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Kensington Center for Health: An Exploration of Health, Wellness and the Built Environment.

Rose Peck
Virginia Commonwealth University

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Kensington Center for Health

An exploration of health, wellness and the built environment.
A thesis submitted in partial fulfillment of the requirements for the degree of Master of Fine Arts at Virginia Commonwealth University.

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"A building should appear to grow easily with its site and be shaped to harmonize with its surroundings. [...] Design shall become in its atmosphere as pure and elevating in its humble way as the trees and flowers are in their perfectly appointed way." —Frank Lloyd Wright

MANIFESTO & PREFACE

This is a project that explores how design can integrate medical treatment and community support.

This project seeks to respond to the health needs of the community and integrate design elements in the way that Frank Lloyd Wright’s projects respond to nature.

Fallingwater respects the Bear Run by cantilevering over and meandering through the twists and turns of the river. The house grows out of the river, rather than trying to force it to change or take away from its natural beauty.

This project will gently respond to and quietly merge with the community without imposing or demanding.

I will design this project in the spirit of creating a thoughtful place that responds to what is while imagining what could be.
MOTIVATION
The high prevalence of chronic disease is creating a national healthcare crisis. Chronic disease is defined as a long-lasting condition that can be controlled but not cured and is the leading cause of death and disability in the United States. As a nation, 75% of our healthcare dollars goes to treatment of chronic diseases, and one out of every two adults has a chronic condition.

About half of US adults (47%) have at least one of the following major risk factors for heart disease or stroke: hypertension, dyslipidemia, smoking and sedentary lifestyle. Ninety percent of Americans consume too much sodium, increasing their risk of high blood pressure. In 2011, more than half (52%) of adults aged 18 years or older did not meet recommendations for aerobic exercise or physical activity.

Access to quality, effective support when managing chronic conditions is imperative to addressing treatments focused on healthy living and well-being. Well-being integrates mental health (mind) and physical health (body) and suggests a holistic approach to disease prevention and health promotion. The support and integration of community services to supplement clinical treatment is necessary to effectuate lifestyle changes.

PROBLEM
Fragmented healthcare treatment of complex and chronic health conditions often misses the view of the patient as a whole person and the idea of well-being. Clinical treatment of chronic disease is focused on self-management as a way to avoid or minimize illness and risk factors. There is a need to reinforce recommendations healthcare providers given the poor adherence rates of lifestyle change recommendations.

METHODS
Chronic disease is mostly caused by correctable problems such as poor diet, lack of exercise, tobacco use and high blood pressure. The Community Preventive Services Task Force recommends identifying effective community-based and healthcare system-based programs to which providers can refer their patients for additional education and support.

This project will investigate models of comprehensive care focused on treatment of chronic disease. The following precedent models are analyzed for programmatic strategies: Saint Anthony Hospital's new Focal Point Campus Center in Chicago IL, Stephanie Tubb Jones Health Center at Cleveland Clinic and Akershus University Hospital in Norway. Non-medical case studies are also reviewed to look at space planning strategies, material use and architectural considerations.

RESULTS
Consideration of a holistic sense of well-being that focuses on disease resistance, resilience, and self-management is necessary to realize and sustain health outcomes. Community engagement is imperative to improve adherence rates for lifestyle changes. The case studies reviewed all foster a strong tie to the community, offer spaces for connection, interaction and a variety of social resources.

CONCLUSIONS
The Kensington Center for Health aims to design a community wellness space that is focused on prevention, resilience and self-management. A new typology of a community-anchored wellness clinic could provide an environment to support positive change. This clinic will be a new model of care by combining the necessary access to fitness, healthy food, healthcare and childcare while fostering community, providing patient education and emotional support.
FACTS & FIGURES

A chronic disease is a long lasting condition that can be controlled but not cured. Some examples are heart disease, obesity, arthritis & asthma.  

One out of every two adults has a chronic condition.  

Treatment of chronic conditions accounts for 75% of national healthcare spending.  

One half of all patients leave primary care visits not understanding what their doctor advises.  

Lack of physical activity and poor nutrition are the top two health risk behaviors that cause much of the illness, suffering, and early death related to chronic diseases.  

Average adherence rates for prescribed medications are about 50%, and for lifestyle changes adherence rates are below 10%.  

INTRODUCTION

One half of all patients leave primary care visits not understanding what their doctor advises.  

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WELLNESS

Wellness is an active process through which people become aware of and make choices toward a more healthy state. The Wellness Wheel shows six main factors that are all equally important to achieve wellness.

