

PSYCHIATRIC HOSPITAL

THESIS

Submitted in partial fulfillment of the requirements for the award
of
Bachelor of degree in Architecture

by

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SATHYABAMA

INSTITUTE OF SCIENCE AND TECHNOLOGY

(DEEMED TO BE UNIVERSITY)

Accredited with Grade “A” by NAAC

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JUNE 2021



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DEPARTMENT OF ARCHITECTURE

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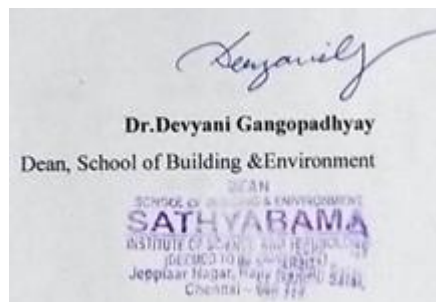
This is to certify that this Project Report is the bonafide work of **K. SAM ANCIER REMILON (3621063)** who carried out the project entitled **“PSYCHIATRIC HOSPITAL”** under our supervision from January 2021 to June 2021.

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Dr. DEVYANI GANGOPADHYAY



Submitted for Viva voce Examination held on _____

Internal Examiner

External Examiner

DECLARATION

I **K. SAM ANCIER REMILON** hereby declare that the Project Report entitled “**PSYCHIATRIC HOSPITAL**” was done by me under the guidance of **Ar. DEEPA LAKSHMI** (Internal Guide), **Ar. Ram Kumar** (Internal review member) and External at Sathyabama Institute of Science and Technology are submitted in partial fulfillment of the requirements for the award of Bachelor of Architecture Degree.

DATE:

PLACE: Chennai SIGNATURE OF THE CANDIDATE ACKNOWLEDGEMENT

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I convey my thanks to **Dr. Devyani Gangopadhyay**, Dean, and Head of the Department, **Dr.Suresh Kuppaswamy**, Design Chair of School of Building and Environment, Department of Architecture for providing me necessary support and details at the right time during the progressive reviews.

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I wish to express my thanks to all Teaching and Non-teaching staff members of the **Department of Architecture** who were helpful in many ways for the completion of the project.

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1. INTRODUCTION:

Psychiatric hospitals, also known as mental hospitals, mental asylum's, or simply asylums, are hospitals or wards specializing in the treatment of serious psychiatric illnesses, such as clinical depression, schizophrenia, and bipolar disorder.

“Mental health refers to cognitive, behavioral, and emotional well-being. It is all about how people think, feel, and behave. People sometimes use the term “mental health” to mean the absence of a mental disorder.”

The mental hospital, therefore, becomes an intensely problematic space due, in part, to its physical features such as its geographical isolation from the world, designs for confinement and surveillance, depressing wards, and crowded dormitories.

It is also seen as a site of perpetual conflict between disciplines and communities, such as psychiatrists, psychoanalysts, and social and behavioral scientists, the latter gaining their institutional strength and legitimacy from the university, rather than the mental hospital which was increasingly questioned as a locus of research and care.

2. LITERATURE CASE STUDY:

- CENTER FOR PSYCHOSOCIAL REHABILITATION; SPAIN
- PSYCHIATRIC CENTRE; GERMANY
- KRONSTAD PSYCHIATRIC HOSPITAL; NORWAY
- UNIVERSITY PSYCHIATRIC CENTRE; BELGIUM
- PSYCHIATRIC CENTER; SPAIN
- VEJLE PSYCHIATRIC HOSPITAL; DENMARK

2.1 CENTER FOR PSYCHOSOCIAL REHABILITATION; SPAIN

2.1.1 GENERAL DESCRIPTION:

The project meets the needs derived from the two entities concurring: on the one hand, a residence for people with serious mental disorders that do not require hospitalization; on the other the **CENTRE FOR SOCIAL REHABILITATION AND INTEGRATION (CRIS)** and a day center for persons with serious mental disorders



Fig: 2.1.1

The project develops the winning proposal of the idea's competition, in which all the space and functional needs were grouped in a single building, in keeping with the architectonic answer to the peculiarities of the plot, and the saving is given the superposition of uses and optimization of the use of space, redundant in evident personnel, budget and surface economies.



Fig: 2.1.2

The building, therefore, provides an open and flexible residential community service for persons with chronic mental disorders that do not require hospitalization; the users, about 50.

The CRIS, for 50 users, is defined as a center of specific and specialized services addressed to those persons with a chronic mental illness, with a significant deterioration of the functional capacities, where work programs suitable to the characteristics, needs, and specific situation of the users are carried out.



Fig: 2.1.3

2.1.2 ARCHITECTURAL ELEMENT:

The volume is designed as a large parallelepiped container, including and organizing the different areas of the program, with single access and one shared garden recreational area.

The relatively important separation of the building with regards to the access street gives importance to the single access to the building.

The size of the plot allows extracting a scheme of three areas for different uses.



Fig: 2.1.4

2.1.3 PSYCHOLOGICAL ELEMENT:

The scale of the site and the large and peripheral nature of the plot lead to the designing of a one-story building, with a semi-basement for a car park and auxiliary rooms, linked to the freeing of a great diaphanous space designed for the creation of a large and well looked after garden.



Fig: 2.1.5

A system of patios provides light for the inside of such a deep prism.

It allows achieving a feeling of intimacy, resolving important matters such as the control and movement of the staff, of the users, or of the visitors, with the relevant physical and visual filters.



Fig: 2.1.6

PLAN & SECTIONS:



Fig: 2.1.7

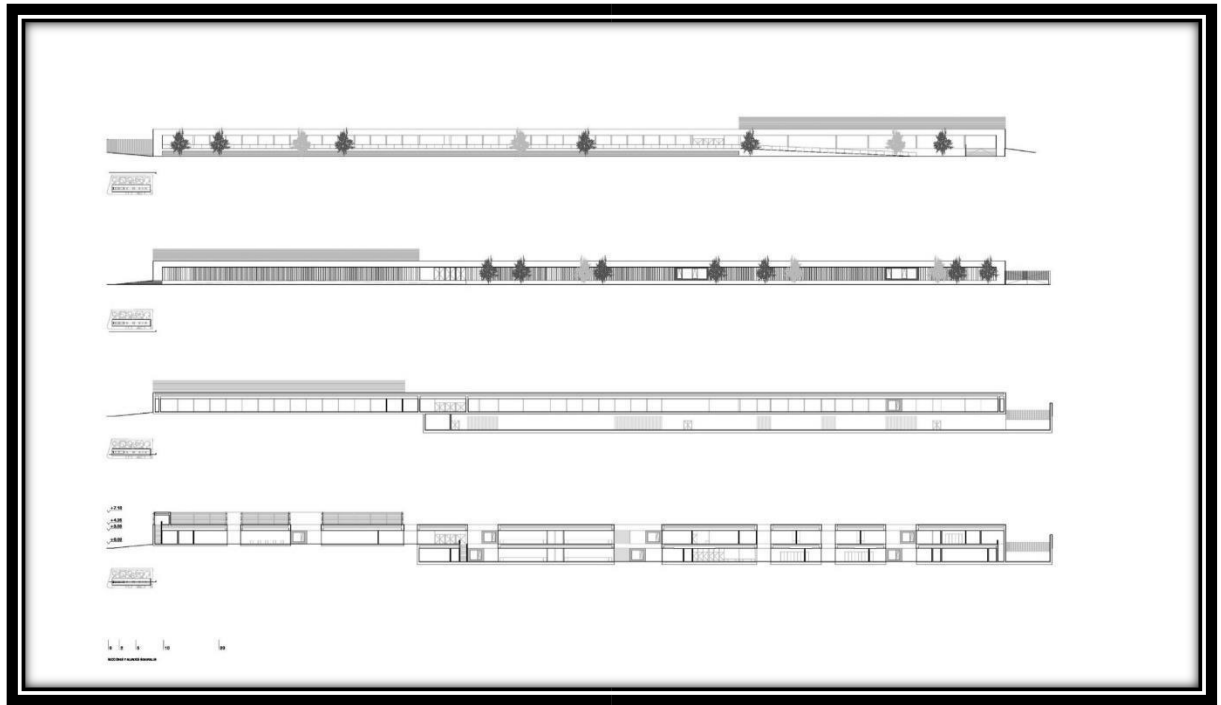


Fig: 2.1.8

SITE PLAN:

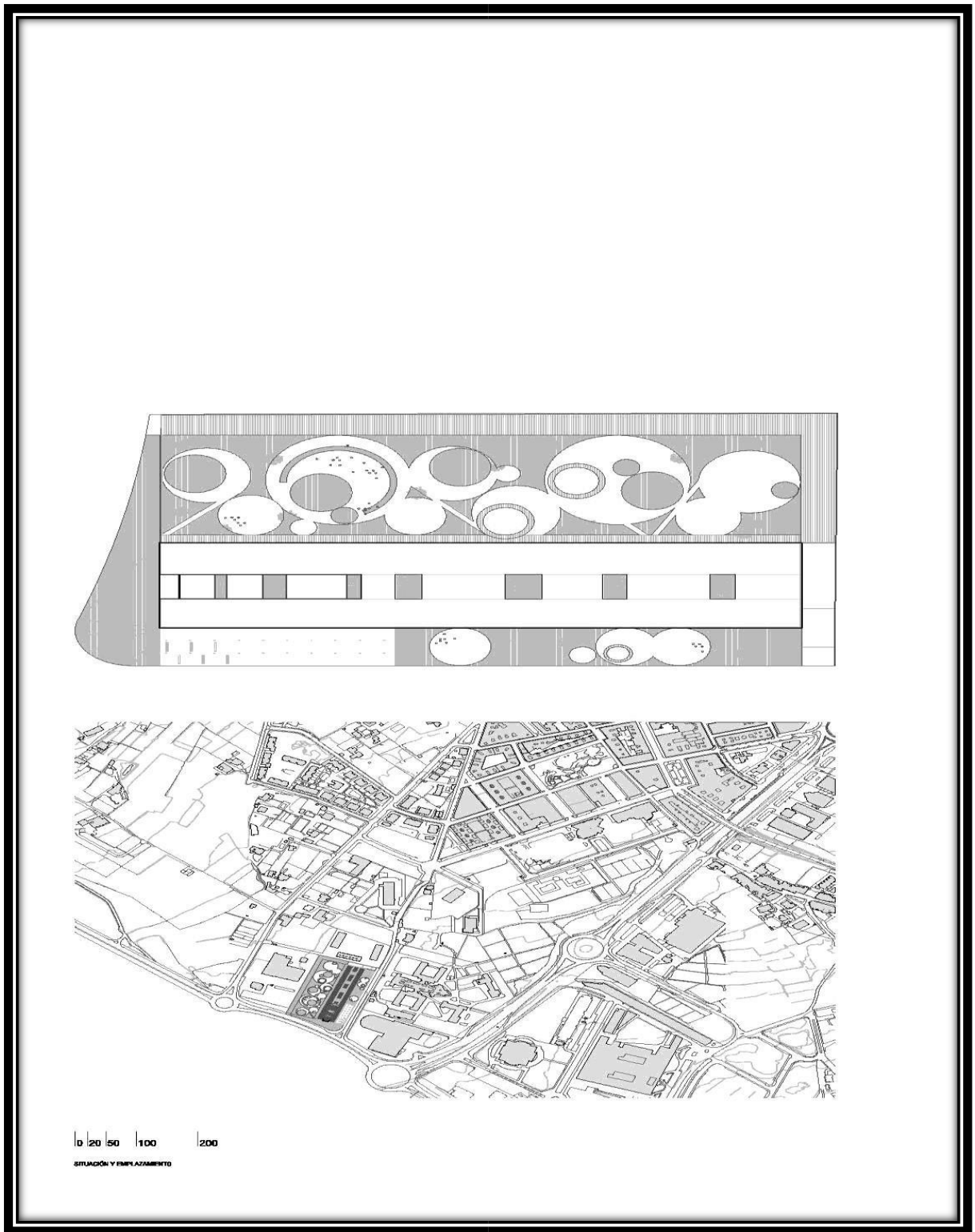


Fig: 2.1.9

DETAILS:

