



ROYAL COLLEGE OF PHYSICIANS LONDON | 12 - 14 JUNE 2023

EUROPEAN HEALTHCARE DESIGN

RESEARCH • POLICY • PRACTICE

PRELIMINARY PROGRAMME

FAULT LINES AND FRONT LINES STRENGTHENING HEALTH SYSTEM RESILIENCE

Register at europeanhealthcaredesign.eu | info@europeanhealthcaredesign.eu

 @EHD_2023 #EHD2023

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Diamond Thought Leaders



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TIMETABLE OF EVENTS

March 2023

Launch of the Preliminary Programme and online registration

20 April 2023

Deadline for speaker registration

16 May 2023

Extended Early Bird deadline

18 May 2023

Deadline for written papers/manuscripts

Monday 12 June 2023

09.00–18.00: EHD2023 Congress & Exhibition

18.00–20.30 Welcome Drinks Reception

Tuesday 13 June 2023

08.45–17.00: EHD2023 Congress & Exhibition

17.00–18.00 EHD2023 Awards

18.30–22.00: Garden Party

Wednesday 14 June 2023

09.00–19.00: Study visits to UK health facilities
(exact times to be advised)

Cover credits (clockwise from top left): First Affiliated Hospital of Zhejiang University School of Medicine and Research Center, China, designed by HDR and ZIAD; Hospital Nova, Finland, designed by JKMM Architects; University of Illinois College of Medicine, Surgical Innovation and Training Lab, USA, designed by CannonDesign and Bailey Edward

Page 2-3 credits (left to right): Maternity Ward at Punta Europa Hospital in Andalucía, Spain, designed by Virai / Parra-Müller Arquitectura de Maternidades; assisted-living apartments OCMW Halle, Belgium, designed by Gortemaker Algra Feenstra; The Sight and Sound Centre supported by Premier Inn, UK, designed by Sonnemann Toon Architects

Page 6-7 credits (left to right): Sikkerhetsbygget | High security hospital at St Olavs university hospital in Trondheim, Norway, designed by RATIO arkitekter and Karlsson arkitekter; Oriol, UK, designed by Penoyre & Prasad

Page 12 credit: Grafton Way Building, University College London Hospital, UK, designed by Scott Tallon Walker Architects and Edward Williams Architects

Page 28 credits (top to bottom): New Hospital Malmö VB, Sweden, designed by White Arkitekter; Maitland Hospital, Australia, designed by BVN

FAULT LINES AND FRONT LINES STRENGTHENING HEALTH SYSTEM RESILIENCE



The impacts of climate change, a pandemic, active conflicts, economic volatility and inflation have laid bare global health inequalities, creating hunger, poverty, displacement and disease that are testing the resilience of our health systems and infrastructure.

The convergence of these forces is making the world a less predictable and more volatile place. Our political, social and economic systems and institutions, including our health systems, need to be strengthened to create a buffer against this turbulence and sustain the services and infrastructures on which we depend.

A resilient and high-performing health and care system can be the tie that binds society and communities together. It can play a critical role to play at the intersection of politics, economics and culture to meet these global challenges and help to build the foundations for a healthier, more productive and socially cohesive society.

The existential challenges of climate change, war, economic crisis, pestilence, and food, water and energy security will require governments and healthcare systems to invest in a much greater reserve of already stressed human, physical and capital resources than have previously been planned for. Have we applied a definition of health system performance and sustainability that is too narrow? Should we be measuring success through the prism of resilience – system, service and infrastructure planning and design that can sustain and develop our social, economic and cultural as well as physical structures?

The global workforce crisis in healthcare is centre stage. By 2030, the world will be short of 15 million health workers, with 43 million needed to achieve universal health coverage. But attracting and recruiting more health workers to join exhausted professions, burdened mentally and physically from the pandemic, is only part – albeit a critical part – of the solution.

New models of care and advances in technology and the life sciences, from AI to personalised medicine, have the potential to transform the

quality, access and equity of care for more people in new settings closer to the patient, at the same time as improving the sustainability of supply chains and infrastructure.

