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CARE FOR CHANGE

- A design proposal exploring convertibility between wards and outpatient departments



HEALTHCARE

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Buildings last for decades. Healthcare change constantly. A contradiction in time which tend to entail costly and extensive reconstructions in hospitals. Planning for changes can prolong the lifespan of buildings in a sustainable manner by means of construction reuse and reduce the use of new materials. This forms the point of departure for this master's thesis project.

This thesis addresses flexibility and generality in a case at Hallands Sjukhus Varberg. Within a short time, the hospital requires a permanent evacuation building during renovation, interchanging wards and outpatient departments. The existing hospital was built with elasticity, however, with full occupancy, this new proposal will be situated at one of the few remaining spaces in the hospital area. As one of the most dynamic sectors, the building will last in an unknown future. Hence, in a longer time perspective, it is of importance to future-proof for uncertainties by proposing a structure that enables changing conditions. Planning for generality and flexibility will create robustness of the hospital overall.

Through a combined research for design and by design approach, the purpose of this thesis is to develop a design proposal of a

permanent evacuation building to Hallands Sjukhus Varberg. The aim is to through design explorations, literature studies, interviews and relevant case studies find solutions that address generality and flexibility to hold wards and outpatient functions, with minimal interventions in the building design. Simultaneously, the architecture should support an environment for wellbeing and recovery.

Sustainability is consequently addressed from various directions; at an initial stage, it acts as an evacuation building to enable continued use of the existing hospital. The second stage is to extend the life of the evacuation building itself, by proposing a structure that enables and allows for changing conditions and thus reduces the need for future new construction.

The outcome of the thesis shows that wards and outpatient departments have several commonalities. Which, when identified, can reduce the need for reconstruction when converting between them and thus being more resource efficient.

Keywords : flexibility, generality, outpatient department, ward, healthcare architecture