This project will use the wellness wheel to develop a strategy to address the six components of wellness. The Kensington Center for Health will create spaces that combine the components of wellness by thoughtful programming that combines physical health with community support, education, behavioral health and facilitate each user’s pathway to their own understanding of spirituality.
THESIS STATEMENT

This project aims to design a community wellness center that fosters a community that supports well-being.

Kensington Center for Health will create a central space to support activities that foster wellness and respond to the low adherence rate for recommended lifestyle changes.  

PROGRAM SUMMARY

A **CLINIC SPACE** that provides quality primary care and sub-specialty care.

A **FITNESS CENTER** with exercise classes and fitness equipment to support physical health.

A **CAFE** with fresh and local food and a teaching kitchen that provides educational programming.

A **CHILDREN’S CENTER** provides drop-in childcare to create a fun place for children to play.
Why is community support imperative to promoting wellness?

Providing local clinics that are integrated into the community is essential to help the battle against the staggering growth rate of chronic conditions.\(^7\)

Research highlights the importance of creating spaces that are attractive in appearance, supportive of social interactions, and welcoming for people to linger and cultivate social capital within the community. \(^3\) These spaces should be part of every community. People who feel an emotional bond with a neighborhood, park, or other setting demonstrate greater commitment to the community surrounding that place, and report higher levels of well-being.\(^3\)

Kensington Center for Health will become a space for building a healthy community with the clinic as its centerpiece that integrates clinical care, community support, physical fitness, and healthy diets.
INTRODUCTION TO THE BUILDING

Architect Charles M. Robinson designed Kensington Street Elementary School at 3101 Kensington Avenue in Richmond, VA in 1919. The building operated as an elementary school until 1986 when it was closed due to low enrollment. In 2001 the building was converted into apartment units.  

The Colonial Revival building has a large flat roof, engaged Corinthian columns, and tall round-arched windows. Anchoring either end of the central section are three story square towers, each topped by a copper dome above a bracketed frieze and dentil cornice.

The Kensington Street Elementary School is centrally located in the residential neighborhood of the Museum District. It is ADA accessible, has ample parking, large windows and is an ideal site to create a welcoming space for the community.

By adding a health clinic, fitness center and cafe, this building can be the metaphorical heart that delivers life to the neighborhood.
The Museum District by the Numbers:

- $44,000 ------- Median Income
- 7,428 ----------- Residents Per Square Mile
- 30 --------------- Median Age
- 22% ------------ Percentage of Family Households
- 20.4% --------- Percentage of Population Below Poverty Level
- 2,873 ---------- Total Number of Residents

Map Legend:
- Kensington Street Elementary School
- Museum District Neighborhood
The building has original terrazo and wood in the public corridors. In a 2001 renovation, the original classrooms and assembly spaces were separated into forty private apartment units.
Sun Analysis
The building has direct light on the west, south and east sides. The large windows on the front facade capture indirect light and direct light in the summer.
The Building

Year Built: 1919
Stories: 3
Foundation: Basement
Exterior: Brick
Building Height: 54 ft
Construction Type: 3A
Heating: Forced Hot Air

Area of Project Scope

First Floor “Cafeteria” Space and Second Level
Gross Area: 18,004 sq ft
Occupancy Type: Mixed Use
ADA accessible
Section through classrooms and central assembly space

8am east sunlight

June 21
March and Sept. 21
Dec 21
Area of Project Scope

5pm west sunlight

Spin west sunlight
THE USERS

Residents
of the Museum District community
Number of residents 2,873
Average age = 30

Visitors
that come to exercise, attend an annual medical checkup, take a cooking class or eat a freshly prepared organic meal

Clinicians & Medical Support Staff
the staff of the clinical team

Cafe Chefs and Staff
the staff of the cafe

Personal Trainers and Fitness Instructors
staff of the fitness center

Maintenance Team
those that maintain the facilities

Staff in Children’s Center
certified teachers

Children
ages 2-10 are entertained while their parents visit the clinic, cafe or fitness center

THE PROGRAM

The Kensington Center for Health has three main areas and an additional supportive area where the Children’s Center is located.

| Clinic | 6% |
| Cafe | 23% |
| Fitness Center | 38% |
| Children’s Center | 33% |
| Prep kitchen | 22% |
| Seating area | 25% |
| Community room | 19% |
| Teaching kitchen | 23% |
| Free weight | 28% |
| Fixed cardio | 16% |
| Group exercise space | 17% |
| Changing/locker rooms | 31% |