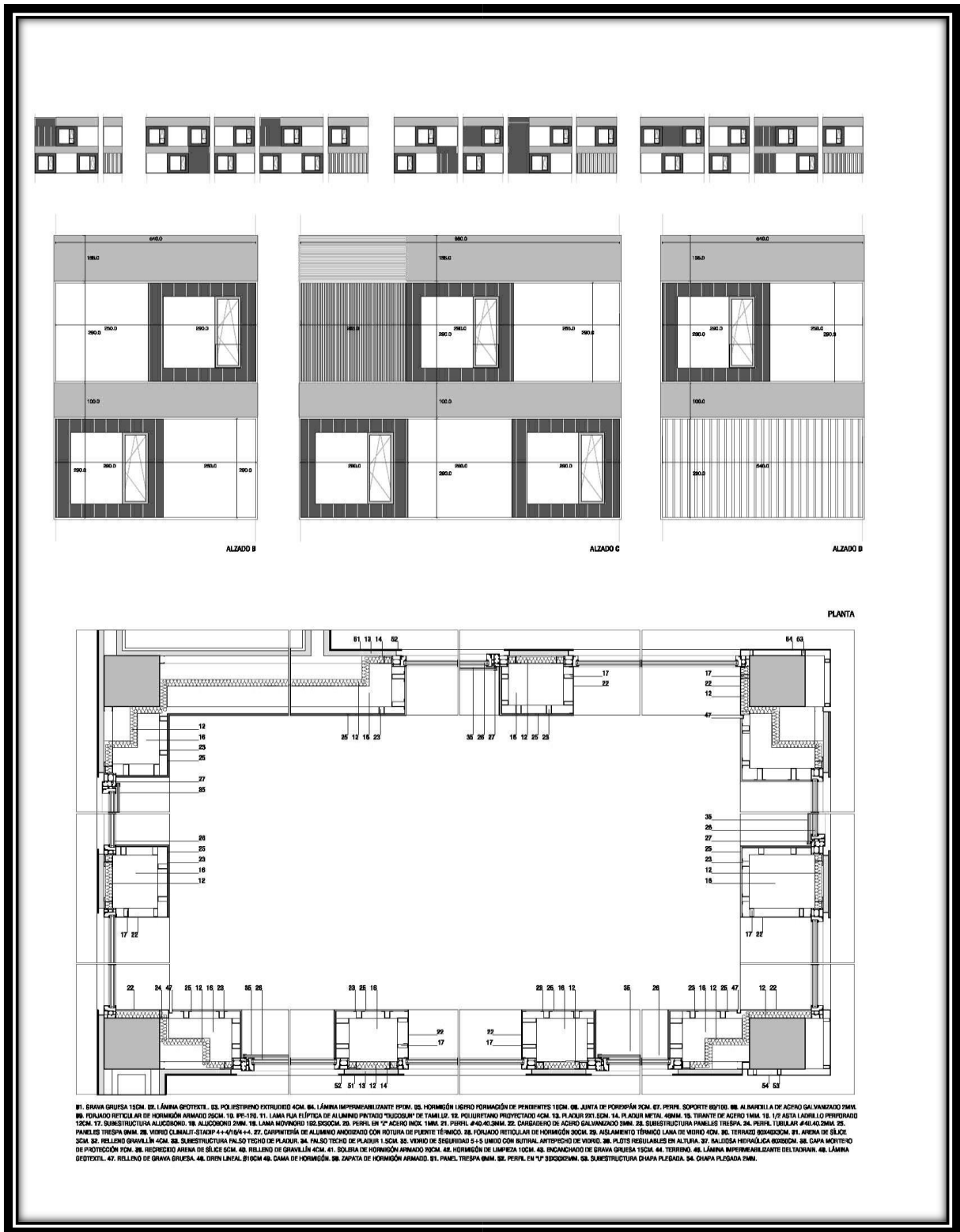


Fig: 2.1.10

2.2 PSYCHIATRIC CENTRE; GERMANY

2.2.1 GENERAL DESCRIPTION:

The new psychiatric center lies embedded into the campus of Friedrichshafen Hospital and follows the picturesque, orchard-laden, natural slope of the hill towards Lake Constance.

The building encloses a generously dimensioned green courtyard and exploits typologically the contour of the hillside by providing entrances on two different levels.



Fig: 2.2.1

A wide-spanning bridge frames the generous view into the undulating landscape and helps to emphasize the natural slope even within the sheltered courtyard.

Large central therapy rooms with direct access to the patients' garden are arranged on the lower floor by exploiting the possibilities of natural illumination along the slope.



Fig: 2.2.2

2.2.2 ARCHITECTURAL ELEMENT:

The two materials, fair-faced concrete, and untreated wood dominate the surfaces of the building both internally and externally.

Concrete is treated in a sophisticated way: large flat board-marked concrete surfaces and fine horizontal linear prefabricated elements, corresponding with the vertical fins of the wooden cladding.



Fig: 2.2.3

The timber cladding is made of untreated silver fir as a reference to the local building tradition, particularly in the nearby Vorarlberg region of Austria.

The vertical cladding, comprised of untreated wooden profiles, lends the building, through its transparency, an airy and open appearance.



Fig: 2.2.4

2.2.3 PSYCHOLOGICAL ELEMENT:

The main building of the hospital, constructed in the 1960s, dominates the extensive grounds of the campus.

The adjacent singular buildings of both the Kindergarten and the residential developments relate orthogonally to the hospital.

The new Psychiatric Centre arranges itself as a significant figure in this system.



Fig: 2.2.5

The proposed expansion of the campus through the Mother-Child Centre, the Medical Centre, and the Radiotherapy Centre emphasizes in their orientation the pedestrian-friendly character of the campus.

The entrance area between the new build and the existing hospital provides a high level of amenity and invites patients, visitors, and employees of the hospital to linger.



Fig: 2.2.6

PLAN:

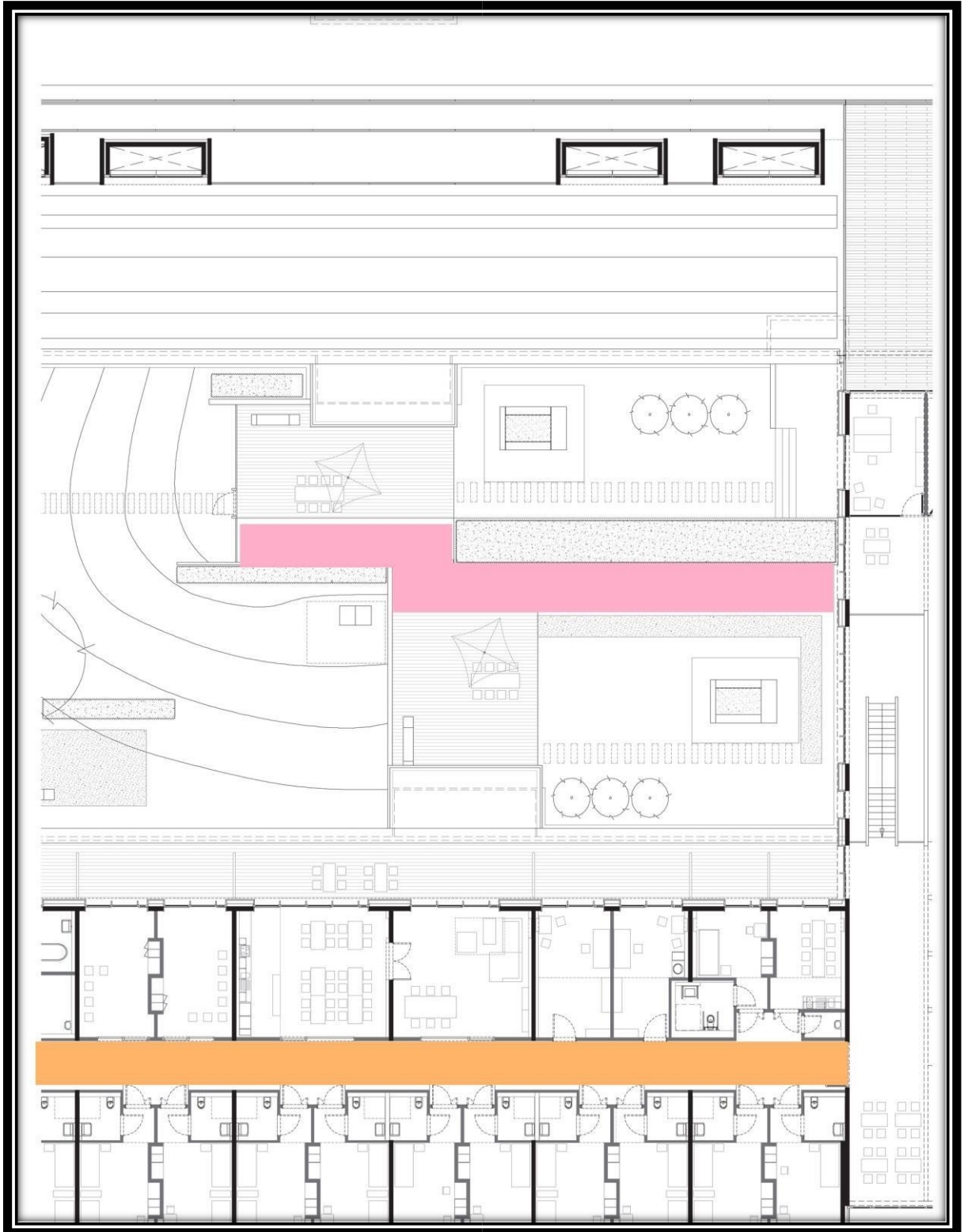
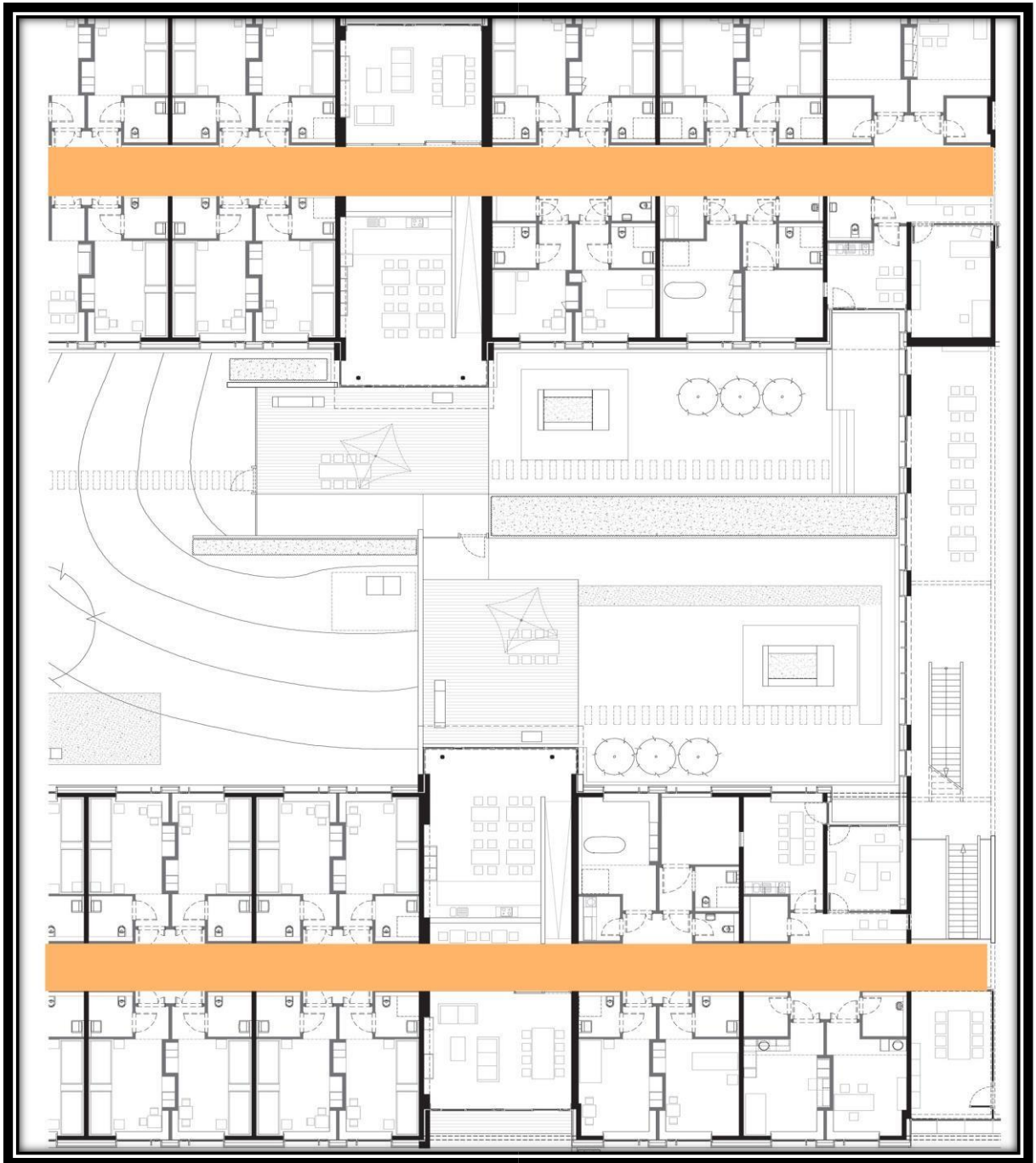


