found for children and their relatives which were defined graphically with different colours and animals. Interior fittings are designed in a dimensional and formal sense according to user types. Patient rooms have been designed with an effort to create a home environment to benefit from the sun's rays.

Figure 11. Patient room (Personal Archive, 2017).

4. Discussion and conclusion

Health facilities include spaces with negative connotations in social consciousness. One of the duties of the designer is to create an environment which will change this connotation from negative to positive and also he should consider developing an emotional bond between health facilities and society. The creation of environments that allow this breakdown and the social-emotional bond to be established can be regarded as one of the most important tasks of the designer. Spatial spaces, especially hospitals, are complex structures created by the combination of knowledge and experience of many disciplines. For designers, besides the medical instruments and treatments, the environment of the patient as space needs to be taken under consideration which is taking part in the healing process (Ozgen, 2017).

Those who are engaged in early periods have adopted the healing effects of peaceful, comforting spaces and environments that provide spiritual satisfaction as well as methods of healing for the conceptual, mental and spiritual situation (Ergenoglu, 2006). Today, humanity is rediscovering the fact that physical and spiritual health need to walk together. At the beginning of the 21st century, it has

begun to be accepted that the commitment to technical excellence should also be in harmony with philosophical concepts of spiritual health.

It is aimed to contribute to the design of future healthcare facilities through historical and spatial examination and an example from today's healthcare structures. In today's healthcare establishments, it is important to note that the responsibility of designers is vital to express that they are more of a sector and has economic concerns. At this point, the example of The Royal Children's Hospital is considered one of the positive examples that can provide both the needs of the industry and the users.

The Royal Children's Hospital designed as a social venue for all user groups, the building was seen as a city value rather than a hospital image. This is right designed detailed example which shows how spatial definitions can support the concept of interior guidance and direction. In particular, interior space production, which is in line with the profile of patient users, is integrated with the concept of healing rather than the hospital.

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