Agents of change, curators of knowledge

A recent report by the All-Party Parliamentary Group on Global Health on the future roles of healthcare workers called for a transformation of health systems to support “most care [to be] delivered at home and in communities” with the role of health professionals changing and extending as “agents of change and curators of knowledge”.

How can we design healthcare facilities to improve the quality of the workplace for clinical and non-clinical staff and accommodate these changing roles at every level of the healthcare estate – from the teaching hospital to the GP centre? Are the ways in which we design healthcare buildings, with a reliance on inward-facing stakeholder engagement and ageing databases, in need of review?

Rapid progress is now being made to embed low-carbon design and construction in some areas of the world, but global standards are required. Questions, too, remain over the definition of net zero, whether we should be measuring embodied or operational carbon and the standards required for how resources and materials are used efficiently over their design life.

As huge global consumers of energy, health systems are being hit hard by the threat to energy security and rapidly rising costs, bringing into sharp focus how the sector’s carbon footprint can be reduced across the whole system. In the UK, a quarter of the NHS’ carbon emissions is generated by the manufacture and distribution of pharmaceuticals. It may also seem simple to repurpose the pavilion hospitals of the 19th and



early 20th centuries, but many of the hospitals we're now replacing are only 30-40 years old and are far more difficult to re-use.

Building the urgent capacity required across health and care systems will require visionary and strategic-level thinking to plan our health systems in a way that aligns and accelerates evolving professional roles to new, more radical service models of care across new settings and sustainable infrastructure. Too often, siloed thinking and funding trump system-level strategies that join up workforce, service and infrastructure planning and design.

The prism of resilience.

In 2023, the European Healthcare Design Congress will explore the latest research, policies and practice examples on the role of design and planning through the prism of resilience, demonstrating innovation and the application of new ideas on the future of health systems and hospitals that are better connected to our cities and communities.

The Congress features two days of insightful, provocative and entertaining talks, workshops and panel discussions. Days one and two will open with keynote plenary sessions, before splitting into four streams. And the final session of day two will be devoted to a ceremony to present the EHD2023 Awards, supported by lead sponsor IHP. All sessions will be streamed virtually for delegates unable to attend in person.

The Congress will also host a video + poster gallery of innovative research and design projects (pp17-20), an exhibition of design and technology solutions, a Welcome Reception, a Garden Party, and study tours (pp22-23).

For details about online registration and sponsorship opportunities, please go to pages 25-26. Please note that all times in the programme are British Summer Time (BST).



JOHN COOPER
EHD2023 Programme Chair
Past chair,
Architects for Health



MARC SANSOM
Director
SALUS Global Knowledge
Exchange

KEYNOTE SPEAKERS



DR JENNIFER DIXON
Chief executive,
The Health Foundation, UK



DR STEPHANIE ALLEN
Former global
head of healthcare,
Deloitte, Australia



CAROLYN STEELE
Author and architect, UK



DR PAUL BARACH
Jefferson College of
Population Health, USA;
Sigmund Freud University,
Austria; University of
Birmingham, UK



BEN CLENCH
Traumatic brain injury
survivor, UK

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THE PROGRAMME COMMITTEE



John Cooper BA Dip Arch, RIBA
Director,
JCA, UK



Stephanie Williamson
Co-chair,
Architects for Health, UK



Prof Noemi Bitterman PhD
Academic director, Masters of Industrial
Design (MID), Technion, Israel



Tina Nolan BArch, MBA
Managing director, director of healthcare strategy
+ planning, Lexica; Health Planning Academy, UK



John Cole CBE
Honorary professor,
Queen's University Belfast, UK



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



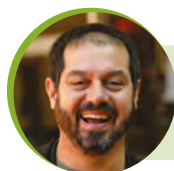
Christine Chadwick
Consultant advisor,
Archus, Canada



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



Nirit Pilosof PhD
Head of research in innovation and
transformation, Sheba Medical Centre;
Faculty Member, Tel Aviv University, Israel



