



AIA Selects Three Projects for National Healthcare Design Awards

Examples showcase the best of healthcare building design and health design-oriented research.

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For immediate release:

Washington, D.C. – July 28, 2009 – The American Institute of Architects (AIA) Academy of Architecture for Health (AAH) have selected the recipients of the AIA National Healthcare Design Awards program. The AIA Healthcare Awards program showcases the best of healthcare building design and healthcare design-oriented research. Projects exhibit conceptual strengths that solve a variety of civic, urban, and social concerns as well as the requisite functional and sustainability concerns of a modern hospital.

Serving as jurors for the 2009 awards were: Stephen Yundt, AIA of CO Architects, Los Angeles; Julie Snow, FAIA of Julie Snow Architects, Minneapolis; Rand Elliot, AIA of Elliott & Associates Architects, Oklahoma City, OK; Rolf Haarstad, AIA of Hord Coplan Macht, Inc., Baltimore; Tom Howorth of Howorth Architects P.A., Oxford, MS.

“The health facility building type is being positively transformed by designs that incorporate advanced technology; research findings from evidence based design (improving quality of care); efficient and sustainable architecture; all within more humane, healing environments,” said national jury chair Stephen Yundt, AIA, ACHA. “This year’s entries (close to a hundred in total) reinforced the belief that the hospital of the future is here and bears little resemblance to facilities designed just a few years ago.”

The AIA AAH selected three healthcare facilities in three separate categories; Category A: built, less than \$25 million (construction cost), Category B: built, more than \$25 million (construction cost), Category C: unbuilt.

The recipients include:

Category A

Providence North Portland Clinic, Portland, OR
Mahlum

Located on the mass-transit MAX line in Portland’s urban core, the building engages the built streetscape to reinforce visual connection and invite the community inside. An upturned building facade creates the frame for an expansive wall of windows. The interior is divided into three day-lit pods faced with integrated murals that can be viewed by patients and families within the clinic as those passing by. The design heals a brown-field site condition, while providing a transit station on the high volume street and the residential neighborhood beyond. By reinforcing connection to the neighborhood, the clinic supports revitalization efforts in the area while making community services more transparent and accessible.

Category B

Oregon Health and Science University – Peter O. Kohler Pavilion, Portland, OR
Perkins+Will in Joint Venture with Petersen Kolberg & Associates

A 75 foot terrain drop from north to south across the site allowed the concealment of a 450 garage into the hill, below a reconstructed street. South (city) elevations introduce natural provide dramatic views of Mt. Hood through a floor-to-ceiling curtain wall; north walls facing historic heart of the campus are articulated with punched windows in campus brick and stone. Cascading landscaped roof decks provide both intimate healing gardens and public view terraces to the views. The Pavilion integrates a 9th floor campus-wide “pedestrian superhighway” that linking campus patient care and research zones, and harbors a new aerial tram terminus... the campus to waterfront parking and campus buildings below.

Category C

Cancer Center, Hospital, Cancer Research Institute
HKS, Inc. in Joint Venture with UHS Building Solutions

To support the client's mission to reduce the burden of cancer by integrating scientific discovery technological advances into more effective treatments and prevention strategies, the design the project stemmed from integration. Located along a major river in the Northeast, the new provide an unparalleled combination of clinics, a full-service hospital and research labs. The solution originated from the integration of water – “the source of life, the simplest form of energy and growth.” Water connects the buildings to one another, to the site as well as the river. It is the driver for the orientation and siting of the three primary services: research, hospital and clinic. Circulation paths between buildings become glass boxes that dematerialize and sit within the site providing an indoor-outdoor duality.

To obtain images of these projects, please contact Matt Tinder at mtinder@aia.org.

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