

ROYAL COLLEGE OF PHYSICIANS LONDON | 11-14 JUNE 2017

# EUROPEAN HEALTHCARE DESIGN

RESEARCH • POLICY • PRACTICE

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ARCHITECTS FOR HEALTH



## CALL FOR PAPERS

VISIONING THE FUTURE: DESIGNING FOR  
CHANGE IN PEOPLE-CENTRED HEALTH SYSTEMS

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Seminar & Global University Program  
in Healthcare Architecture Meeting



# VISIONING THE FUTURE: DESIGNING FOR CHANGE IN PEOPLE-CENTRED HEALTH SYSTEMS

Moving to people-centred health requires compassionate integrated care systems, designed in a way that allows patients to be active participants and true partners in their health and wellbeing throughout the course of their lives.

Healthcare in the 21st century presents great challenges and new opportunities. Science, technology and the transformative power of medicine are accelerating the pace of change, as we embark on a paradigm shift in pharmacology and diagnostics that requires fundamental changes in the provision of care and architecture. Meanwhile, nanotechnology is moving from research to application, our new knowledge of how the brain works is blurring the boundaries between neurosciences and psychology, and the informational and technological revolution is delivering benefits to society at every level.

Medicine is a major beneficiary. The rapid advances and convergence of medical science and information technology have provided us with the tools for system and service redesign, and have transformed diagnosis and treatment. This, in turn, has redefined building typologies. Digital health, mobile technologies and the 'Internet of things' are enabling the management of many and often multiple chronic conditions across the care continuum, from domestic and community settings to the hospital.

Providing an interdisciplinary forum for policy advisors, researchers and practitioners from around the globe, the third European Healthcare Design 2017 (EHD2017) Congress & Exhibition will be held on 11–14 June, 2017 at the Royal College of Physicians in London, UK. Organised by Architects for Health and SALUS Global Knowledge Exchange, in collaboration with the Union of International Architects Public Health Group and the Global University Program in Healthcare Architecture, the Congress adopts a whole-system approach to redesigning European health systems and services, through the exchange of knowledge, research and international best practice on the relationship between health system and service design, technology and the built environment.

This year's congress will present expert insight into our changing socioeconomic and technological environment, and what the future might hold, identifying how these advances will deliver quality improvement in services, enhance patient experience and reduce health inequalities. Meanwhile, opportunities for managing chronic disease and the increasing ability to consult, examine and diagnose remotely are altering the architecture of systems and facilities. The world in which these changes are taking place has seldom seemed less stable. Climate change, economic fragility, the proliferation of failed

states, and mass migration are all existential threats. In Europe, our emergence from economic crisis has been far more protracted and painful than anticipated.

These forces form the context within which the principal themes of the 2017 Congress will be presented. For the past decade, the developed world has moved towards integrated care systems, joining up services between hospitals, general practice, community providers, social care and mental health. Acute care has moved upstream into fewer, larger, more specialist centres, new models for secondary care are being developed, and routine care is extending into the community and the home, vertically linked by common healthcare pathways.

This movement towards a people-centred health system recognises that individuals are both participants and beneficiaries, and have responsibilities for their own health and wellbeing. Care structures are developing that support and inform, and address the individual's health needs and expectations throughout their life, rather than in response to acute episodes. With many moving parts, the challenge is to design an integrated care system that is inclusive, affordable and adaptive. The patient has to find it understandable, accessible, respectful and well-organised – a compassionate system in which the patient and family are partners with the healthcare profession in their own health and wellbeing.

Great design is transformative but seldom achieved without passion and a persuasive, inspirational narrative. Whether the result is a system, service, setting, process or product, we must embrace its power to create positive change at a time of great uncertainty.

We are delighted to invite you to participate and contribute to the exchange of knowledge needed to transform our healthcare systems, by submitting abstracts for the presentation of papers, posters, workshops and colloquiums by 8 December, 2016.



**SUSAN FRANCIS**  
Programme director  
Architects for Health



**MARC SANSOM**  
Director  
SALUS Global Knowledge  
Exchange

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# CALL FOR PAPERS

European Healthcare Design 2017 (EHD 2017) is the third 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. Please also view the accompanying *Theme Description* document at [www.europeanhealthcaredesign.eu](http://www.europeanhealthcaredesign.eu):

## Plenary theme

### On the horizon: visioning the European health economy in 2030

Challenging assumptions to radically redesign our future healthcare system

## Congress streams

### Quality improvement: transforming health and care services by design

- Enhancing the quality and safety of care services with compassion

### Care in the community: designing across the care continuum

- Dissolving the boundaries to create flexible, integrated care systems

### Science, technology and digital health: what the future holds

- Planning for how scientific progress will transform care pathways

### Healthy ageing: inspiring, enabling and supporting older people

- Designing care services and environments to promote active living

### Sustainable development: designing to promote health and biodiversity

- Environments that enhance wellbeing and preserve healthy ecosystems

### The art of care: creating compassionate places and environments

- Integrating art, architecture and design for health and wellbeing

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

The abstract should clearly state the background, purpose, methods, results and conclusions/implications. Presentations in all four formats can be focused on any of research, practice or theory. For more detailed Abstract Guidelines, visit [www.europeanhealthcaredesign.eu](http://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 2017 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](http://www.europeanhealthcaredesign.eu) and MUST include the following details:

- a) presentation type (themed paper, poster, workshop or colloquium);
- 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 present the paper at the congress. The official language of EHD 2017 is English.

