EUROPEAN
HEALTHCARE DESIGN

RESEARCH • POLICY • PRACTICE

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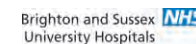ARCHITECTS FOR HEALTH

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GLOBAL KNOWLEDGE EXCHANGE

CALL FOR PAPERS

BLURRING THE BOUNDARIES
DESIGNING PLACE-BASED HEALTH SYSTEMS

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BLURRING THE BOUNDARIES:
DESIGNING PLACE-BASED HEALTH SYSTEMS

Accessible health systems that provide timely, affordable, high-quality care are a cohesive, binding force. The future promises huge benefits but the intervening journey may test our political, economic and social fabric. Amid such upheaval, can our health systems meet both our current needs and future demands?

Ten years since the global financial crisis, economic and social insecurity remains rife amid a widening gulf in wealth distribution across the world. Consequently, societies are polarising in many countries and established political orders and values are fracturing. Never has it seemed more timely to improve and transform health systems that provide security and underpin economic productivity at the same time as continuing to demonstrate the value of investing in science and technology for the public good.

We're also at the beginning of the fourth industrial revolution, which is blurring the lines between the physical, digital and biological worlds. As advances in AI and personalised medicine create enormous benefits in diagnosis, pharma and treatment, as importantly, we now have the digital capacity to connect and integrate healthcare systems, allowing population and place-based models of care to evolve fully.

Providing an interdisciplinary global forum for researchers, practitioners and policy advisors, the 5th European Healthcare Design 2019 Congress & Exhibition will be held on 17–19 June, 2019 at the Royal College of Physicians in London, UK. Organised by Architects for Health and SALUS Global Knowledge Exchange, the Congress adopts a whole-system approach to redesigning international health systems, services and infrastructure through the exchange of knowledge, research and best practice.

Blurring the boundaries, changing relationships

Globally, the shift towards population- and place-based health systems is gaining momentum. Providers can no longer focus only on treating the sick and infirm in the traditional hospital, but must partner with other sectors, such as housing, transport, urban planning and the workplace to design healthier communities, helping people to stay well by improving opportunities for physical activity, access to nutritious food and social and cultural interaction. As the boundaries between public health and healthcare systems blur with personal responsibility and lifestyles, a redefinition of building typologies and reclassification of funding streams is needed to support place-based systems of care.

Meanwhile, digital connectivity is changing the traditional patient-physician relationship. How will this and other technologically led advances change our healthcare architecture? The interplay between technological change, clinical advances and patient-centred design and health creates new standards and, potentially, exciting forms for operating rooms, intensive care and emergency units, cancer facilities, and laboratories.

A new healthcare architecture

The definition of healthcare architecture is widening; as medicine and social care share space in community settings, so traditional building typologies become redundant. As our high-street shops fall empty, their replacement with innovative social and healthcare centres that also provide wellness-based services, may help sustain town centres. Equally, locating these facilities in places with high footfall such as transport hubs, will create opportunities to join up public health and healthcare services where it is needed, improving access, enabling earlier diagnosis, and creating more efficient care pathways.

The arts also have a role to play in this new blurred world – helping to tackle social isolation, providing cognitive stimulation, reducing stress, and supporting rehabilitation. We can use the fusion of art and digital technology in the real and virtual worlds to improve outcomes and enhance staff and patient experience.

Sustainability in the broadest sense

Many healthcare facilities have been limited historically by being single-use developments. As boundaries blur, there are real opportunities for creating sustainable mixed-use communities on green campus sites. These can be concrete expressions of the new taxonomy of healthcare and social architecture, and communicate, in built form, new models for integrated and place-based care.

The design of every building and care system must address the sustainable use of energy, and material and human resources in capital; even more important is a sustainable revenue stream, which should extend to procurement processes and commercial business cases. And, as climate change leads to ever-greater weather extremes, we must develop innovative solutions for designing in imperilled environments. In all senses of the term, we welcome examples of genuine design innovation in sustainable development.

We're delighted to invite you to participate and contribute to the exchange of knowledge needed to transform our healthcare systems, by submitting abstracts by 7 December, 2018.

JOHN COOPER
Programme chair
Architects for Health

MARC SANSOM
Director
SALUS Global Knowledge Exchange

CALL FOR PAPERS

European Healthcare Design 2019 (EHD 2019) is the fifth global forum for the exchange of knowledge on the relationship between research and health policy and practice within the field of healthcare design.

Congress attendees will develop their knowledge of the political and economic context, emerging practice, skills and core competencies in designing and commissioning health services, technology and infrastructure, project management, and the evidence base for healthcare design and quality improvement. We are delighted to invite you to submit abstracts on the following core themes.