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



Harry van Goor MD, PhD
Professor of surgical education,
Radboudumc, Netherlands



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Medical Center, USA



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Lombardini22, Italy



Karin Imoberdorf Dipl Arch, MPH
Architect,
LEAD Consultants, Switzerland



Ganesh Suntharalingam MB BChir
Intensivist, London North West University
Healthcare NHS Trust, UK

Organising Committee

Stephanie Williamson, Co-chair, Architects for Health

Jamie Bishop, Co-chair, Architects for Health

Richard Darch, Health Planning Academy

Jonathan Erskine, Director, European Health Property Network

Kate Copeland, Chair, Australian Health Design Council

Jim Chapman, Emeritus professor, Manchester School of Architecture





08.00 REGISTRATION OPENS



SESSION 1

Opening plenary

Chair: John Cooper, Architects for Health, UK

08.45 Welcome and introduction

09.00 Keynote: Visioning our future health system: barriers and opportunities

Dr Jennifer Dixon, Chief executive, The Health Foundation, UK

09.25 Keynote: The global sustainable development challenge in healthcare

Dr Stephanie Allen, Former global head of healthcare, Deloitte, Australia

09.50 Panel discussion

10.15– COFFEE, EXHIBITION & VIDEO+POSTER GALLERY

10.45



SESSION 2

Designing the European super hospital

Chair: Tina Nolan, Lexica, UK

10.45 The new Royal Liverpool University Hospital: Strengthening resilience in the Northwest

Jessica Karsten, HKS Architects, UK

David Lewis, NBBJ, UK

11.05 Hvidovre and North Zealand Hospitals – back to the future

Mungo Smith, MAAP Architects, Australia

11.25 The Danish Hospital reform: The New Regional Hospital Gødstrup

Birgitte Gade Ernst, Arkitema, Denmark

11.45 Infrastructure for happiness: The case of Hospital Nova

Freja Stahlberg-Aalto, JKMM Architects, Finland

Teemu Kurkela, JKMM Architects, Finland

Juho Pietarila, JKMM Architects, Finland

12.05 Panel discussion

12.30– LUNCH, EXHIBITION & VIDEO+POSTER GALLERY

14.00





SESSION 3

Transforming mental health by design

Chair: Christine Chadwick, Archus, Canada

14.00 **A national step-change in facilities for secure mental health**

Ruairi Reeves, Medical Architecture, UK
Karl Burton, Scott Tallon Walker Architects, UK

14.20 **How design can promote better wellbeing for patients, staff and visitors, alongside the wider community**

Roddy Langmuir, Cullinan Studio, UK
David Powell, Alder Hey Children's NHS Foundation Trust, UK

14.40 **Towards a new architecture for mental health**

Teva Hesse, 4D Studio Architects, (formerly C.F. Moller Architects UK), UK
Anna Barnes, South West London and St George's Mental Health NHS Trust, UK

15.00 **Panel discussion**

15.30–16.00 **COFFEE, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 4

Integrating art and nature

Chair: Sunand Prasad, Perkins&Will, UK

16.00 **The art of inclusion – how community and art can foster belonging in healthcare architecture**

Tara Veldman, Billard Leece Partnership, Australia

16.20 **Therapeutic Hospital Gardens – building a framework delivering quality healthcare**

Katharina Nieberler-Walker, Griffith University, Cities Research Institute, Australia

16.40–17.00 **Panel discussion**



SESSION 5

Keynote plenary

Chair: Sunand Prasad, Perkins&Will, UK

17.00 **Keynote: Sitopia: How food can save the world**
Carolyn Steel, Author and architect, UK