Fig: 2.2.7



CIRCULATION



PRIMARY ACCESS

SECONDRY ACCESS

Fig: 2.2.8

SITE PLAN & ELEVATION:

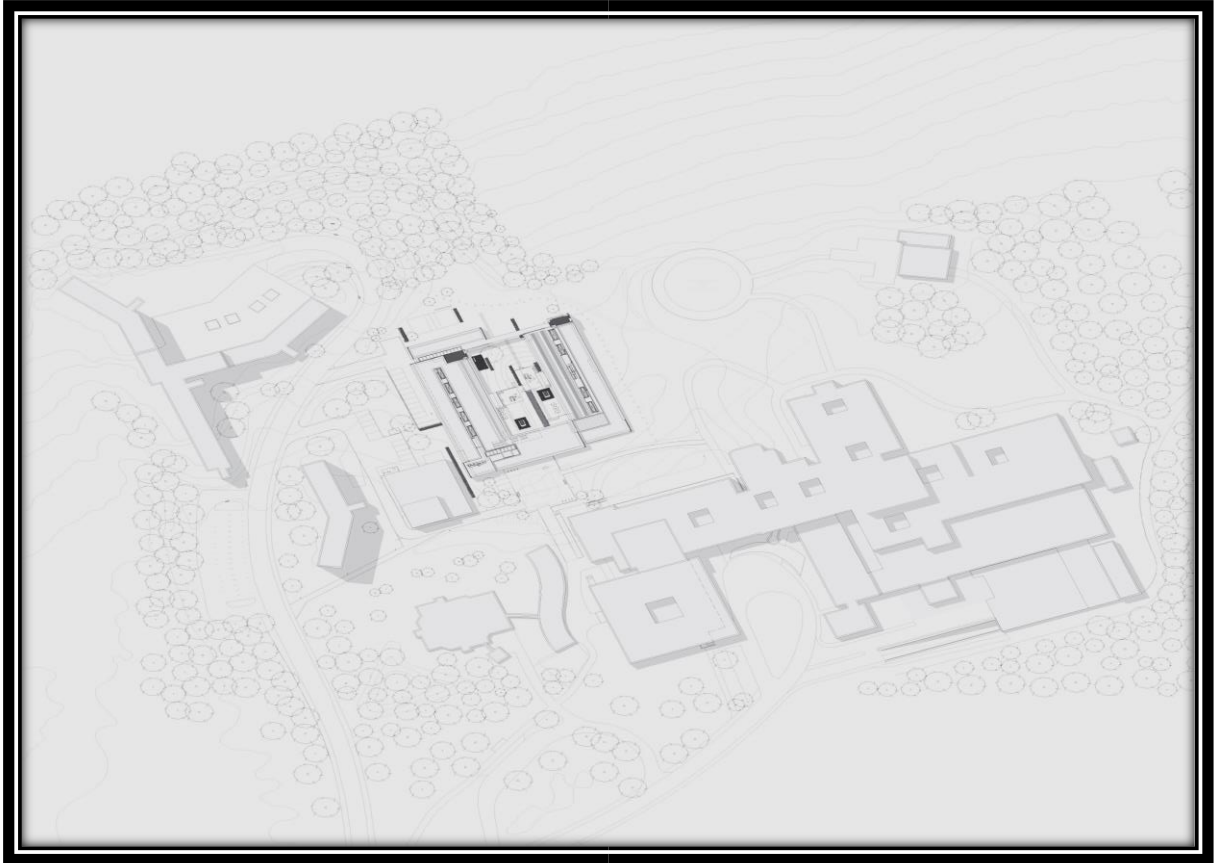


Fig: 2.2.9

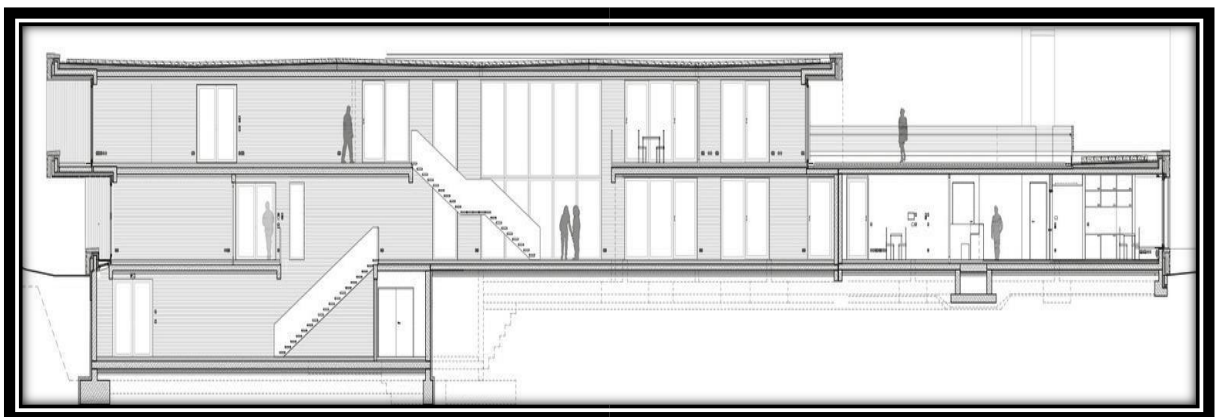


Fig: 2.2.10

2.3 KRONSTAD PSYCHIATRIC HOSPITAL; NORWAY

2.3.1 GENERAL DESCRIPTION:

The design of the hospital has a strong emphasis on 'openness and transparency towards the public whilst at the same time forming a protective shelter for the patients.

The addition of public spaces, nature, and new visual qualities to a challenging city environment has been central in the process.



Fig: 2.3.1

The 12,500 square meter building includes in-patient departments on the upper floors, daycare, and polyclinics on lower floors, and underground parking.

Services within the building include mobile teams, adult polyclinics, daycare clinics, and several wards for short stays.

The hospital is located in a highly trafficked area of Bergen, Norway.



Fig: 2.3.2

2.3.2 ARCHITECTURAL ELEMENT:

The square offers a valuable place for citizens to sit, play and contemplate in an area normally dominated by cars and traffic.

The public square stretches under the building's lower floors displaying green facades with large window sections.

Sightlines through the building are emphasized, and the transparency prompts the idea of greater openness about mental health issues in today's society.



Fig: 2.3.3

The main entrance is directly connected to the light rail stop outside and gives direct access to the various out-patient and in-patient departments.

Special attention supporting the security of staff and patients has been given to window solutions and the design of stairs.

The units are designed to give staff an overview, while at the same time ensuring smaller spaces decreasing the patient's feeling of being watched.



Fig: 2.3.4

2.3.3 PSYCHOLOGICAL ELEMENT:

The hospital opens up towards the east to the view of mountain Ulriken.

It is organized around three large atriums, adding light, air, and valuable outdoor recreational spaces.

The atriums provide visual contact between the different departments, aid the navigation by being geographical points of reference, and adds a glimpse of nature within the building.



Fig: 2.3.5

Each of the hospital's departments is related to specific roof gardens.

Each garden has its characteristics and they are varied by location and function.

The green zones encourage social interaction and offer space for contemplation in an environment of natural materials and plants.



Fig: 2.3.6

PLAN:



CIRCULATION



PRIMARY ACCESS

SECONDRY ACCESS

Fig: 2.3.7

CROSS-SECTION:



Fig: 2.3.8



Fig: 2.3.9

SITE PLAN:

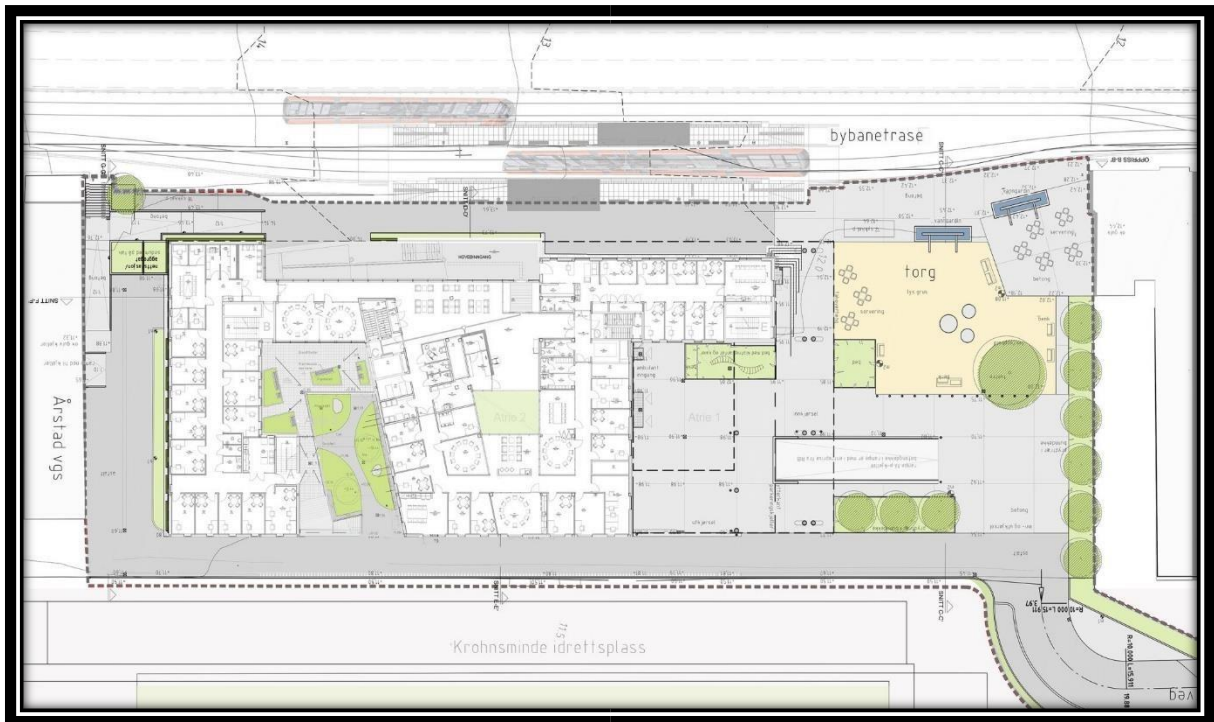


Fig: 2.3.10

2.4 UNIVERSITY PSYCHIATRIC CENTRE; BELGIUM

2.4.1 GENERAL DESCRIPTION:

The psychiatry building is part of AWG Architects' master plan for the further development of the UZ Gasthuisberg campus.

It is structured around an internal patio.

The eccentrical position of the patio allows the creation of different sections for large therapy rooms and smaller spaces such as patients' rooms.



Fig: 2.4.1

The master plan sets out measures to create an urban context, which include creating density and differentiation in the public space and building a diverse range of streets and squares.

This will enable the open 'green' zones around the site to be safeguarded.



Fig: 2.4.2

2.4.2 ARCHITECTURAL ELEMENT:

The entire site is surrounded by a new ring road, and several 'main streets' run through the site to create structure.

The psychiatry building, designed by Stéphane Beel Architects, is located on the edge of this master-plan zone, in between the ring road, the green zone, and one of the main streets.

The master plan allows for a building volume of five-story.



Fig: 2.4.3

Much thought has gone into choosing the right materials and decoration.