Graph: The users of the Kensington Center for Health are categorized into different groups, with the Children’s Center being one of the main areas.
<table>
<thead>
<tr>
<th>Program Spaces</th>
<th>Type of Space</th>
<th>Qty</th>
<th>Unit</th>
<th>Total</th>
<th>Sq ft per person</th>
<th>Occupant Load</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clinical Area</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exam rooms</td>
<td>exam spaces</td>
<td>5</td>
<td>150</td>
<td>750</td>
<td>B</td>
<td>50</td>
</tr>
<tr>
<td>Conference / Consultation Room</td>
<td>conference space</td>
<td>2</td>
<td>500</td>
<td>1,000</td>
<td>B</td>
<td>62</td>
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<tr>
<td>Reception</td>
<td>waiting and check in</td>
<td>1</td>
<td>700</td>
<td>700</td>
<td>B</td>
<td>35</td>
</tr>
<tr>
<td><strong>Sub-Specialty Rotation Room</strong></td>
<td>exam room</td>
<td>1</td>
<td>150</td>
<td>150</td>
<td>B</td>
<td>50</td>
</tr>
<tr>
<td><strong>Ancillary Care Rooms</strong></td>
<td>therapy room</td>
<td>2</td>
<td>150</td>
<td>300</td>
<td>B</td>
<td>50</td>
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<tr>
<td>Staff Break Room and Kitchen</td>
<td>staff kitchen</td>
<td>1</td>
<td>300</td>
<td>300</td>
<td>B</td>
<td>10</td>
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<td><strong>Group Clinic Space</strong></td>
<td>group conference room</td>
<td>1</td>
<td>800</td>
<td>800</td>
<td>B</td>
<td>53</td>
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<tr>
<td>Breakaway Telephone Room</td>
<td>small room for private clinical discussions</td>
<td>2</td>
<td>80</td>
<td>160</td>
<td>B</td>
<td>80</td>
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<tr>
<td><strong>Clinical Office Pod</strong></td>
<td>heads down space for clinicians</td>
<td>1</td>
<td>900</td>
<td>900</td>
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<td>60</td>
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<tr>
<td><strong>Subtotal Clinical Spaces</strong></td>
<td></td>
<td></td>
<td></td>
<td>5,060</td>
<td></td>
<td>99</td>
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<tr>
<td><strong>Fitness space</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Free Weight / Fixed Cardio Space</td>
<td>fixed equip</td>
<td>1</td>
<td>1600</td>
<td>1,600</td>
<td>A3</td>
<td>40</td>
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<tr>
<td>Changing/locker rooms</td>
<td>locker rooms with showers</td>
<td>2</td>
<td>400</td>
<td>800</td>
<td>A</td>
<td>20</td>
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<tr>
<td>Group Exercise Space</td>
<td>group classes</td>
<td>2</td>
<td>1000</td>
<td>2,000</td>
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<td>20</td>
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<tr>
<td>Fitness Storage</td>
<td>storage of equipment</td>
<td>1</td>
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<tr>
<td><strong>Subtotal Fitness Space</strong></td>
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<td></td>
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<tr>
<td>Prep Kitchen</td>
<td>food preparation</td>
<td>1</td>
<td>800</td>
<td>800</td>
<td>A2</td>
<td>20</td>
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<tr>
<td>Seating area</td>
<td>eating area and community space</td>
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<td>1000</td>
<td>1,000</td>
<td>A2</td>
<td>15</td>
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<tr>
<td>Community room</td>
<td>rentable community room</td>
<td>1</td>
<td>900</td>
<td>900</td>
<td>A3</td>
<td>20</td>
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<tr>
<td>Teaching kitchen</td>
<td>cooking classes</td>
<td>1</td>
<td>900</td>
<td>900</td>
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<td><strong>Subtotal Cafe Space</strong></td>
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<td><strong>Supporting Services</strong></td>
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<tr>
<td>Children’s Center</td>
<td>drop-in childcare</td>
<td>1</td>
<td>1000</td>
<td>1,000</td>
<td>A</td>
<td>20</td>
</tr>
<tr>
<td><strong>Subtotal Supporting Space</strong></td>
<td></td>
<td></td>
<td></td>
<td>1,000</td>
<td></td>
<td>20</td>
</tr>
</tbody>
</table>

Square footage estimates were calculated based on occupancy codes and empirical analysis of local cafes, fitness centers and medical exam rooms. This programming document will evolve as the space plan develops.