17.45 **Panel discussion**

18.00 **Close**

18.00–20.30 **EXHIBITION, VIDEO+POSTER GALLERY & WELCOME DRINKS RECEPTION**

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SESSION 6

Community health and wellbeing

Chair: **Hank Adams**, HDR, USA

- 10.45** **Designing a new healthcare model to address the social determinants of health: A case study**
Sarah Prodor, Architecture 49, Canada
Bryan Darrell, Infrastructure management, Government of Nova Scotia, Canada
Kathryn Edwards, WSP, Canada
- 11.05** **Local estates configuration to enable integrated care**
Smriti Singh, The PSC, UK
Charlotte Bambridge, The PSC, UK
- 11.25** **Integrated health and wellbeing**
Neil Orpwood, HLM Architects, UK
Jack Wagstaff, The North West Surrey Health & Care Alliance, UK
Melanie Jacobsen Cox, HLM Architects, UK
- 11.45** **Healthcare in unexpected places**
Polly Barker, TP Bennett, UK
- 12.05** **Panel discussion**
- 12.30–14.00** **LUNCH, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 7

Health system transformation in the Asia-Pacific

Chair: **Matthew Holmes**, Jacobs, Australia

- 14.00** **Thailand healthcare system by design: An integrated approach**
Surapong Lertsithichai, Chulalongkorn University, Thailand
- 14.20** **Hospital of the future: Setting a new benchmark for resilient design in Singapore**
Deborah Wingler, HKS, USA
Angela Lee, HKS, Singapore
Sarah Holton, HKS, USA
- 14.40** **Care in healthcare: The patient and provider experience, hospitals without walls, and community convergence**
Jason-Emery Groen, HDR, Canada
Francesqca Jimenez, HDR, USA
- 15.00** **Panel discussion**
- 15.30–16.00** **COFFEE, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 8

Sustainable service transformation

Chair: **Göran Lindahl**, Chalmers University, Sweden

- 16.00** **Mater transformation: Shaping systems at the frontline**
Aileen Igoe, Mater hospital, Ireland
Siobhan Manning, Mater Hospital, Ireland
Una Cunningham, Mater Hospital, Ireland
- 16.20** **Are telephone fracture clinics a sustainable alternative for the patient, the climate, and financially?**
Katherine Chin, Guy's and St Thomas' NHS Foundation Trust, UK
- 16.40–17.00** **Panel discussion**

Stream 2 will be brought to a close at 17.00, whereupon delegates are invited to return to the Wolfson Theatre for the day's closing plenary session (17.00–18.00).



SESSION 9

Targeting net-zero carbon by design

Chair: Warren Percival, RSK, UK

10.45 **Applying parametric modelling and passive-house design principles to support net-zero healthcare environments**
Geoff Southern, Arcadis, UK

11.05 **Healthy hospitals for a healthy planet – Balancing carbon vs space: The mandate to design all new NHS buildings as net-zero carbon (NZC) is undoubtedly right**
Gavin Crook, AECOM, UK
Anuradha Sabherwal, NBBJ, UK

11.25 **Climate change resilience framework for health systems and hospitals**
Mai Shafei, Health Care Without Harm, Belgium

11.45 **Future-proofing health planning and investment: The introduction of modular healthcare buildings to strengthen health resilience**
Sarka Oldham, Vanguard, and Q-bit Healthcare Solutions, UK

12.05 **Panel discussion**

12.30–14.00 **LUNCH, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 10

Sustainable hospital design

Chair: Richard Mann, AECOM, UK

14.00 **Adapting to climate change through sustainable hospital design in developing countries: A case study on New Betio Hospital, Kiribati**
Shari Blanch, Jacobs, Australia

14.20 **Velindre Cancer Centre: Towards the greenest hospital in the UK**
Michael Woodford, White Arkitekter, UK
Anna Lisa McSweeney, White Arkitekter, UK

14.40 **Dalal Jamm – a future-proof hospital campus in the subtropical climate of Dakar**
Coen van den Wijngaart, archipelago architects, Belgium
Laurent Grisay, archipelago architects, Belgium

15.00 **Panel discussion**

15.30–16.00 **COFFEE, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 11

Strategy and leadership in sustainable design

Chair: Chris Liddle, HLM Architects, UK

16.00 **IEMA NED Note and the importance of sustainability at a board level to help challenge and facilitate sustainable design at a trust level**
Katherine Risk, Nature Positive, UK
Warren Percival, RSK, UK
Luka Brown, Nature Positive, UK

16.20 **A system approach to tackling climate change**
Alison Foster, Royal Berkshire NHS Foundation Trust, UK
Maria Vahdati, University of Reading, UK
Peter Moore, Reading Borough Council, UK

16.40–17.00 **Panel discussion**

Stream 3 will be brought to a close at 17.00, whereupon delegates are invited to return to the Wolfson Theatre for the day's closing plenary session (17.00–18.00).