Plenary theme:
Blurring the boundaries: Designing place-based health systems

Congress streams
Place-based health systems: improving access, quality and value
• Partnering across sector boundaries to design healthy communities

The intersection of medicine and architecture: Redefining practice
• Empowering interdisciplinary design of clinical services & environments

Science, technology and innovation: empowering citizens and patients
• How digital and medical technology convergence is transforming health

Commercial design: innovation in healthcare investment and finance
• Facilitating new models of place-based health systems and infrastructure

Sustainable development: designing for people, place and planet
• The environmental, social & economic benefits of circular health systems

Art, design and technology: dignified and stimulating spaces for care
• Humanising environments to improve health outcomes & experience

Authors are invited to submit abstracts of 400 words in English for any of the following: a) themed paper; b) poster; c) workshop.

The abstract should clearly state the background, purpose, methods, results and conclusions/implications. Presentations in all three formats can be focused on any of research, practice or theory. For more detailed Abstract Guidelines, visit www.europeanhealthcaredesign.eu.

Each presentation will be delivered to an interdisciplinary audience, and each stream carefully curated to encourage an informed dialogue. Papers addressing more than one of the congress themes will be given preference. All abstracts will be subject to a rigorous blind peer-review process by the EHD 2019 Programme Committee. A select number will be chosen for oral presentation with a wider number presented as posters.

Proposals must be submitted using the abstract proposal form, available at www.europeanhealthcaredesign.eu and MUST include the following details:
a) presentation type (themed paper, poster or workshop);
b) knowledge focus (research, practice or theory);
c) congress theme (plenary or stream);
d) title;
e) author(s);
f) organisational affiliation; and
g) three keywords.

The abstracts of the papers and posters chosen for presentation will be published in the Final Programme. Please note: the author(s) and/or co-author(s) are required to register and pay the registration fee to participate and present the paper at the congress. The official language of EHD 2019 is English.

Full edited versions of the papers and videos may be published on the SALUS Global Knowledge Exchange at www.salus.global following the congress. No paper will be published without the author's consent.

More information on the conference venue, hotel accommodation and registration fee is available at www.europeanhealthcaredesign.eu.

All abstracts and enquiries should be submitted by e-mail to the EHD 2019 Secretariat no later than **7 December, 2018** at the following address:

EHD 2019 Secretariat
E-mail: info@europeanhealthcaredesign.eu
Tel: + 44 (0)1277 634176

Who should submit a paper and attend?
The European Healthcare Design Congress & Exhibition is now in its fifth year and attracts the world's leading interdisciplinary policymakers, researchers and practitioners in the field of healthcare design. The congress will be of interest to:

• Physicians
• Healthcare executive
• Estates/capital development
• Nursing professionals
• Commissioners
• Health scientists
• Service designers

• Clinical managers
• Architects and designers
• Engineers and developers
• Health planners
• Occupational therapists
• Psychologists
• Economists

PROVISIONAL TIMETABLE

15 October 2018
Announcement of Call for Papers

22 November 2018
Announcement of Call for Entries for EHD Awards 2019

7 December 2018
Deadline for EHD 2019 Congress abstracts

18 February 2019
Launch of the Preliminary Programme

21 February 2019
Deadline for EHD 2019 Awards submissions

11 April 2019
Deadline for early bird/speaker registration, and paper manuscripts

Monday 17 June 2019
09.00–18.00: EHD 2019 Congress & Exhibition
18.00–20.30 Welcome Drinks Reception

Tuesday 18 June 2019
09.00–18.00: EHD 2019 Congress, Exhibition and Awards
18.00–22.00: Garden Party

Wednesday 19 June 2019
09.00–19.00: Study visits to UK health facilities (to be advised)

Cover Credits (clockwise from top left):
Psykiatrisygehus i Vejle, Denmark, designed by Arkitema Architects.
Hospital of "Ile de Nantes, France, designed by Art & Build in collaboration with Pargade Architectes, Atelia, Signes Paysage.
Maternity Unit at Kachumbala Health Centre 3, Uganda, designed by HKS Architects and EFOD
Omagh Hospital and Primary Care Complex, Northern Ireland, designed by Todd Architects with Hall Black Douglas

THE PROGRAMME COMMITTEE

Emma Stockton, consultant paediatric anaesthetist, Great Ormond Street Hospital for Children, UK
Emma is a consultant paediatric anaesthetist at Great Ormond Street Hospital. Her clinical interests include anaesthesia for cardio-thoracic surgery and interventional radiology. In 2016, she completed a Masters in Planning Buildings for Health, identifying a lack of understanding of building process as a barrier to clinical engagement.