Perforated glazed bricks and acoustically absorbent floors and ceilings have been used to create an acoustically pleasant environment.

More specifically, the rubber tiles chosen for the patio floor meet both acoustic and other requirements (safety, look and feel, etc.)

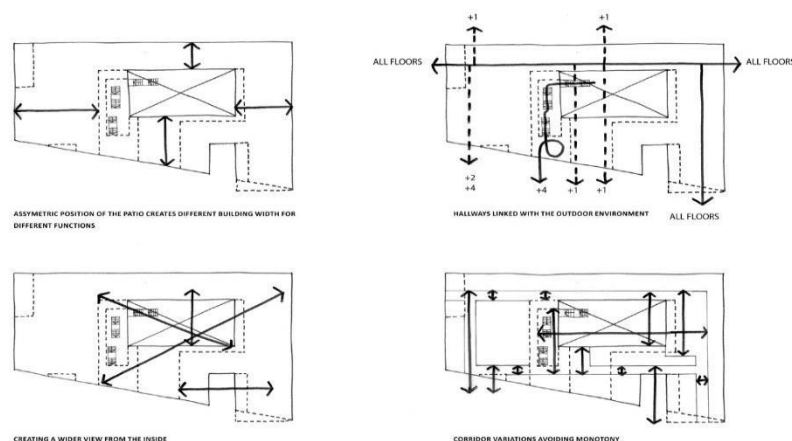


Fig: 2.4.4

2.4.3 PSYCHOLOGICAL ELEMENT:

The patio has been developed as a 'therapeutic landscape'.

This 'landscape' is connected to every floor so that patients can reach their therapy areas by passing through them.

At the same time, it is a place for relaxation and informal contact between patients, visitors, and healthcare professionals.

On the third floor, this 'therapeutic landscape' culminates in a spacious terrace, which connects to the sports hall.

From here, patients have a view out over the green zone and Leuven city center.



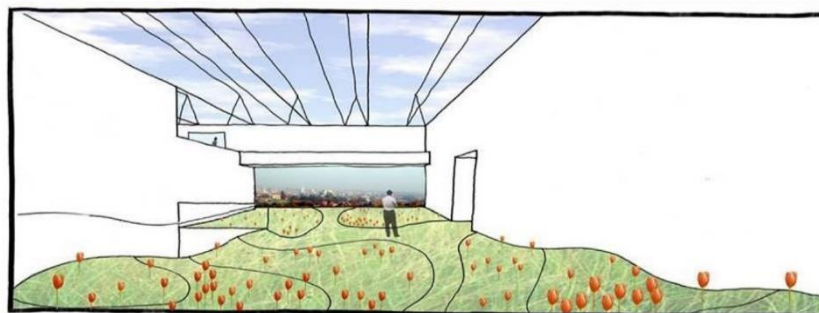
Fig: 2.4.5

The inner patio is surrounded by perforated brickwork.

This material is absorbing and helps to avoid loud noises on the patio.

In the whole building, there was a lot of attention to acoustics.

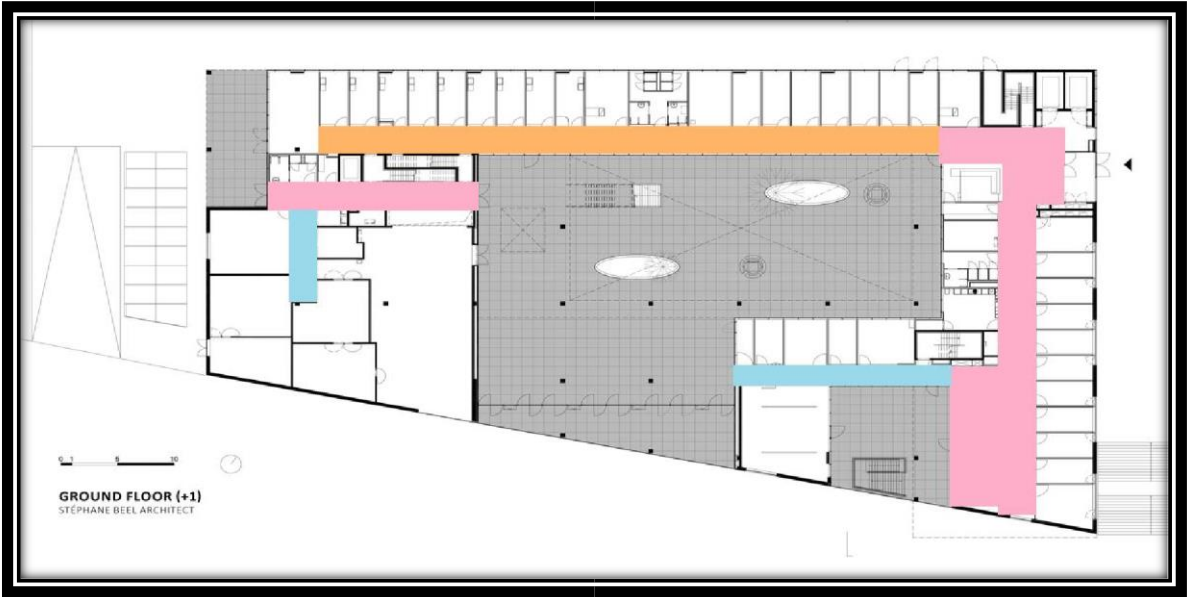
A crucial item to create a relaxing and tempering atmosphere.



THERAPEUTIC LANDSCAPE
STEPHANE REEL ARCHITECT

Fig: 2.4.6

PLAN:



CIRCULATION

- PRIMARY ACCESS
- SECONDARY ACCESS
- TERTIARY ACCESS

Fig: 2.4.7

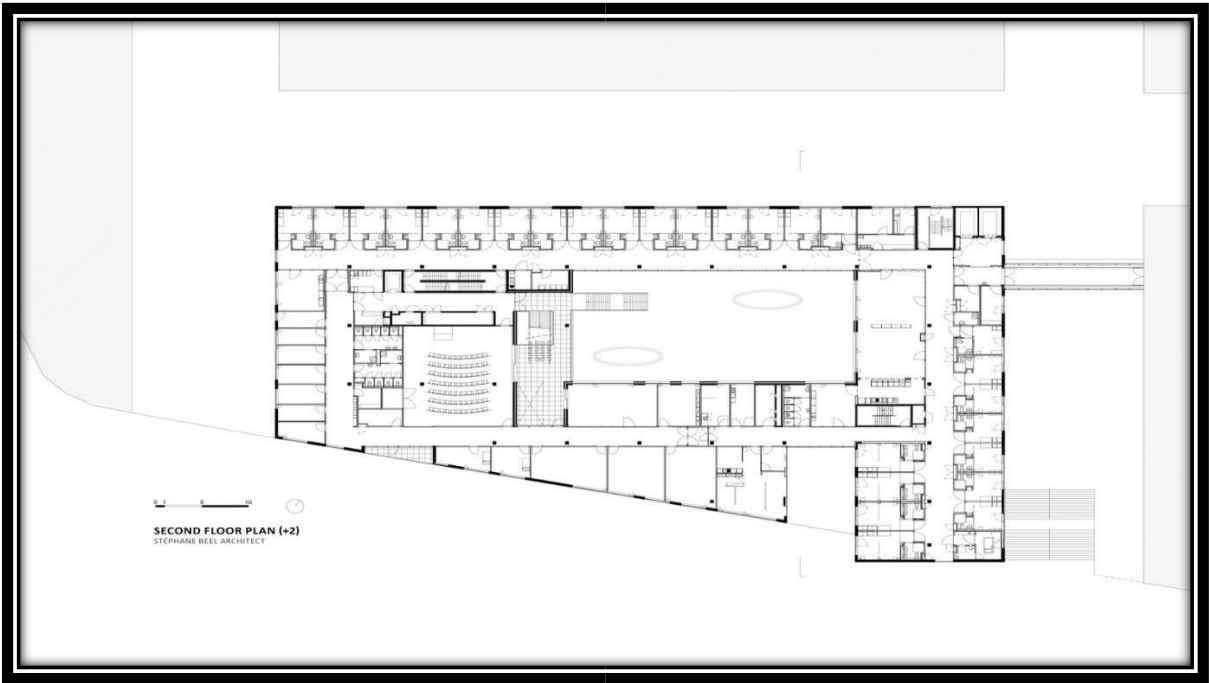


Fig: 2.4.8

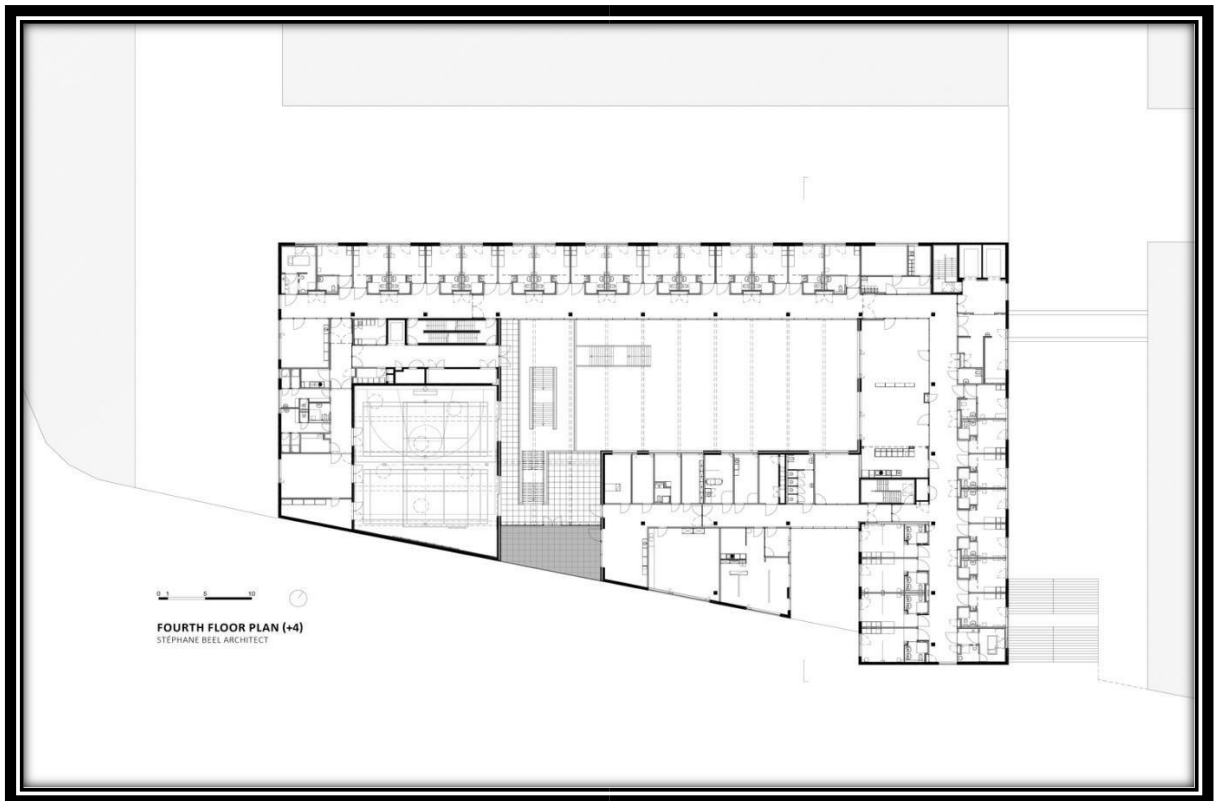
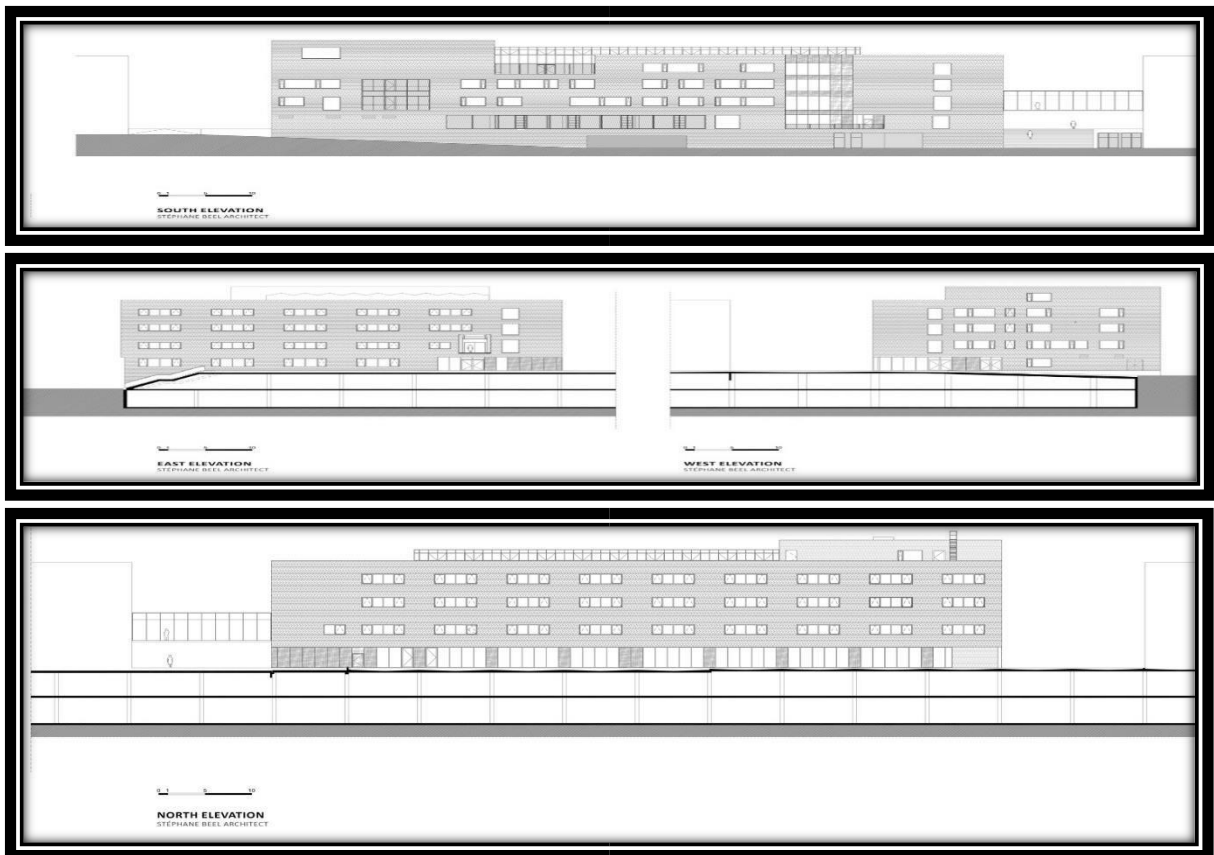


