CALL FOR PAPERS

AT THE TIPPING POINT
DESIGNING FOR POPULATION AND PLANETARY HEALTH

www.europeanhealthcaredesign.eu | info@europeanhealthcaredesign.eu
Healthcare is now the biggest ‘industry’ in the world and the single largest component in the economies of many developed countries. It’s a voracious consumer of goods and services, producer of waste and generator of carbon. But if a physician’s primary obligation is to ‘do no harm’, we must accept that a population-based health system has responsibilities to planetary health that extend beyond care delivery.

Governments and systems are addressing these with varying degrees of success but the scale of the environmental challenge suggests that programmes of incremental change are insufficient. A fundamental transformation in service models is required. This, in itself, carries significant risk because we know that prescriptive and top-down driven changes to complex systems have unintentional consequences, which are often more disruptive than the reform’s primary objectives.

Organised by Architects for Health and SALUS Global Knowledge Exchange, the 6th Annual European Healthcare Design 2020 Congress, Awards & Exhibition provides a vibrant interdisciplinary global forum for whole-system thinking around redesigning health systems and infrastructure, bringing together clinicians, policy advisors, academics, architects, designers, economists and artists.

Redesigning healthcare systems

Redesigning networks at a whole system level is critical. Emissions originating directly from healthcare facilities make up 17% of the sector’s worldwide footprint, but 71% of emissions is derived from the healthcare supply chain, including the production, transport, use and disposal of goods and services1. The changes needed to improve environmental sustainability are much the same as those needed to deliver quality improvements and financial sustainability. Services need to be redesigned to shift care upstream and place greater emphasis on primary care, prevention and self-management.

Where are we making better use of digital technologies, developing more integrated forms of care, removing duplication and redundancy from care pathways, empowering patients, and moving care closer to home? Where are we mitigating the worldwide shortage of human resources by nurturing settled employment and career advancement in systems, and how can AI and digital technology supplement or replace human resource? How do we increase the resilience of services while reducing their impact on the environment?

Digital connectivity provides the structural framework that healthcare networks need to inform and empower staff and patients, and move them efficiently around the system. We also need to understand what advances have been made in AI, pharma, robotics and algorithmic diagnosis. Which of these are making a real contribution to sustaining health systems and which are illusory?

Redefining public health

The ability of population-based healthcare systems to align to the UN’s Sustainable Development Goals and the Paris Agreement’s global climate goals, relies on a dynamic integration of health and social care with housing, planning and transport. Tensions between personal freedoms and legislative interventions are intensifying in some areas but dissipating in many others, as citizens increasingly understand that they must exercise personal responsibilities within a wider framework of governmental action. Healthcare projects will increasingly be part of wider mixed-use developments, which in turn will require mixed funding.

From disposable to circular

The age of the disposable building has passed. To truly develop a circular economy, all health buildings should be capable of alternative future use and fulfil a greater role in the public realm. As high-street shops fall empty, their replacement with innovative social and healthcare centres may help sustain town centres.

More extreme climates encourage innovative architecture, with buildings designed to be climate adaptable, very low- or zero-carbon, and energy efficient. Can health systems in high income countries learn lessons from those in low-middle income countries in the global south? What commercial and technical innovations are developing to reduce costs and improve quality? Active buildings can integrate renewable energy technologies for heat, power and transport as components of an active healthcare network integrated into the smart city. Building and landscape design has been separated for too long; the future will see investment in greening our cities, communities and health buildings.

We’re delighted to invite you to participate and contribute to the exchange of knowledge needed to construct a new design narrative for population & planetary health by submitting abstracts by 4 December 2019.

CALL FOR PAPERS

European Healthcare Design 2020 (EHD 2020) is the 6th Annual 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, social, economic and environmental 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, sustainable development and quality improvement. We are delighted to invite you to submit abstracts on the following core themes.

