

# EUROPEAN HEALTHCARE DESIGN

RESEARCH • POLICY • PRACTICE

## ABSTRACT PROPOSAL GUIDELINES PRESENTATION FORMAT

Abstracts can be submitted for four different format types:

- a) Themed papers; b) Workshop/Interactive Presentation;
- c) Colloquium and d) Poster

### Themed Papers:

This type of session is best suited for reports on either a) completed research or scholarly work; or b) themed case studies (see knowledge focus below). Authors present summaries or overviews of their work, describing the essential features (related to purpose, methodologies, outcomes or product/project). The formal oral presentation of work should be limited to 15-20 minutes. Presentations are grouped according to topic or perspective into these themed sessions (which are between 60-90 minutes), with time provided after all of the presentations for Q&A and group discussion. Authors are welcome to include visual supports (paper handouts, powerpoint slides, or digital displays) to assist delivery of their oral presentation. Abstract submissions should be 400 words long.

### Workshop/Interactive Presentation:

This type of session is best suited for teaching or demonstrating particular procedures, skills, or techniques. Appropriate considerations for this session format may include, for example: a workshop, demonstration, performance, exhibition, staged conversation, debate, or extended dialogue with the audience. These sessions are scheduled for about 45 minutes and should be structured so that some explanatory or introductory information is provided, with ample time for audience interaction, participation, and involvement. Abstract submissions may be up to 600 words long.

### Colloquium:

This conference session is scheduled for 60-90 minutes and involves 3-4 presenters and a chair who are proposing a set of papers based on a shared theme or topic. The papers may present complementary aspects of a specific body of work, or contrasting perspectives on a specified topic. There must be at least four registered participants (for example, a Chair and three or four presenters). The presenters should conceive and design the session to allow time for individual presentations (approximately 15 minutes each) and at least 15 minutes of audience discussion or question-and-answer. All participants must be listed on the proposal submission form. Abstract submissions may be up to 600 words long.

### Poster:

This format is ideal for presenting preliminary results of work in progress or for projects that lend themselves to visual displays and representations. Displays may be posters, digital/computer displays, artwork, or other visual media. Each display should include a brief abstract of the purpose and procedures of the work; handouts or copies of written material may also be available. Space for the poster or exhibit will be provided by the conference, however all materials must be organised by the presenter, including posters, displays, handouts or other appropriate materials. Please note that we cannot guarantee a dedicated power source for each presenter. Papers not selected for a themed paper, workshop or colloquium but considered appropriate for a poster presentation will also be offered this opportunity. Abstract submissions should be 400 words long.

Organised by



**SALUS Global Knowledge Exchange**

E: [info@europeanhealthcaredesign.eu](mailto:info@europeanhealthcaredesign.eu)

T: +44 (0) 1277 634176 • F: +44 (0) 1277 634041

[www.europeanhealthcaredesign.eu](http://www.europeanhealthcaredesign.eu)

# KNOWLEDGE FOCUS

Abstracts submitted in all formats should have a research, a practice or a theory focus.

## Research Focus

1. Thesis statement: the hypothesis, research statement, statement of the problem or issue being explored.
2. Methodology: brief overview of research method used to address the research question identified in the thesis statement. For the proposal, include information on the type of data collected (e.g., surveys, interviews, tests, literary analysis or critique, observations) but not on design, sampling, or data analyses techniques (these should be explained in the full paper).
3. Results: the main findings of the study, resulting from the methods used.
4. Conclusions and Implications: what the results mean for the field of study or for society; relate back to the thesis statement.

## Practice or Case Study Focus

1. Framework: the scholarly knowledge base - theoretical framework, previous research, or conceptual approach - upon which the practical application or project is based.
2. Description of practical application: what was designed or developed, how was it implemented, in what setting and with whom?
3. Outcomes: what has been learned from the implementation, what strengths and weaknesses have been identified?
4. Implications: what are the next steps or the implications for future practice or for society.

## Theory Focus

1. Statement of the hypothesis, theoretical perspective, or philosophical idea being asserted.
2. Relationship to existing theories or perspectives in the field.
3. Contribution: how proposed idea advances knowledge in the field or benefits society.

Organised by



**SALUS Global Knowledge Exchange**

E: [info@europeanhealthcaredesign.eu](mailto:info@europeanhealthcaredesign.eu)

T: +44 (0) 1277 634176 • F: +44 (0) 1277 634041

[www.europeanhealthcaredesign.eu](http://www.europeanhealthcaredesign.eu)