Fig: 2.4.9

ELEVATIONS:



2.5 PSYCHIATRIC CENTER; SPAIN

2.5.1 GENERAL DESCRIPTION:

The project is a reflection on memory: the pass of time and the evolution of architecture.

The proposal is a way to intervene in a 19th-century building.

The traces of the past are engraved in the new buildings, like a memory of ancient geometries.

It is an unfinished architecture that the time will end up composing in the place.



Fig: 2.5.1

Intervention Proposal

The proposal maintains and enhances the original values.

Pavilion typology in a 19th-century building, pleasant scale in a landscaped surround, but neglected until now.

Interesting spaces between pavilions, a suitable scale, well-proportioned patios: a good connection between the patient and the concrete environment and environmental.

A perfect relationship between nature and architecture.



Fig: 2.5.2

2.5.2 ARCHITECTURAL ELEMENT:

Prosthetic Strategy:

The project aims to offer a hybrid between new and old buildings, trying to make the most of the values of the existing and making it possible thanks to new "dressings" that re-vitalize the desired function: as a functional "prosthesis".



Fig: 2.5.3

In the same way that prostheses help the original member to recover a lost function, in this case, they reconfigure the space and make possible the new functions, in addition to complementing the structure to accommodate the new healthcare trends and channel and assimilate the new technologies

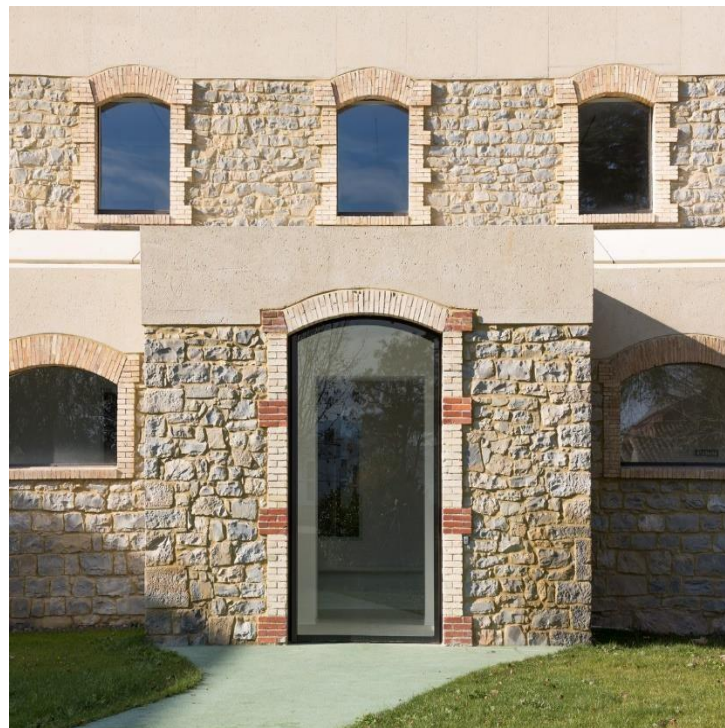


Fig: 2.5.4

Construction in concrete

The entire building is constructed in structural architectural concrete - facades and roofs - so the entire construction acts as a large beam.

The concrete is dyed in mass with the color of the cement that joins the stones and the brick of the old buildings.

In this way, it is intended to take the color of the dominant atmosphere as a whole.

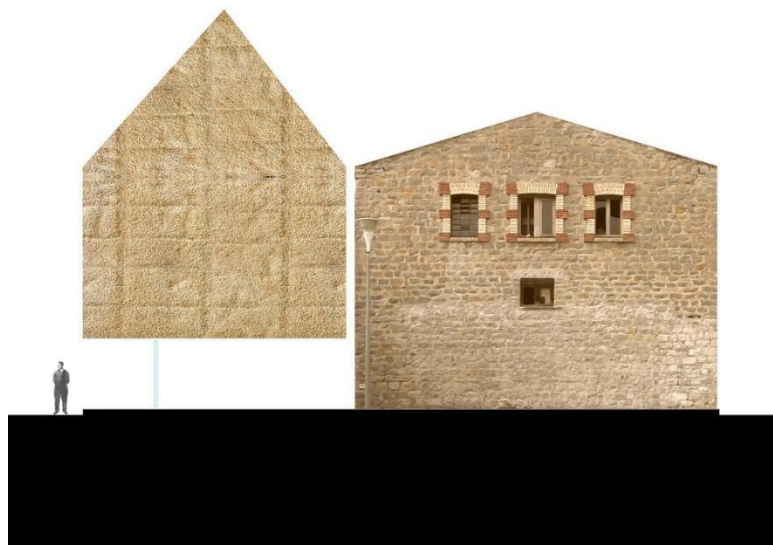


Fig: 2.5.5

The geometries of the arches of the old buildings are engraved on the new facades, as a "memory" ... the memory of what was left ... with time, the building will blacken and take on the patina of the old buildings, depending on its orientation and dominant winds, and little by little the building will blend with the previous ones.



Fig: 2.5.6

2.5.3 PSYCHOLOGICAL ELEMENT:

The aim is to enhance the original "hygienist spirit" and "therapeutic spirit" favoring occupational therapy and daily activities as fundamental treatment elements for good care of patients.

Therefore the relationship of architecture with the "domesticated" nature is refocused, the exterior spaces and courtyards generated between the general circulations.



Fig: 2.5.7

Poetic relationship between the new and the old

It is intended to generate an "atmosphere" analogous to the existing one, through buildings of the contemporary invoice, supported by current and flexible technological construction systems for their future use, and inspired by existing architectures, with which they should complement and mutually revalue.



Fig: 2.5.8

SITE PLAN



Fig: 2.5.9

FLOOR PLAN



Fig: 2.5.10

SECTION

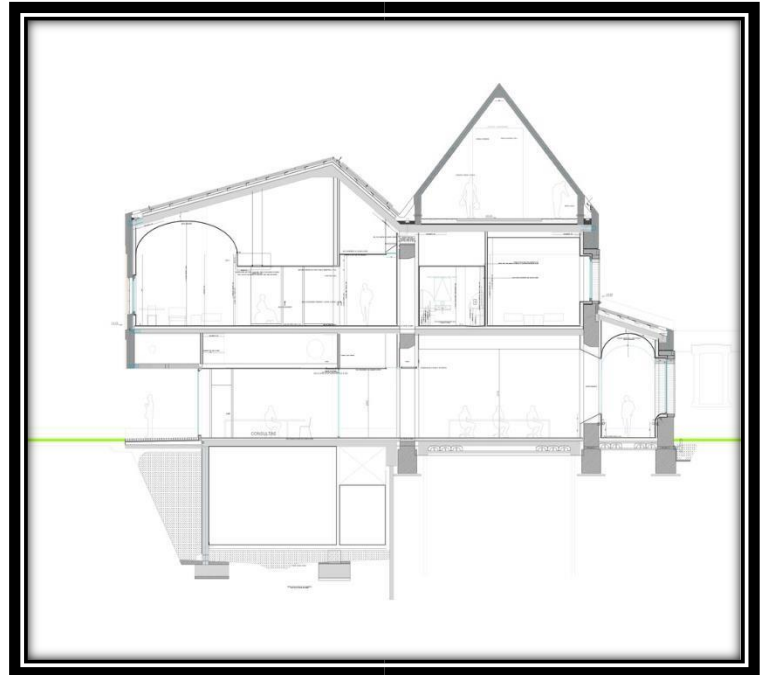
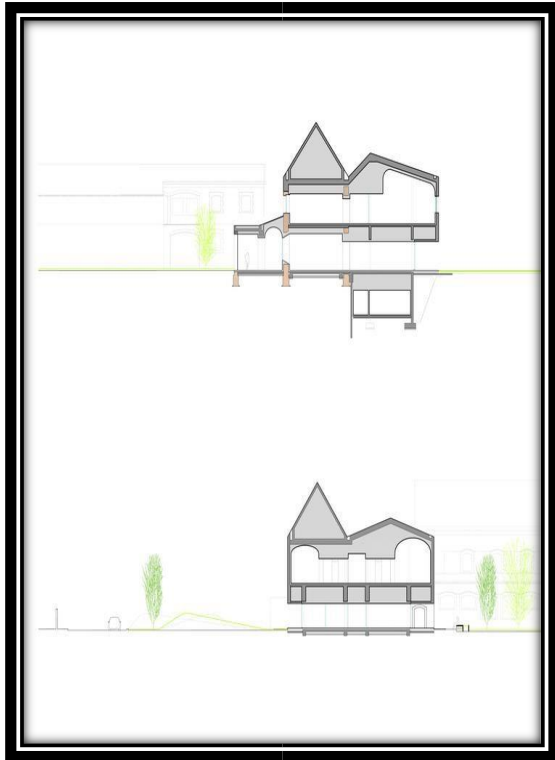


