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# ARHITEKTURA ZGRADA ZA ZDRAVSTVO – TRANSFORMACIJA KONCEPTA BOLNIČKIH ZGRADA

DOKTORSKA DISERTACIJA [SAŽETAK]

## ARCHITECTURE OF HEALTHCARE FACILITIES – TRANSFORMING HOSPITAL BUILDING CONCEPT

DOCTORAL DISSERTATION [SUMMARY]

This doctoral dissertation explores the potentials of architecture through the redefinition of hospital building programs, re-evaluation of their functioning as well as reflection on providing health services in general. In the triangle formed by the social paradigm of health, medical technology, and architectural space and place, realistic and applicable causal relations are established, and innovative models of conceptualization and organization of hospital buildings are ultimately being defined.

The analysis of health care system and interaction with hospital architecture has shown a great variety of program concepts, the complexity of both the health care system and the system of typologies of hospital buildings, which often results in conflicting demands within each other. Various influential directions that form the entire environment, in which hospital buildings originated, are being connected by through elaboration and analysis of the conclusions in this thesis.

The aforesaid environment also includes factors derived from norms prescribed by the state and requirements related to the procedures of the medical profession, as well as the requirements by various patients' groups. All these requirements should be fulfilled simultaneously in one place. In the process of conceptualizing the space that will equally treat all of these, often conflicting demands, it is necessary to come up with a holistic approach that will result in enhanced hospital buildings' types.

This research explores traditional creations of medical buildings with the intent to discover potentials for innovation in this area. The new platform reconstructs the link between urbanism, architecture, and healthcare to improve the organization and function of hospital buildings. The thesis shows that hospital, as a building type, inevitably needs reconstruction. In order to come up with guidelines for future development, the path for development of hospital buildings architecture is given within the overall field of architecture. The types and programs of hospital buildings are presented chronologically, in parallel with the development of medical procedures. It explains how the health systems operate and are analyzing the interrelations between the system and hospital as an institution i.e. building.

Through the evolutionary historical development of hospital buildings' typology, it has been established that every paradigm shift (social contexts and medical procedures) allows transformations of settings that synchronizes concepts, medical technology, and architectural forms. Through the analysis of case studies, it has been shown that there is an exceptional potential for transforming the typologies of hospital buildings that, under multiple changes pressure such as socio-economic trends, nevertheless, continuously provide hospital care.

The paradigm shift that we are witnessing today has a dual character. First of all, there are strong social and cultural demands for a humane treatment, i.e. for treatment without the bureaucratic and financial monopoly of the state. At the same time, today's societies are constrained by the financial resources that are, however, necessary in order to introduce more sophisticated, thus more costly technologies in medical treatments.

The paper presents appropriate conceptual models and tools that can be used as guidelines for hospital planning in the future. Recognizing and elaborating new topics that result in innovative architectural parameters for designing healthcare buildings, the organization of hospital systems and hospital buildings is defined as a complex of adaptive systems that also emphasizes adaptability as the ability to change and learn from experience. The interrelation of the health care system and hospital buildings is formulated through the set of recommendations and guidelines that would further integrate and harmonize the needs for a health care system regulation as a part of a community and an individual's freedom of self-determination.

By establishing platforms of medical care continuums, goals would be met by focusing on hospital facility restructuring policies. By evaluating financial mechanisms, patients' freedom to choose their treatment location and their freedom of self-determination, hospital services would be improved. This would inevitably lead to providing adequate healing services. With these new definitions of treatment, novel configurations of healthcare are being established.

[Translated by AJLA TERZIĆ]

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■ Doktorska disertacija istražuje potencijale arhitekture kroz redefiniciju programa bolničkih zgrada, reevaluaciju načina njihova funkcioniranja i, općenito, kroz promišljanje načina pružanja zdravstvenih usluga. U toku koji čine društvena paradigma zdravstva, medicinska tehnologija i arhitektonski prostor utvrđuju se realne i primjenjive uzročno-posljedične veze, a u konačnici se određuju inovirani modeli konceptualizacije i organizacije bolničkih zgrada.