Subtotal Net Program..............................14,260 sq ft
30% Circulation.................................,4,753 sq ft
Total Gross........................................19,013 sq ft
Total Occupant Load ............................386

*minus Children’s Center of 1,000 square feet located on lower level.
Important adjacencies are considered to make space plan decisions. These adjacencies analyze how to use proximity to create emphasis, collaboration, consider privacy and security, all with the goal of creating community.

This matrix shows the importance of privacy and security in the clinical areas, and important adjacencies within each main programmed area. Easy access and transitions for staff in each designated work environment are essential considerations.
CASE STUDIES

The following pages are examples of architectural and medical precedents. The precedents explore what the Kensington Center for Health can learn from other projects.

What can community clinics learn from innovative and flexible workplaces?

What can this project learn from other medical buildings focused on engaging the community?
The Salk Institute of Biological Research
Louis Kahn, 1958
La Jolla, California

The Salk Institute of Biological Research is a research facility in La Jolla, California. Architect Louis Kahn used orientation and symmetry to create hierarchy and focus. He used simple gestures that highlight the Pacific Ocean and created community by surrounding the central plaza (left) with private offices and laboratory spaces.

The scientists need private offices to support their research, so Kahn designed their offices to orient towards a central plaza that mimics a European city plaza to encourage social interaction and collaboration.  

A seating pit near the end of the central water feature allows a place for impromptu meetings or a place to meet for a coffee or lunch. Long benches in the plaza invite the users to sit outdoors, and a cafe space on a lower level creates a more formal seating area for groups.
LESSONS FROM THE SALK:

The Salk Institute is a premier example of the use of a space plan that mediates private and public spaces. The private offices support the needs of the researchers while still maintaining visual site lines to engage with the public spaces. The open balconies and stairways create a place for researchers meet as they are entering and exiting their offices. This precedent will guide the space planning process of the Kensington Center for Health to consider adjacencies and orientation of public and private spaces.
Areas of circulation create clusters of meeting spaces on the staircases and in the hallway (left). Open offices with glass partitions maintain acoustical privacy and visual transparency (below).

PRECEDENT

Google Headquarters “Googleplex”
Clive Wilkinson Architects, 2005
Mountain View, CA

The Google Headquarters at Googleplex Mountain View will demonstrate principles of building community through circulation, flexible seating arrangements and open areas that invite conversation and collaboration. The complex is built around the idea of a “main street” with building blocks that all radiate off the central circulation area.
GOOGLE WORK SETTINGS

The work settings below show thirteen typical layouts of spaces and their function. Clive Wilkinson designed these different types of areas inspired by areas on a university campus to accommodate different styles of working and the varying needs of the users. Each space was integrated into the space plan of the site according to public and private zones. Hot areas are more active and public, and cold areas are secluded and private.12

LESSONS FROM GOOGLEPLEX:

Googleplex successfully creates a place to learn, work and play. The complex is a community modeled around the idea of a university campus and a small town.12 The Kensington Center for Health can take cues from the Googleplex master plan and the layout of many different types of places to work, play, interact and rest. The Kensington Center for Health will use this case study to design a vibrant, open, inspiring and comfortable space to learn and collaborate.
Exam room with natural light. Ample clearance around exam table, privacy curtain to separate companion seating from the exam table when privacy is needed.

Private consultation areas off of main hallway circulation.

Teaching kitchen to instruct patients on healthy eating tips and cooking techniques.

PROGRAMMATIC CASE STUDY

Stephanie Tubb Jones Health Center at Cleveland Clinic
Moody Nolan, 2011
Cleveland, OH

Stephanie Tubb Jones Health Center at Cleveland Clinic (STJ) will serve as a programmatic case study of a health clinic designed entirely around treating chronic conditions. It incorporates a teaching kitchen and includes primary and specialty care. A navigation center helps patients coordinate services.  

This clinic is an example of going beyond traditional healthcare services and linking with community resources to help patients and their families to get the healthcare, financial and social services they need.  

Services at this clinic focus on chronic disease management including: treatment for diabetes, hypertension, kidney failure, mental health, specialized care for women and children, primary care, preventive care, health education and specialty care including cardiology, nephrology, ophthalmology and podiatry.  