Fig: 2.5.11

ELEVATION



Fig: 2.5.12

3D MODELS

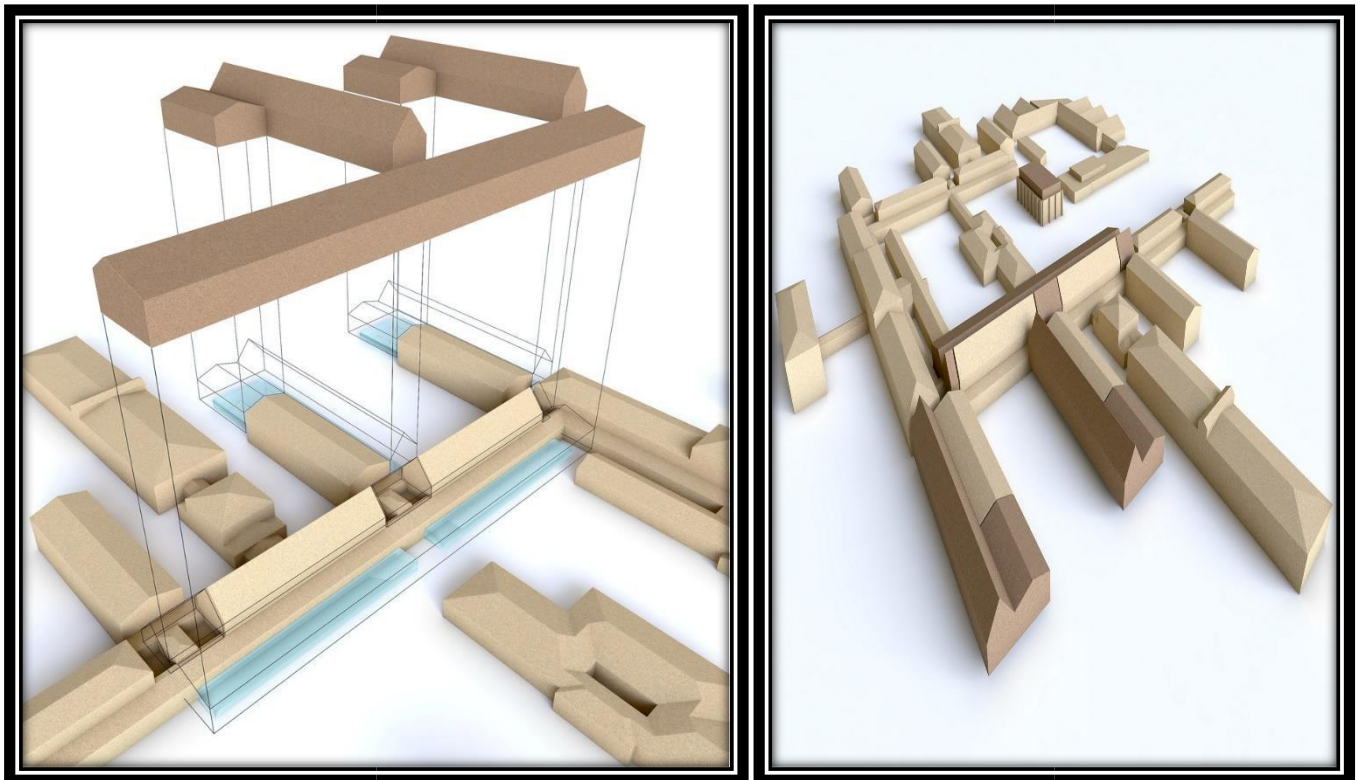


Fig: 2.5.13

MASTER PLAN

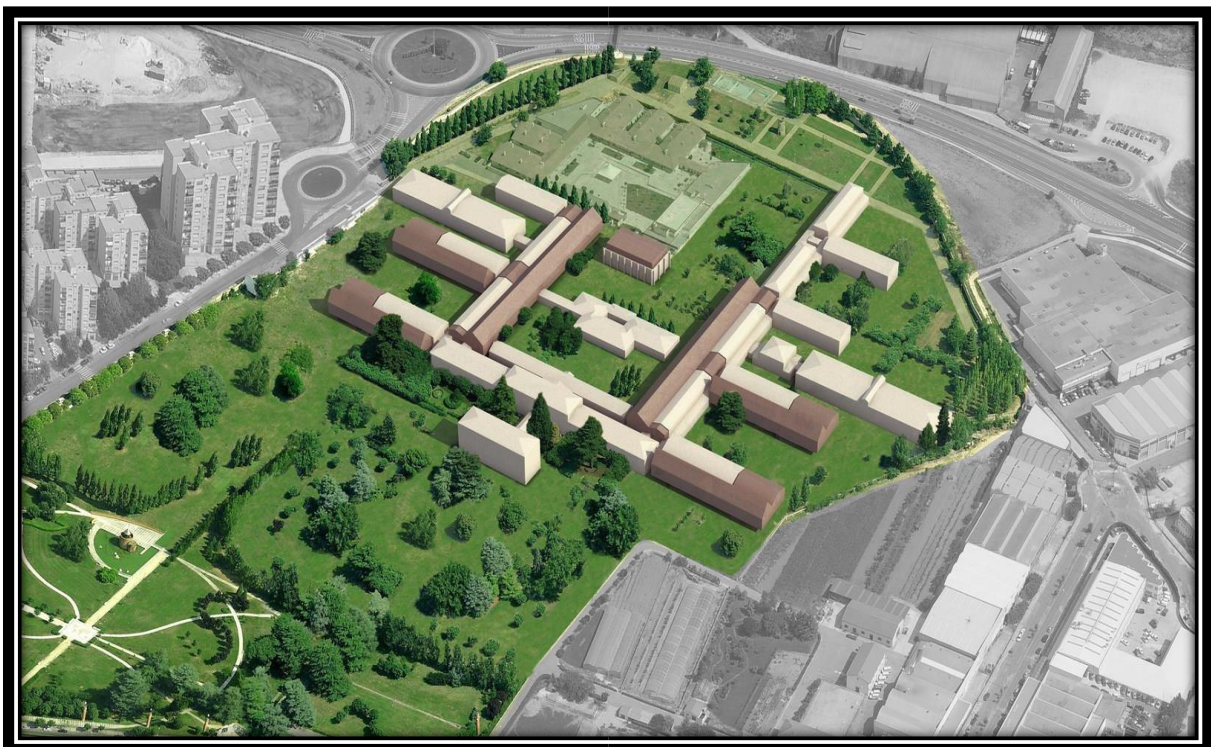


Fig: 2.5.14

2.6 VEJLE PSYCHIATRIC HOSPITAL; DENMARK

2.6.1 GENERAL DESCRIPTION:

The psychiatric hospital opened in the Danish city of Vejle.

Since the opening, the hospital has registered a 50 percent decrease in physical restraint and it is widely acknowledged for its healing architecture.

This was underlined in mid-June when the hospital won the Mental Health Design category at the European Healthcare Design Awards 2018 in competition with mental health buildings from all over the world.



Fig: 2.6.1

The building is designed by Arkitema Architects as part of a Public-Private Partnership, where the PPP team designs, builds and runs the building.

The idea of the hospital was to create a visionary mental health hospital with 91 beds, children's ambulatory, psychiatric ER, and ECT.

The background for the project is a regional focus on outpatient treatment.

Thus, the new hospital supports the treatment of patients with intensive and complex behavioral conditions which require hospitalization.



Fig: 2.6.2

2.6.2 ARCHITECTURAL ELEMENT:

A primary design focus has been on a visionary healthcare design that encourages physical activity and minimalizes forceful intervention.

During the design process, the focus was to create the best possible surroundings for patients as well as employees.

This is done by ensuring ample light throughout the building, easy access to nature and outdoor spaces, transparent wards with easy overviews, and a well thought layout.



Fig: 2.6.3

In the layout extroverted functions such as ER reception and children's psychiatry are located as inviting units upon arrival, while wards are withdrawn within the building.

The enclosed First-floor links administration and discreet patient transport in a ring structure which expresses a spatial division and forms a clear hierarchical façade.



Fig: 2.6.4

2.6.3 PSYCHOLOGICAL ELEMENT:

Green access and plenty of light

The hospital is gently placed at the bottom of a forest-covered hillside.

The plan layout is made up of smaller square masonry building units that twist from another, which makes room for prolonging the surrounding nature into the spaces between the buildings.

The building breaks down the scale, merges with the landscape, and thereby matches the surroundings.

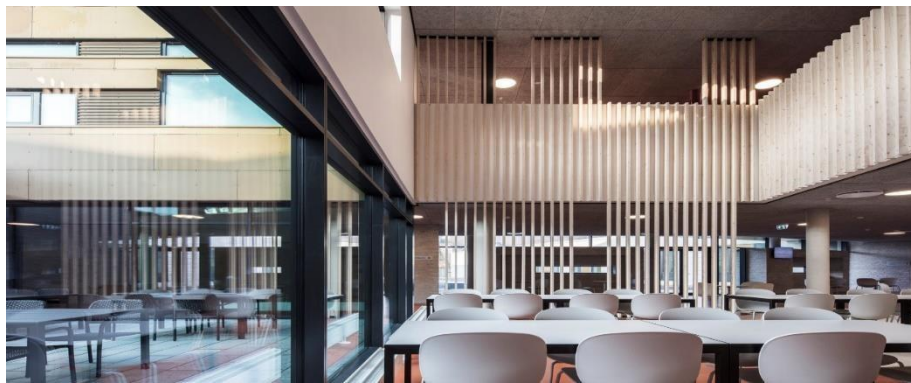


Fig: 2.6.5

To ensure the full outcome of lights healing effect on psychiatric patients the architects have designed the building with a special focus on both natural and artificial light.

Glass panels and interior courtyards bring ample daylight into the building.

Withdrawn ceilings and interior glass help light extend even further through the building.

Furthermore, 24 hours of colored light therapy is integrated into the wards for calming recovery, sleep support, elimination of depression, and preservation of a natural circadian rhythm for staff and patients.



Fig: 2.6.6

FLOOR PLANS



Fig: 2.6.7



Fig: 2.6.8

CASE STUDY INFERENCE

CENTER FOR PSYCHOSOCIAL REHABILITATION; SPAIN
PSYCHIATRIC CENTRE; GERMANY



- Lighting
- Gardens
- Single access
- Natural ventilation
- Single building
- Recreational area
- View point
- Color

KRONSTAD PSYCHIATRIC HOSPITAL;
NORWAY



- Natural lighting
- Ventilation
- Open appearance
- View point
- Single building
- Interaction spaces
- Color
- Materials

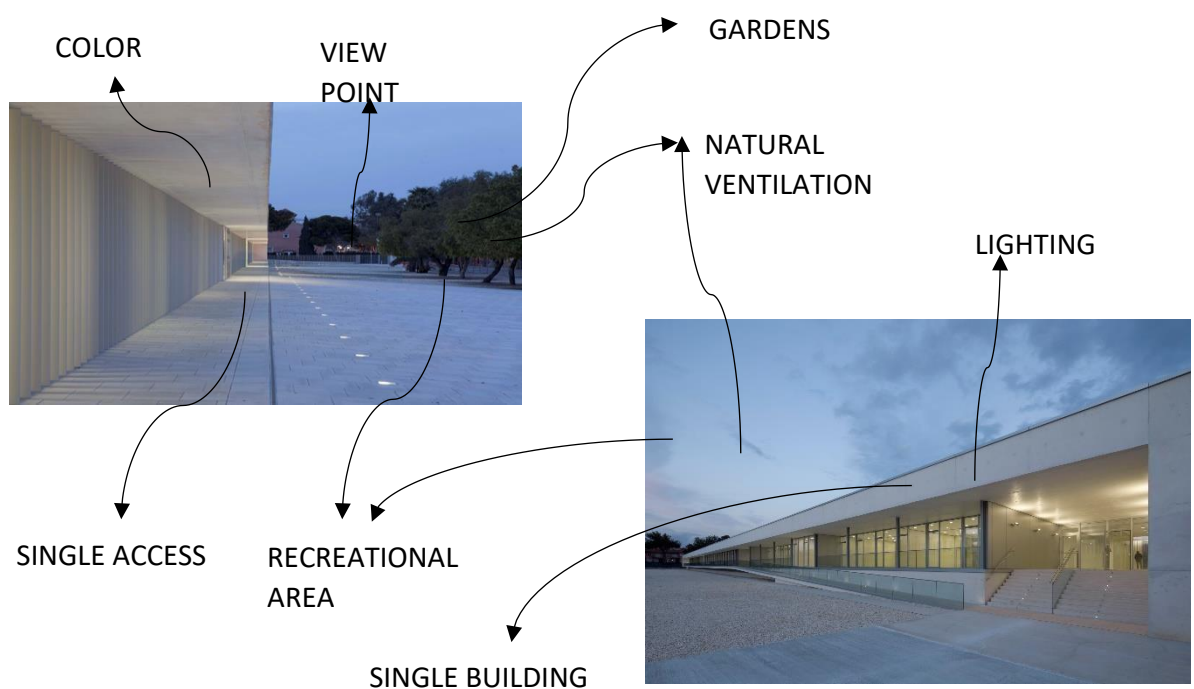
UNIVERSITY PSYCHIATRIC
CENTRE; BELGIUM



- View point
- Gardens
- Open appearance
- Outdoor
- Interaction spaces
- Roof gardens
- Ventilations • Natural Lighting
- Materials
- Color