SESSION 12

Designing the inpatient ward

Chair: Paul Bell, Ryder Architecture, UK

-
- 10.45 **Single versus multi-occupancy patient rooms: The 'old' discussion revisited based on 'new' lessons from the Covid-19 pandemic and 100-per-cent single-occupancy inpatient accommodation**
Liesbeth van Heel, Erasmus MC, Netherlands
Michael Cassells, NHS Scotland Assure, UK
-
- 11.05 **Challenging the accepted to explore the possible – a blue-sky approach to the sustainability agenda**
Morag Lee, Hassell, Australia
Mark Davie, Aurecon, Australia
-
- 11.25 **A personalised environment – how to design tailor-made rooms for people with intellectual disabilities and behavioural problems in long-term care facilities**
Andrea Möhn, AM_A Andrea Möhn Architects, Netherlands
-
- 11.45 **Re-imagining the bedroom unit in mental health design: A space for identity, empowerment and recovery**
Shannon Wiley, Montgomery Sisam Architects, Canada
Karine Quigley, Montgomery Sisam Architects, Canada
-
- 12.05 **Panel discussion**
-
- 12.30–14.00 **LUNCH, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 13

Designing for rehabilitation

Chair: Ben Bassin, Massey Family Foundation Emergency Critical Care Center, USA

-
- 14.00 **Exploring the role of the inpatient rehabilitation environment in stroke survivor behaviour, wellbeing and safety**
Ruby Lipson-Smith, The Florey Institute of Neuroscience and Mental Health, Australia
-
- 14.20 **The National Rehabilitation Centre as a prototype project for rehabilitation**
Paul Bell, Ryder Architecture, UK
Miriam Duffy, Nottingham University Hospitals NHS Trust, UK
-
- 14.40 **Inpatient room for neurorehabilitation: Researching the dimensional spaces to optimise care**
Francesca Giofre, Sapienza University of Rome, Italy
Elisabetta Alesse, Fondazione Santa Lucia IRCCS (Scientific Institute for Research and Healthcare), Italy
-
- 15.00 **Panel discussion**
-
- 15.30–16.00 **COFFEE, EXHIBITION & POSTER GALLERY**



SESSION 14

Health and life sciences innovation

Chair: Coen van den Wijngaart, archipelago, Belgium

-
- 16.00 **Labs that work for the planet**
Peter Coxhead, Lexica, UK
Meriem McKenzie, Lexica, UK
-
- 16.20 **Integrating health and research on the Edinburgh BioQuarter**
David Martin, Stantec, UK
Aaron Taylor, Stantec, UK
-
- 16.40–17.00 **Panel discussion**

Stream 4 will be brought to a close at 17.00, whereupon delegates are invited to return to the Wolfson Theatre for the day's closing plenary session (17.00–18.00).



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08.00 REGISTRATION OPENS



SESSION 15

Opening plenary

Chair: Jaime Bishop, Architects for Health, UK

08.45 Welcome and introduction

09.00 **Keynote: Reimagining the future hospital: Patient and clinical perspectives on safety, wellbeing and value**

Dr Paul Barach, Jefferson College of Population Health, USA; Sigmund Freud University, Austria; University of Birmingham, UK

09.25 **Keynote: Follow the patient: Driving quality improvement through the patient voice**

Ben Clench, Traumatic brain injury survivor, UK

09.50 Panel discussion

10.15–10.45 COFFEE, EXHIBITION & VIDEO+POSTER GALLERY



SESSION 16

Designing for cancer care

Chair: Katie Wood, Arup, UK

10.45 **Agile design and human scale focus: How cancer centre design can aspire to both**

Catherine Zeliotis, Stantec, UK
Diego Morettin, DIALOG, Canada

11.05 **Long-life loose-fit buildings and estates strategies to ensure health system resilience in cancer care**

