Graduation Plan

Master of Science Architecture, Urbanism & Building Sciences

Charlotte Hendriks - 4020499
### Graduation Plan: All tracks

The graduation plan consists of at least the following data/segments:

#### Personal information

<table>
<thead>
<tr>
<th>Name</th>
<th>Charlotte Hendriks</th>
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<tbody>
<tr>
<td>Student number</td>
<td>4020499</td>
</tr>
<tr>
<td>Telephone number</td>
<td>0639570716</td>
</tr>
<tr>
<td>Private e-mail address</td>
<td><a href="mailto:hendriksce@gmail.com">hendriksce@gmail.com</a></td>
</tr>
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#### Studio

<table>
<thead>
<tr>
<th>Name / Theme</th>
<th>The Architecture of the Interior - Healthy Environment</th>
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<tbody>
<tr>
<td>Teachers / tutors</td>
<td>Mechthild Stuhlmacher, An Fonteyne, Lies Willers</td>
</tr>
<tr>
<td>Argumentation of choice of the studio</td>
<td>I started my master education in the chair of Architecture of the Interior and so far I followed the courses of MSc 1 and MSc 2 in this chair. The chair of Architecture of the Interior is dealing with all scales of architecture, from the overall large scale and dive into small details, whereby the user is always a central focus point. Also the assignment of designing a care facility attracted me, so far I did not work on this topic in my studies, even though it is an important task nowadays.</td>
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#### Graduation project

<table>
<thead>
<tr>
<th>Title of the graduation project</th>
<th>The Rottekwartier – a caring community A small scale dementia care center for elderly people</th>
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<tbody>
<tr>
<td>Goal</td>
<td>Rottekwartier, Rotterdam</td>
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| The posed problem, | The Dutch government has decided to decentralize care, municipalities will get more responsibilities in organizing care. Small scale solutions for providing health care in the city or neighborhood have to be developed. At the same time the number of people with dementia is growing from 260.000 in 2015 to 500.000 in 2050. The posed problem, the Dutch government has decided to decentralize care, municipalities will get more responsibilities in organizing care. Small scale solutions for providing health care in the city or neighborhood have to be developed. At the same time the number of people with dementia is growing from 260.000 in 2015 to 500.000 in 2050. | How can a small scale dementia care center contribute to the neighborhood of Rubroek/Oude Noorden on a social, spatial and architectural level? |

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How can architecture improve the quality of life of people suffering from dementia? In what extent can the courtyard-typology be of a positive influence?

How can the collective northern courtyard of the apartment building the Rottekwartier be upgraded with a care facility and at the same time connect residents with the courtyard in horizontal as well as vertical ways?

(Studio specific research)
What is the relation between the ground and the residents living on the upper floors?

To what extent are residents on the upper floors connected with the ground?

How do residents living on the upper floors look at the collective space of the courtyard?

<table>
<thead>
<tr>
<th>Process</th>
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<tbody>
<tr>
<td><strong>Method description</strong></td>
</tr>
<tr>
<td>Literature</td>
</tr>
<tr>
<td>Case studies on reference buildings</td>
</tr>
<tr>
<td>Excursions to care buildings and the site</td>
</tr>
<tr>
<td>Excursions to hofjes in several Dutch cities.</td>
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<tr>
<td>Analyzing site and buildings on the site</td>
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</table>

Models: sketch models, massing models, interior models, façade models, site models etc.
Drawings: sketches, plans, sections, computer drawings
Computer: 3d models, presentational drawings, collages, pictures
Using different scales simultaneously, from 1:1000 to 1:5.

Studio Specific Research: on the collective courtyard in search of horizontal and vertical connections. Methods: observations, analysis, interviews, photographs and drawings.

<table>
<thead>
<tr>
<th>Literature and general practical preference</th>
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<tbody>
<tr>
<td>Visiting Hofjes in Haarlem, Groningen en Delft</td>
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<tr>
<td>Visiting dementia center De Hogewyk in Weesp and participating in the day program of the dementia facilities of one of the living groups in the Zonnehuisgroep in Vlaardingen</td>
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<tr>
<td>Two day excursion to Belgium: visiting several care projects.</td>
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</table>
Several titles of used literature:


**Reflection**

**Relevance**

Designing Health Care facilities is an important issue these days. The number of people suffering from dementia will decrease over the years. The Dutch government is decentralizing care. Budgets are cut down to save money, otherwise the care system will be too expensive in a few years. The municipalities in the Netherlands will get more responsibilities and have to organize the care in their cities. The municipality of Rotterdam has the ambition to create new social networks in neighborhoods, professional care will be supported by the help of volunteers from these networks. The design will be part of integrating small scale care facility for people suffering with dementia into the city and the involvement of social networks. The chosen location, the apartment building the Rottekwartier, as an pre-war structure which has a weak reputation, can be upgraded at the same time as the insertion of small care and creating social networks. This design can also be used as a pilot for future developments of small care facilities for people suffering from dementia integrated in the city and maybe upgrade the particular neighborhood on a social, spatial and architectural level.
**Time planning**

**Week 1.1 - 1.9**
Research on topic - literature, site visit, excursions to care facilities, analysis of precedents, site selection, design questions, mass-models, site model, first design proposals.

**Week 1.10 P1**
P1 presentation
Draft graduation plan, thematic research, site analyses, situational research

**Week 2.1 - 2.7**
continuation of research, research draft / site research, developing design proposal, sketch models, sketch drawings, defining program.

**Week 2.8**
Hand in Research Report – Studio Specific Research 1+2
Hand in Graduation Plan
continue working on design proposal and presentation, model 1:20/1:50.

**Week 2.9 P2**
Hand in Position Paper, Lecture Series Research Methods
January 21, 2016 - P2 presentation
Urban draft / masterplan 1:1000-1:500 / program, list of requirements / draft design 1:200

**Week 2.10 - 3.9**
Developing the design more into deep, refining concept, materialization, facades, construction, building technology tutoring, details. Models various scales.

**Week 3.9/3.10 P3**
P3 presentation, date to be announced
Draft reflection, plans, facades, cross-cuts, 1:200 / 1:100, part of the building, plan and cross-cut 1:50, façade fragment with horizontal and vertical cross-cut 1:20, details 1:5

**Week 4.1 - 4.5**
Developing the design more into deep, refining concept, materialization, facades, construction, building technology tutoring, details.

**Week 4.4/4.5 P4**
Go / No-Go assessment
Theoretic and thematic support of research and design, final reflection on architectonic and social relevance, site 1:5000 / 1:1000, plan ground level 1:500, plans elevations, sections 1:200 / 1:100, part of the building plan and drawings 1:50, façade fragment with horizontal and vertical cross-cut 1:20, details 1:5, reflection based on template.

**Week 4.5 – 4.7**
Finalizing design and presentation products

**4.8 - 4.10**
Last hand on:
Presentational models
Presentational drawings
Other presentational products

**Week 4.11 P5**
Final public Presentation