- Therapeutic landscape
- Internal patio
- Open appearance • Natural Lighting
- Ventilation • Acoustics
- Vegetation
- Terrace
- Color

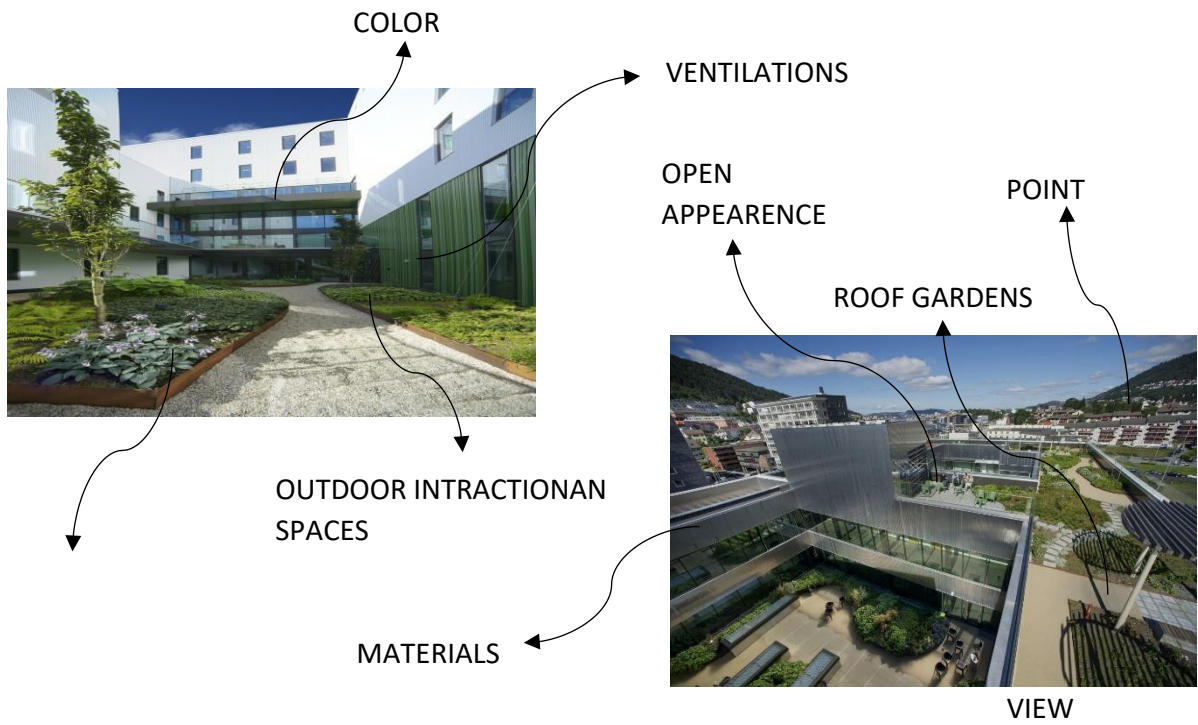
CENTER FOR PSYCHOSOCIAL REHABILITATION; SPAIN



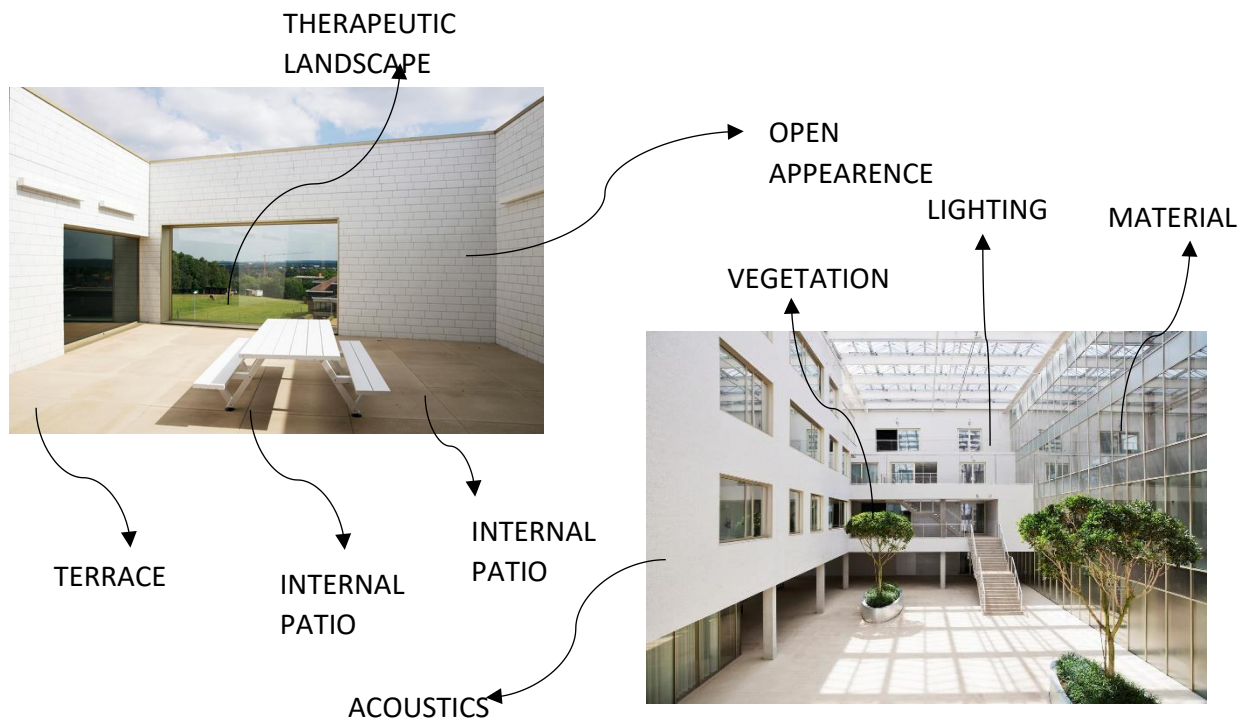
PSYCHIATRIC CENTRE; GERMANY



KRONSTAD PSYCHIATRIC HOSPITAL; NORWAY



UNIVERSITY PSYCHIATRIC CENTRE; BELGIUM



3. INFERENCE:

- The location of the hospital determines the major role in psychiatric treatment.
- To emphasis the natural ventilation into the building.
- Natural lighting give the comfort and safeness to the patients.
- Roof gardens and gardens took the part of green zone and drops down the temperature around the spaces.
- The view point to the natural elements like (mountains, lakes) add glimpse of nature within the building.
- The outdoor recreational spaces take the major role to the people in the hospital.

- The therapeutic landscape gives the relaxation and interaction spaces give an informal contact for the patients and visitors.
- The materials selection for the hospitals should be an acoustic material.
- The color white plays the role in the psychiatric hospital.

4. PSYCHIATRIC HOSPITAL DESIGN STANDARDS

Mental health design is a critical component of patient care. The design of mental health facilities affect how services are provided and the efficiency with which care is delivered. Equally, if not more important, than its direct functional impact, however, is the psychological impact mental health facility design has on its user.

Facility design impacts the beliefs, expectations, and perceptions patients have about themselves, the staff who care for them, the services they receive, and the larger health care system in which those services are provided.

Moreover, facility design can also have a significant impact on the beliefs, attitudes, and behaviors of staff and on how staff identifies and interact with patients and the environment.

Some of the most common mental health conditions

Mood disorders, including major depressive disorder; substance use disorder (SUDs)

Posttraumatic stress disorder (PTSD)

Conditions related to military sexual trauma (MST)

And other trauma-related conditions
Anxiety disorders, such as panic disorder
Obsessive-compulsive disorder, and
Specific phobias;
Serious mental illness (SMI)
Bipolar disorder
Schizophrenia disorders and Other
psychotic disorders.

Veterans presenting for mental health treatment often have multiple mental health, as well as physical health, problems.

Professionals for a psychiatric hospital;

Psychiatrists
Psychologists
Social Workers
Advance Practice Nurses/ Nurses Practitioners
Registered Nurses
Licensed Practical Nurses
Licensed Vocational Nurses
Dieticians
Rehabilitation Technicians
Recreational Therapists

Guiding Principles;

1. Mental health services should be recovery-oriented.

- Patient and family-centered.
- Rehabilitation/recovery-focused.
- Evidence-based.
- Emphasis on community reintegration.

2. Mental health services should be provided in a therapeutically enriching environment.

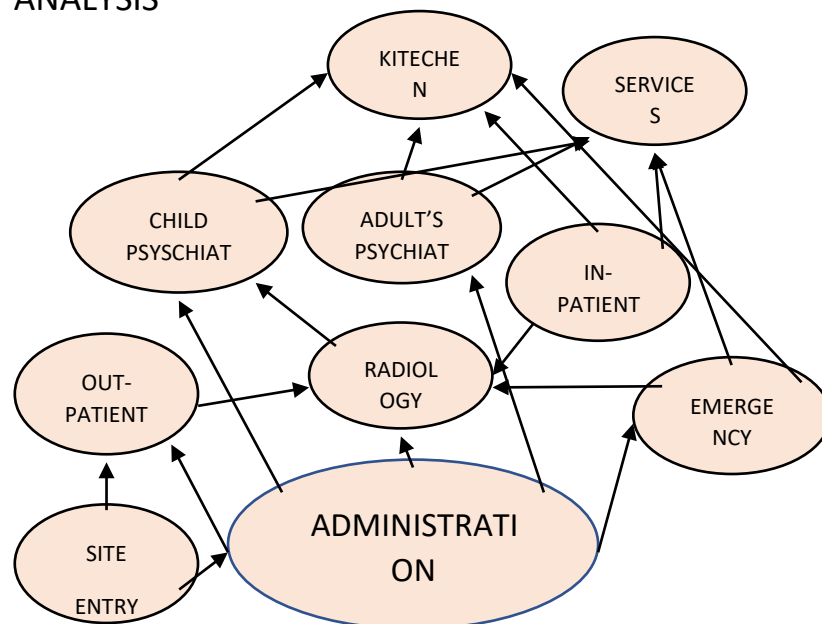
- Homelike.
- Familiarity.

- Visual and physical access to nature to promote healing.
 - Patient autonomy, respect, and privacy.
3. Mental health services should be provided in a safe and secure environment.
- Minimize potential psychical hazards.
 - Enhance staff visibility and engagement with patients.
 - Use of abuse-resistant materials, furnishings, and fixtures.
 - Incorporate safety promoting technologies (e.g., personal duress alarms, pressure-sensitive door head alarms).
4. Mental health services should be integrated and coordinated.
- Promote collaboration among care providers.
 - To the largest extent practical, treat the patients for multiple diagnoses in the same setting.
 - Use of technologies to promote continuity of care.
5. Mental health services should be provided in settings that respect and can accommodate a diverse range of patient populations and care needs.
- Provide appropriate accommodations for specific patients groups.

Promote safety privacy and dignity of female veterans provide separation within inpatient units or provide distinct units, where necessary.