LESSON FROM STJ HEALTH CENTER:
The clinic has community education rooms and a kitchen designed to teach classes on healthy eating techniques and habits. The patient navigation center provides a physical space to localize all of the navigational services a patient may need, including wayfinding, navigating specialty visits, arranging transportation and questions about navigating insurance and finances.
Focal Point Community Campus is a model of a project that aims to provide health to the community through a new type of healthcare campus. The project will include programming based on extensive community research. Spaces include retail stores, day care, and revenue-generating tenants to reinvest the funds into services such as continuing education and wellness classes, a center for creativity and a recreation center with pool and sports facilities (pictured left).

LESSONS FROM FOCAL POINT:
The campus will focus on the complete well-being of its community members and provide a place that community members are drawn to. The vice president of mission and community development emphasized that “providing for the health of the community is much broader than traditional healthcare”.

This project is an inspiration to create an inviting and innovative model integrating medical care, retail destinations and recreational programming scaled down to a smaller neighborhood level.
The atrium has open spaces for seating and a café.

Wood, natural light and greenery brighten the central atrium.

Akershus University Hospital is a welcoming and informal place designed with the needs of the patients and their relatives in mind.

Each department of the hospital has a different architectural expression to help create a varied visual experience and aid in wayfinding.

The main thoroughfare (pictured left) is a glass-covered atrium space that links the various buildings on the hospital campus. It uses wood as a dominating material. This glass-covered “main street” is structured as a series of open spaces of differing character, offering various functions such as kiosk, pharmacy, hairdresser, church and café.

LESSONS: This project uses natural materials and daylight harvesting that are two essential components to healing spaces.

PROGRAMMATIC CASE STUDY

Akershus University Hospital
C.F. Møller, 2014
Nordbyhagen, Norway

LESSONS: This project uses natural materials and daylight harvesting that are two essential components to healing spaces.
The main programmatic goal of Kensington Center for Health is to create spaces for patients and clinicians to interact comfortably.

An analysis of exam room typical layouts from several existing clinics indicated factors to consider. The results of the analysis showed the importance of group conversation, ample space for patient education, sight-lines sensitivity and patient and family comfort.
The exam room pictured below is from Nemours Children’s Hospital Orlando, Florida, designed by Perkins + Will. This exam room uses floor material and a drop soffit as well as color to establish provider zone.

“Kidney” table to encourage collaboration.

EXAM ROOM ANALYSIS

In this concierge care clinic layout, private waiting areas reduce perceived wait time and increase patient and family comfort by creating private areas with comfortable soft seating and warm ambient lighting. The provider sits side by side around a monitor with the patient and caregiver to review results or care plan.
Concept and schematic design of Kensington Center for Health evolved through a series of drawings, models and watercolors that are explained on the following pages.
Building geometry analysis provided organizational cues. Three dimensional models of the structure and parti revealed a strong axial character that influenced subsequent development.
CONCEPT: OPEN

The Kensington Center for Health is open to the community in order to create a welcoming and holistic healing space. Open space plan encourages interaction between programmed space.

The parti uses building geometry to explain the diagram of the concept of open. Open cannot exist without a counterpoint of closed. The parti diagram explains how the geometry of “open” will manifest in the design.
Schematic block plans explore initial space plan organization.

The watercolor studies explore removing the lower level of the former auditorium space to create one large atrium.

The exercise demonstrates the need to organize and unite the building around one centralized communal space and respect the axial quality of the existing building.
Adjacencies, acoustical privacy and program relationships are analyzed through bubble diagrams. This study demonstrates that the clinic adjacencies and privacy concerns were driving forces. Due to square footage limitations, the staff office area will occupy the level above the clinic. Ample square footage for the children’s center is provided on the lower level of the building.
Exploration of double central stairs from atrium to cafe.

Sketch exploring central reception desk with cafe on mezzanine level above.

Sketch visualizes initial design of long central hall.

Perspective sketches help to visualize the space and the user experience. These sketches illustrate the central atrium and the long central hallway. Through a series of critiques and using these drawings as a tool, it was decided that the central atrium should be the main programmed fitness space and the cafe space should be supportive programming that wraps around the central atrium.
A floor plan and section sketch illustrates initial layouts ideas.

PERSPECTIVE SKETCHES

The consultation and examination room begin to take shape. Perspective sketches imagine how an ideal space plan could meet the needs of the patients and providers.
Following the schematic and conceptual development, the space plan of The Kensington Center for Health is articulated.
A CENTRAL ORGANIZING FACTOR

Building geometry analysis provided organizational cues and revealed a strong axial character. Structural walls and a long central hallway indicated that the program be organized and united around one central communal space.