Plenary theme
At the tipping point: Designing for population and planetary health

Congress streams
• Population-based health systems: Sustainable development as a catalyst for redesigning health systems that foster healthy communities
• The intersection of clinical medicine, public health and design: Redefining the shape and form of health systems, services & infrastructure
• Science, technology & innovation: Collective intelligence across care pathways to empower patients and create active & smart health infrastructure
• Climate smart healthcare: Designing resilient health systems through sustainable finance and procurement, buildings and the circular economy
• Food, art & architecture: Sustainable environments and food systems that create and promote health, support healing and empower people
• Designing for young and old: population health systems that invest in multi-generational mental wellbeing, physical health and independent living

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 2020 Programme Committee. A carefully selected 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 (choice of three out of six streams in order of preference)
- d) title;
- e) author(s);
- f) organisational affiliation; and
- g) three keywords.

The abstracts of the papers chosen for presentation will be published in the Final Programme. Videos of the talks and written papers, and digital versions of the posters with the accompanying abstract will be published online at www.salus.global following the congress. Presenters are expected to gain consent for video reproduction and digital dissemination of any material they present. 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 2020 is English.

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

All abstracts should be submitted at: www.europeanhealthcaredesign.eu.

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

Who should submit a paper and attend?
The European Healthcare Design Congress, Awards & Exhibition attracts the world’s leading interdisciplinary policymakers, researchers and practitioners in the field including:
- 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

8 October 2019
Announcement of Call for Papers

15 November 2019
Announcement of Call for Entries for EHD Awards 2020

4 December 2019
Deadline for EHD 2020 Congress abstracts

13 February 2020
Deadline for EHD 2020 Awards submissions

18 February 2020
Launch of the Preliminary Programme

8 April 2020
Deadline for speaker and early bird registration

1 May 2020
Deadline for full written paper manuscripts

Monday 8 June 2020
09.00–18.00: EHD 2020 Congress & Exhibition
18.00–20.00 Welcome drinks reception

Tuesday 9 June 2020
09.00–18.00: EHD 2020 Congress, Exhibition and Awards
18.00–22.00: Garden Party

Wednesday 10 June 2020
09.00–19.00: Study visits to UK health facilities (to be advised)

Cover Credits (clockwise from top left):
Erasmus MC, designed by EGM Architects
The Christie Proton Beam Therapy Centre, designed by HKS Architects
Punmu and Parnngurr Clinics, designed by Kaunitz Yeung Architecture
Haraldsplass Hospital – new ward building, designed by C.F. Møller Architects
THE PROGRAMME COMMITTEE

Emma Stockton MD
Consultant paediatric anaesthetist, Great Ormond Street Hospital for Children, UK

Charlotte Ruben
Partner, White Arkitekter, Sweden

Prof Noemi Bittnerman PhD
Academic Director, Masters of Industrial Design (MID), Technion, Israel

John Cooper BA Dip Arch, RIBA
Director, John Cooper Architecture (JCA), UK

Göran Lindahl PhD
Associate professor, head of division building design, Chalmers University, Sweden

Ganesh Suntharalingam MB BChir
President, Intensive Care Society, UK

Christine Chadwick
National senior director, infrastructure solutions, GE Healthcare, Canada

Sasha Karakusevic BDS, MBA
Project director, NHS Horizons; senior fellow, Nuffield Trust, UK

Sylvia Wyatt MA, AHSM
Health and Care Strategic Advisor and Consultant

David Allison FAIA, FACHA
Alumni distinguished professor; director of architecture + health, Clemson University, USA

Diana Anderson MD, MArch, ACHA
Dochitect, Geriatric Fellow at UCSF Medical Center, USA

Marte Lauvsnes
Manager, Advisory and Planning Department, Sykehusbyg, Norway

Karín Imberdorf Dipl Arch, MPH
Architect, LEAD Consultants, Switzerland

Upali Nanda PhD
Principal and director of research, HKS, USA

Davide Ruzzon
Director of TUNED, Lombardini22, Italy

Andr ew Ibrahim
Chief medical officer and senior principal, HOK, USA

Organising Committee
Christopher Shaw, chairman, Architects for Health
Jonathan Erskine, director, European Health Property Network
Kate Copeland, chair, Australian Health Design Council
Jim Chapman, visiting professor, Manchester School of Architecture
Stephanie Williamson, deputy director of development, Great Ormond Street Hospital for Children NHS Foundation Trust
Alessandro Caruso, director, Design in Mental Health Network
Claudia Bloom, executive board, Architects for Health

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

www.europeanhealthcaredesign.eu