JDDK Architects have over 30 years’ experience in the field of hospice design, having worked on over 40 hospice projects to date. Through collaboration with Northumbria University we have studied twelve JDDK hospices that span from 1980 to the present day and undertaken post-occupancy evaluation by speaking to over 50 key stakeholders as well as independent healthcare experts.

**AIMS**

**EMERGING THEMES**

- The need to focus on value rather than cost
- Debate over single or shared bedrooms
- Increased walking distances within purpose designed hospices
- Landscape design and bringing the outside into the building
- Younger patients with increasingly complex needs
- Increasing dementia levels are not as significant as expected
- Larger equipment due to manual handling requirements
- The importance of a spiritual space
- The impact of increased emphasis on infection control
- Architectural understanding of hospice care and design
- How to cater for young adults within hospices
- Design needs to facilitate dignity, privacy, intimacy, trust, empowerment and compassion

"Hospices are about life and living. What we do in hospices is about enabling people to live the life that they choose for the duration of their natural life, however long or short that may be. It’s about life-enabling, life-enriching, life-enhancing and the physical environment is critically important in that regard."

Professor Tony O’Brien, Consultant in Palliative Medicine, Curraheen Hospital, Cork

"Most patient bedrooms open out onto the gardens and we often wheel beds out so people can use the outdoor space... the patients really do enjoy that. Towards the end of life, people’s lives and their circle of importance becomes smaller and very often what is important is becoming connected to the world, the sun, air and plants."

Angela Egell, Director of Care Services, St Oswald’s Hospice, Newcastle

"Not everybody likes a single room or sometimes they just like them for night time. If there were ever a way to do this I would have the bedroom walls as retractable so that if you had two single rooms and the two patients were up and active and mobile, then you could have a wall that retracts back to create a multi-occupancy area."

Irene Barclay, Practice Service Development, St Columba’s Hospice, Edinburgh
“From the first day when we moved patients from the old hospice to today, all I have heard is wonderful positive comments from patients, visitors and staff. I feel that the most positive impression people have on entering the building is the openness and the ability, no matter where you are within the hospice, to see the outside; we have also been able to create a feeling of not only friendliness but also warmth which helps greatly at times when our patients or their families are very anxious.”

Liz Cottier, Hospice Manager, Marie Curie Hospice, Solihull