Charlotte Ruben, partner, White Arkitekter, Sweden
Charlotte began her career as an urban designer but has since specialised in healthcare design. Social commitment, wisdom and beauty are all drivers in her approach. As one of the lead architects behind the New Karolinska University Hospital, her team has attracted international acclaim and recognition for innovation.

Prof Noemi Bitterman PhD, academic director, Masters in Industrial Design (MID), Technion, Israel
Prof Noemi Bitterman is the founder and chair of Masters in Industrial Design with focus on medical and social design at the Technion, Israel. Her academic background includes a PhD in Medical Sciences and an MSc in Industrial Design, including a post-doctoral fellowship at the University of Pennsylvania, USA.

John Cooper BA, Dip Arch Cantab ARB RIBA, director, John Cooper Architecture (JCA), UK
John has been a principal in practice for 36 years. Having co-founded Avanti Architects in 1981, he set up JCA in 2009, and the practice has since designed hospitals in the UK, Ireland, South Africa, Iceland and Australia. He was chair of Architects for Health from 2009 to 2014.

John Cole CBE, honorary professor, Queen's University Belfast, UK
John is honorary professor at the School of Planning, Architecture and Civil Engineering, Queen's University Belfast. Also a procurement champion for RIBA, he was previously deputy secretary at the Department of Health, Social Services and Public Safety in Northern Ireland.

Peter Fröst, PhD, professor in healthcare architecture, Sweden
An architect with 30 years' experience, Peter created the Centre for Healthcare Architecture at Chalmers University of Technology in Sweden, in 2010. He teaches at masters level and tutors PhD students. His research focuses on evidence-based co-design approaches in healthcare architecture.

Christine Chadwick, national senior director, infrastructure solutions, GE Healthcare
Christine has 25 years' experience in health services planning globally, with a specialty in oncology planning. She has worked on transformational projects, delivering ROI/feasability studies, functional programming, design, technology planning, procurement, and operations.

Sasha Karakusevic, NHS Horizons, UK
Having started his career in maxillofacial surgery, Sasha has been involved in system design for more than 25 years. Having spent many years in Torbay and South Devon developing integrated care, he is now working with NHS Horizons to support large-scale transformation in the health sector. He is interested in using design as a tool for organisational development and transformation.

Sylvia Wyatt MA AHSM, advisor, AgeUK IW, UK
Sylvia is an advisor to AgeUK Isle of Wight and a governor of University Hospital Southampton NHS FT, having previously set up and run the NHS Confederation's Future Health Care Network. She also worked for the Scottish Government, on shifting health and care towards early intervention and prevention.

Bas Molenaar, emeritus professor, Technical University Eindhoven, Netherlands
Emeritus professor Bas Molenaar has taught Healthcare Architecture at Technical University Eindhoven for the past seven years. With his practice, EGM architects, he designed the OLVG in Amsterdam and the Tony Moleapaza Children's Hospital in Arequipa, Peru.

Diana Anderson MD MArch, Dochitect; principal and medical planner, Steffian Bradley Architects, USA
Diana is a board-certified healthcare architect with the American College of Healthcare Architects (ACHA) and a board-certified physician through the American Board of Internal Medicine (ABIM). Diana is co-founder of Clinicians for Design.

Marte Lauvsnes, project and development hospital planning manager, Sykehusbygg, Norway
A trained intensive-care nurse, Marte is project and development hospital planning manager for Sykehusbygg, the Norwegian Hospital Construction Agency. Previously, she was hospital planner and research manager for the hospital planner group in SINTEF Health Research.

Ganesh Suntharalingam MB BChir Medicine, honorary secretary, Intensive Care Society, UK
Ganesh is an intensive care consultant with a specialist interest in leadership, service design and development. He is honorary secretary and forthcoming president-elect of the Intensive Care Society. Within his NHS trust he has been a design champion and design quality chair for a new-build PFI.

Karin Imoberdorf, architect, Lead Consultants, Switzerland
Karin is a partner with Lead Consultants and the official representative for Switzerland within the Union of International Architects, Public Health Group. She also leads the interdisciplinary masters course in public health at the Universities of Basel and Bern.

Organising Committee

Christopher Shaw, chairman, Architects for Health

Alessandro Caruso, director, Design in Mental Health Network

Jonathan Erskine, director, European Health Property Network

Claudia Bloom, executive board, Architects for Health

Jim Chapman, visiting professor, Manchester School of Architecture

Stephanie Williamson, deputy director of development, Great Ormond Street Hospital for Children NHS Foundation Trust

For further enquiries on the event programme, sponsorship or exhibition opportunities, contact:
SALUS Global Knowledge Exchange E: info@europeanhealthcaredesign.eu • T: +44 (0)1277 634176 • F: +44 (0)1277 634041

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