Removing the lower level of the former auditorium space created one large atrium. The atrium opened the building both in plan and in section. The fitness center programming fills the central atrium in a soaring “cathedral to wellness”.

Analysis of the cafe space indicated that a double height cafe that overlooks and supports the fitness center would help support the concept of OPEN.

The fitness center is anchored on three sides by a primary care clinic with ample space for patient education, a physical therapy room, a teaching kitchen, group clinic spaces and a cafe with fresh, healthy food.

Section through central fitness atrium and double height cafe.
Section illustrates rhythm of the four floors and ramps that flank the central atrium.
THE CATHEDRAL TO WELLNESS

The central atrium features a colored glass wall that extends from floor to ceiling. A mezzanine level with fixed exercise equipment and space for stretching and free weights is centrally located and elevated in the atrium. This central space is the core of Kensington Center for Health both physically and conceptually.
THE CAFE

The double height cafe is an echo of the central atrium that supports the concept of OPEN. The cafe is a welcoming place to eat a salad or have a juice or coffee. The colored glass wall visually connects the cafe to the hallway and back to the central atrium.

1. Cafe
2. Reception Central Hall
3. Cafe View from Second Level
THE CLINIC

The concept of OPEN is expressed in the clinic floor plan by connecting patient and family consultation rooms with an exam room.

The waiting room below features a translucent glass wall that allows natural light to enter the space.
The connecting wall features a drop ceiling detail that visually connects the two rooms while addressing the need to feel comfortable and secure during a medical visit.

The section shows the rhythm of the drop ceiling and its relationship to the windows and the connecting door. The exam rooms are 10’ wide, 13’ tall and 12’ wide. The drop ceiling detail brings the ceiling down to human scale while maintaining natural light from the windows.
Provider Workspace

- Softshell Chair
- Lightline Architectural Glass Wall by KI
- Mohawk Breaking Form Carpet Tile
- Lax Series Storage Bench
- David Weeks Studio: Fenta Task Light

Community Spaces

- Capri Cork in Gold
- Allermuir Stacking Counter Chair
- Studio Dunn: Sorentia
- Custom Terrazzo Flooring by NTMA
- Glasspro Colored Glass in French Blue

Clinic

- Corian Sandstone
- Bernhardt Story Table
- Plyboo in Chocolate
- Laminaire Porcelain Tile in Argento
- Coalesse Bob Side Chair

Furniture, Fixtures & Equipment
The thesis project culminated in a class exhibition at the VCU Depot Gallery. The class designed vinyl graphics to represent the theme of the show, “From There to Here”. The concept represents the physical distances all of the seven graduating students traveled to study at VCU and the concept of time and place. Each project exhibited is an adaptive reuse project that studies the relationship between original architecture and a new interior.

A postcard designed by the class advertised the show.

We installed vinyl graphics and applied them on the front window, entrance wall, and as name cards below our individual projects.
A 1/16 inch section model constructed from chipboard, cardboard and plexi illustrates the levels of the central atrium with the glass feature wall.

The presentation boards are mounted and displayed with the 1/16 inch scale building model for the exhibition.
Kensington Center for Health

Exploring the relationship between health, wellness and the built environment.

Museum District Neighborhood

1. Open to Below
2. Staff Offices
3. Exam Room
4. Consult Room
5. Clinic Waiting Room

LEGEND

1/16" = 1'-0" 102 Second Floor

First Level Floor Plan

Roseneath Road
Kensington Avenue

Virginia Institute of Fine Arts

Community.

Engage the community.

Support.

Wellness.

Promote.

Physical Health.

A chronic disease is a chronic condition.

Two adults have one half of all patients leave primary care visits because their doctor advises.

Ame of the national healthcare spending.

Some medications are about average adherence rates are below 10%.

Treatment of chronic diseases is not cured. Some medications are about average adherence rates are below 10%.

Average adherence rates are below 10%.

Lack of physical activity and poor nutrition are risk behaviors that cause much of the early death related to chronic disease.

A chronic condition.

To realize and sustain health outcomes, community engagement is imperative to improve adherence rates for lifestyle changes.

Consideration of a holistic sense of well-being that focuses on disability in the United States.

The high prevalence of chronic disease is creating a national support.

A chronic disease is not cured. Some medications are about average adherence rates are below 10%.

Lack of physical activity and poor nutrition are risk behaviors that cause much of the early death related to chronic disease.

Ame of the national healthcare spending.

Some medications are about average adherence rates are below 10%.
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