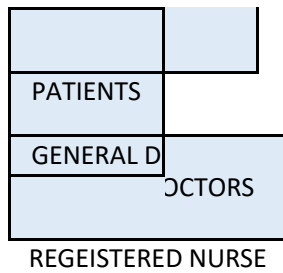
5. DESIGN PROGRAM

SPACE & USER ANALYSIS



PATIENTS

PSYCHIATRISTS



NURSE

PRACTITIONERS

VOCATIONAL NURSES

PRACTIAL NURSES

DIETICIANS

RECREATIONAL

THERAPISTS

SOCIAL WORKERS

STAFFS

6. AREA STATEMENT

SECTION	FUNCTIONS	NO. OF ROOMS	AREA (SQ.m)
ADMINISTRATION	ENTRANCE		75
	SECURITY		55
	BILLING		60
	DISPLAY ZONE		475
	LOBBY		10
	PANTRY & SEATING		35
	SERVICE LOBBY		35
	WAITING AREA		35
	STORE ROOM		63
	TOILET		35
			878
OUT-PATIENTS	ENTRANCE		150
	RECEPTION AREA		240
	WAITING AREA		500
	LOBBY		90
	DOCTOR ROOMS/ TOILET		180
	NURSE STATION		25
	PHARMACY		50
	PANTRY		25
	LOUNGE		30
	VOCATIONAL TRAINING		110
	PUBLIC & STAFF TOILETS		50
	THERAPY ROOM		50
	CONSULTANCY		85
	SERVICES		30
	EMERGENCY ROOM		65
			1680
CHILD'S PSYCHIATRIC	ENTRANCE		85
	RECEPTION AREA		150
	WAITING AREA		130
	PUBLIC & STAFF TOILETS		50
	DOCTOR'S ROOM / TOILETS		35
	ACTIVITY SPACES		100
	PLAY AREA		85
	SLEEPING ROOM 6per		100
	PHARMACY		50
	PANTRY		25
	LOBBY		90
	NURSE STATION		50
	PHYSICIAN		50

	VOCATIONAL TRAINING		100
	DUTY DOCTOR ROOM		50
	THERAPY ROOM		75
	SERVICES		30
			1255
ADULT'S PSYCHIATRIC	ENTRANCE		85
	LOBBY		90
	SHARING BEDROOM 2per	6	100
	CLASS ROOM 15per	4	150
	DUTY DOCTOR ROOM		50
	PANTRY		25
	WAITING LOUNGE		100
	THERAPY ROOM INDOOR		50
	THERAPY ROOM OUTDOOR		90
	DOCTOR'S ROOM / TOILETS		35
	ACTIVITY SPACES		85
	LIVING ROOM		200
	LOUNGE		30
	SERVICES		30
			1120
IN- PATIENTS	ENTRANCE		85
	RECEPTION		75
	STAFF STATION		50
	SHORT TERM RESIDENCE	10	250
	DOCTOR'S ROOM/ TOILET		50
	NURSE STATION		50
	ACTIVITY SPACES		95
	LIVING ROOM		150
	LOUNGE		30
	PHARMACY		50
	PANTRY		25
	VOCATIONAL TRAINING		45
	RECREATIONAL AREA		75
	INTENSIVE CARE		85
	DUTY DOCTOR ROOM		50
	THERAPY ROOM		75
	SERVICES		30
	LAUNDRY ROOM		30
	EMERGENCY ROOM		150
	ROOMS	20	750
			2200
EMERGENCY ROOM			

	ENTRANCE	70
	WAITING AREA	45
	FRACTURE TREATMENT ROOM	30
	DOCTOR ROOM	50
	GENERAL WARD	80
	FIRST AID ROOM	20
	EMERGENCY WARD	75
	MINOR OT	30
	LOBBY	50
	TOILETS	20
	ICU	60
	NURSE STATION	50
	ROOMS 4per	150
	DUTY NURSE ROOM	20
	DOCTOR'S STATION	50
	ANAESTHESIA ROOM	20
	UTILITY	10
	LOUNGE	30
	OPERATION THEATRE	40
	OBSERVATION ROOM	40
		940
RADIOLOGY	ENTRANCE LOOBY	65
	WAITING AREA	100
	RECEPTION	15
	COMMON SPACE LOBBY	45
	WAITING LOUNGE	30
	PATHOLOGY	40
	MRI	50
	CT SCAN	50
	RADIOLOGY	60
	TOILETS	20
	X-RAY ROOM	35
		510
KITCHEN	ENTRANCE LOBBY	25
	PANTRY	30
	LOBBY	20
	DRY STORAGE	10
	COLD STORAGE	10
	PREPARATION	20
	HOT COOKING	30
	DISH WASHING UNIT	17
	PANTRY STORAGE	35
	STAFF ROOM	25

	TOILETS	20
	STORAGE ROOM	35
		277
HOUSE KEEPING	COMMON SPACE & LOOBY	50
	CLEAN STORAGE	20
	IRONING	20
	WASHING & DRYING	45
	DIRTY STORAGE	30
		165
	TOTAL AREA	9025 Sq.m

INTRODUCTION

Psychiatric hospitals, also known as mental hospitals, mental asylum's or simply asylums, are hospitals or wards specializing in the treatment of serious psychiatric illnesses, such as clinical depression, schizophrenia and bipolar disorder.

"Mental health refers to cognitive, behavioral, and emotional well-being. It is all about how people think, feel, and behave. People sometimes use the term "mental health" to mean the absence of a mental disorder."



The mental hospital therefore becomes an intensely problematic space due, in part, to its physical features such as its geographical isolation from the world, designs for confinement and surveillance, depressing wards and crowded dormitories.

It is also seen as a site of perpetual conflict between disciplines and communities, such as psychiatrists, psychoanalysts and social and behavioral scientists, the latter gaining their institutional strength and legitimacy from the university, rather than the mental hospital which was increasingly questioned as a locus of research and care.



Psychiatric Hospital



DEPARTMENT OF ARCHITECTURE

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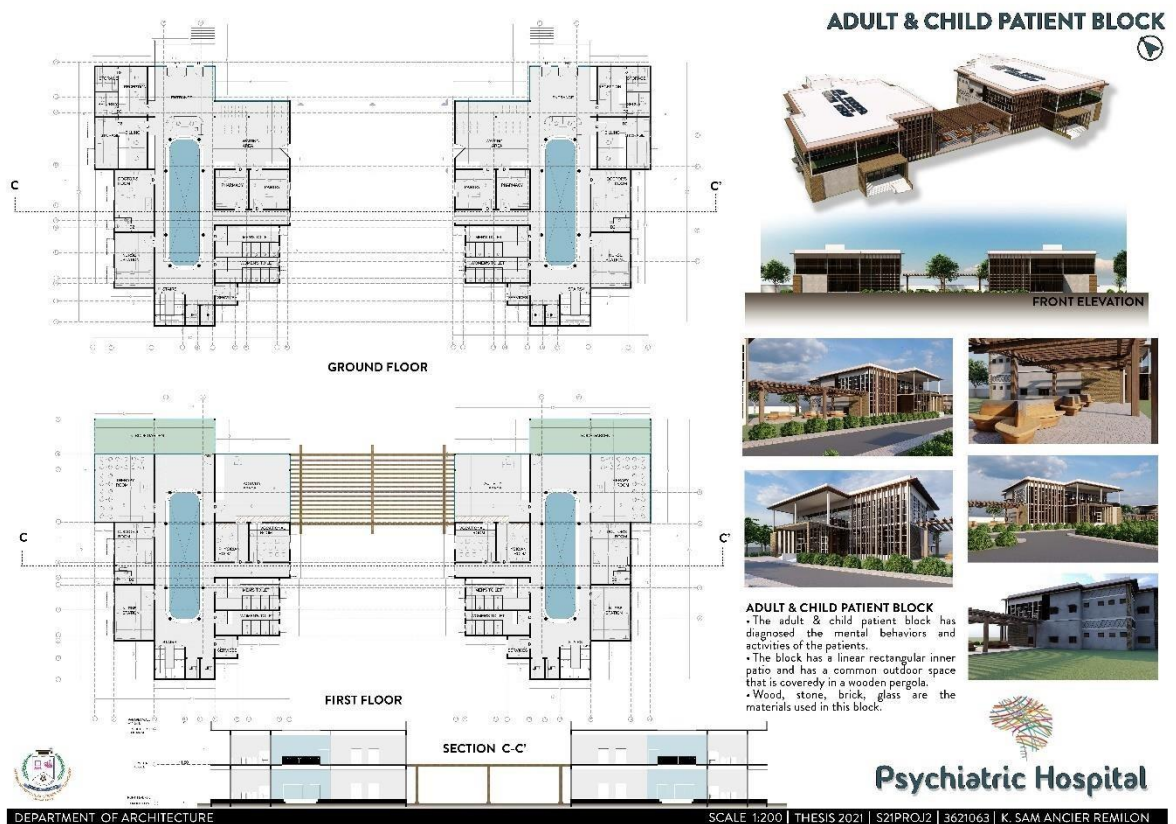
MASTER PLAN

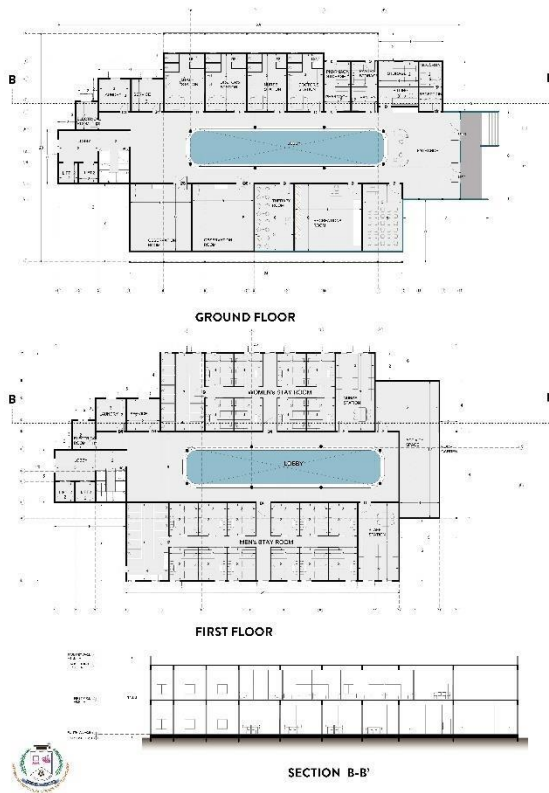


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Psychiatric Hospital





INPATIENT BLOCK

- The in-patient block is where the patient can stay to get treated for their illness.
- The block has a separate ward for both men and women where they can get treatment, for both physical and mental behaviors.
- It has common activity space and interaction spaces for their communication and way of activities towards the people.
- Wood, stone, brick, glass has been used as the material in the building.



INPATIENT BLOCK



FRONT ELEVATION



SIDE ELEVATION



SIDE ELEVATION

IN PATIENT BLOCK

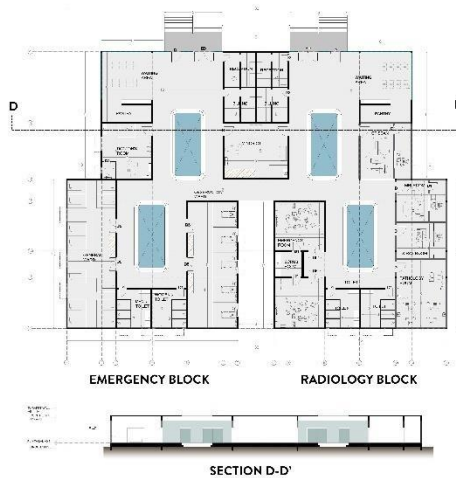


Psychiatric Hospital

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RADIOLOGY AND EMERGENCY BLOCK



RADIOLOGY AND EMERGENCY BLOCK

- The radiology and emergency block has needs of equipment for the outpatients and inpatients for the treatments.
- The block has general wards and observation wards for temporary people to get the treatments.
- Stone, brick, wood, glass materials have been used in the building.



RADIOLOGY AND EMERGENCY BLOCK



GENERAL WARD



OBSERVATION WARD



FRONT ELEVATION



RADIOLOGY BLOCK



EMERGENCY BLOCK



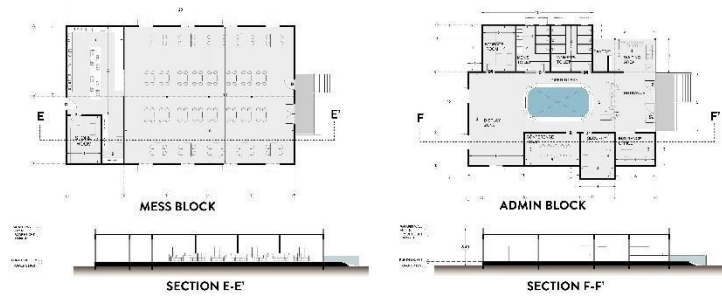
MRI ROOM



Psychiatric Hospital

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MESS BLOCK
MESS AND ADMIN BLOCK
 • The mess block has seating for the outpatients and delivered food for the inpatients and the temporary stay patients.
 • The admin block has its insurance office and display zone about the mental disorders and their treatments.
 • Stone, brick, wood, glass have been used in the buildings

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MESS AND ADMIN BLOCK



Psychiatric Hospital



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