Full edited versions of the papers and videos may be published on the SALUS Global Knowledge Exchange at [www.salus.global](http://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](http://www.europeanhealthcaredesign.eu).

All abstracts and enquiries should be submitted by e-mail to the EHD 2017 Secretariat no later than **8 December, 2016** at the following address:

## EHD 2017 Secretariat

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

**Tel:** + 44 (0)1277 634176 • **Fax:** + 44 (0)1277 634041

## Who should submit a paper and attend?

The European Healthcare Design Congress & Exhibition is now in its third 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
- Nursing professionals
- Estates/capital development
- Healthcare directors
- Commissioners
- Health scientists
- Service designers
- Clinical managers
- Architects and designers
- Engineers and developers
- Health planners
- Occupational therapists
- Psychologists
- Economists

# PROVISIONAL TIMETABLE

## 12 October 2016

Announcement of Call for Papers

## 8 November 2016

Announcement of Call for Entries for EHD Awards 2017

## 8 December 2016

Deadline for EHD 2017 Congress abstracts

## 8 February 2017

Launch of the Preliminary Programme and online registration

## 22 February 2017

Deadline for EHD 2017 Awards submissions

## 12 April 2017

Deadline for early bird/speaker registration, and manuscripts

## Sunday 11 June 2017

Union of International Architects Public Health Group Seminar and Global University Program in Healthcare Architecture (preliminary date and venue to be advised)

## Monday 12 June 2017

09.00–18.00: EHD 2017 Congress & Exhibition

18.30–21.00 Welcome drinks reception

## Tuesday 13 June 2017

09.00–17.00: EHD 2017 Congress & Exhibition

17.30–22.00: EHD 2017 Awards and Garden Party

## Wednesday 14 June 2017

09.00–17.00: Study visits to UK health facilities (to be advised)

Cover images (clockwise from top left): Old See House, commissioned by Belfast Health and Social Care Trust, designed by RPP Architects with Richard Murphy Architects; Akershus University Hospital, commissioned by Helse Sor-Øst RHF, designed by C.F. Møller Architects; Aabenraa Psychiatric Hospital, commissioned by Region of Southern Denmark, designed by White arkitekter.

# THE PROGRAMME COMMITTEE

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**EUROPEAN  
HEALTHCARE DESIGN**  
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**Susan Francis BA, AA Dip, MARCA, programme director, Architects for Health, UK**

Susan is a qualified architect and programme director for Architects for Health. Previously, she was special advisor for health and led the NHS Design Review Programme at the CABE (Commission for Architecture and the Built Environment).



**Agnès Couffinal, senior economist, OECD, France**

Agnès is an economist who specialises in health systems and policies. Until recently, she worked at the World Bank, first in South Asia and later in Eastern Europe and Central Asia, supporting governments to improve health systems. She has also worked for the World Health Organization.



**Anja Leetz, executive director, Health Care Without Harm Europe, Belgium**

Anja is executive director for Health Care Without Harm Europe, which works with the health sector to help it become more sustainable. She has worked on issues such as procurement, mercury elimination, low-carbon healthcare, and pharmaceuticals in the environment.



**John Cooper, BA, Dip Arch Cantab ARB RIBA, director, John Cooper Architecture (JCA), UK**

John has been a principal in practice for 33 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.



**Tom Danielson, MAA, RIBA, partner, C.F. Møller Architects, Denmark**

Tom's CV includes chairman of the Danish Association of Architects Competition Committee, and Board member of the Danish Association of Architectural Firms. Tom has been involved in the New University Hospital in Aarhus, DNU – the biggest hospital project in Danish history.



**Neil Halpern MD, chief of critical care medicine, Memorial Sloan Kettering Cancer Center, USA**

A professor of medicine and anesthesiology at Weill Cornell Medical College, Neil is also a member of the editorial board of Critical Care Medicine and CHEST. His specialties include ICU design innovation, advanced ICU informatics, and point-of-care testing.



**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 across the health sector.



**Sylvia Wyatt, MA AHSM, advisor, AgeUK IW, UK**

Sylvia is an advisor to AgeUK Isle of Wight and is 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.



**Alastair Gourlay, director of asset management, Guy's and St Thomas' NHS Foundation Trust, UK**

A trained architect, Alastair has extensive experience of strategic planning, design, delivery and commissioning of healthcare projects. At Guy's and St Thomas', he leads on all capital and property issues on the acute sites and across the local community.



**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.



**Ružica Božović Stamenović, Faculty of Architecture, University of Belgrade, Serbia**

An associate professor at the University of Belgrade since 1989, Ružica is a visiting academic at the National University of Singapore. Her research interests include human ecology space and health, health architecture for mega-mature societies, and health-restoring design processes.



**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.

## Organising Committee

**Marc Sansom**, director, SALUS Global Knowledge Exchange, UK

**Christopher Shaw**, chairman, Architects for Health, UK

**Jonathan Erskine**, director, European Health Property Network, UK

**Warren Kerr**, director, Union of International Architects Public Health Group, Australia

**Claudia Bloom**, executive board, Architects for Health, UK

**Jim Chapman**, Manchester School of Architecture, UK

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

**Cliff Harvey**, Union of International Architects Public Health Group, Canada

For further enquiries on the event programme, sponsorship or exhibition opportunities, contact:

**SALUS Global Knowledge Exchange** E: [info@europeanhealthcaredesign.eu](mailto:info@europeanhealthcaredesign.eu) • T: +44 (0)1277 634176 • F: +44 (0)1277 634041

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