Dominic Hook, BDP, UK

11.25 **Creating a cancer treatment garden in Shanghai**

Michael Street, HDR, USA
Thomas Smith, HDR, USA

11.45 **Re-defining world-class cancer care from the inside-out: Employing a transformative design process for the new MSK Cancer Care Pavilion**

Abbie Clary, CannonDesign, USA
Roger McClean, Memorial Sloan Kettering Cancer Center, USA

12.05 Panel discussion

12.30–14.00 LUNCH, EXHIBITION & VIDEO+POSTER GALLERY





SESSION 17

Designing for women and children

Chair: Stephanie Williamson, Architects for Health, UK

- 14.00 **Delivering women's and children's care: A comparative study of two centres – British Columbia Canada and Birmingham, UK**
Conor Ellis, Archus, UK
Max Martin, BDP, UK
- 14.20 **Designing for neurodiverse children within healthcare: Case study – Nicklaus Children's Hospital, Miami**
Hala El Khorazaty, Perkins&Will, UK
Amy Sickeler, Perkins&Will, USA
- 14.40 **The silent hospital: A "smart" step towards building staff resilience and patient recovery**
Roberta Fuller, Royal Cornwall Hospitals NHS Trust, UK
Rob Faro, TClarke, UK
Samantha Prime, University of Plymouth, UK
Michael Fjeldstad, DNV Imatis, UK
- 15.00 **Panel discussion**
- 15.30–16.00 **COFFEE, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 18

Designing for older people and dementia

Chair: Lianne Knotts, Medical Architecture, UK

- 16.00 **New architectural models for the comprehensive care of the elderly population with multiple chronic diseases**
Albert Vitaller Santiró, Vitaller Arquitectura, Spain
Eva Roense i Simó, Vitaller Arquitectura, Spain
- 16.20 **Dementia-friendly patient room**
Elke Reitmayer, Bern University of Applied Sciences, Switzerland
Minou Afzali, Swiss Center for Design and Health, Switzerland
- 16.40–17.00 **Panel discussion**



SESSION 19

Closing plenary and awards

Chair: John Cooper, Architects for Health, UK

- 17.00 **European Healthcare Design Awards 2023**
Presented by: Jaime Bishop, Architects for Health, UK
Supported by lead sponsor:



- 17.45–18.00 **Closing address**
John Cooper, JCA, UK

- 18.30–22.00 **GARDEN PARTY AND LIVE MUSIC**
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SESSION 20

Strategic planning and investment

Chair: Richard Darch, Archus, UK

10.45 **Power for the people! Calling for a revolution in hospital investment to build capacity and effectiveness**
Rhonda Kerr, Guidelines and Economists Network International (GENI), Australia

11.05 **Planning backwards for a healthy future**
John Kelly, Lexica, UK
Melanie Relf, Lexica, UK

11.25 **Integration of physical and mental health**
Kate Bradley, MJ Medical, UK

11.45 **The support structure for strategic planning for long-term hospital renovations**
Lidor Gilad, Itten+Brechtbühl, Switzerland
Catherine Jaquier-Bühler, Itten+Brechtbühl, Switzerland
Marwen Feriani, Itten+Brechtbühl, Switzerland

12.05 **Panel discussion**

12.30–14.00 **LUNCH, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 21

Resilience planning for disasters and pandemics

Chair: Danny Gibson, MJ Medical, UK

14.00 **Covid-19 effects on healthcare facilities and patient care: Providers' first-hand learning and what that means for the future of healthcare design**
Francesca Jimenez, HDR, USA
Katie Fricke, HDR, USA
Jeri Brittin, HDR, USA

14.20 **The many roads to resilient design**
Julie Frazier, Perkins&Will, USA

14.40 **Building for healthcare resiliency: A multi-pronged approach examining pandemic response of multiple facilities across the US military health system**
Deborah Wingler, HKS, USA

15.00 **Panel discussion**

15.30–16.00 **COFFEE, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 22

From briefing to post-occupancy evaluation

Chair: David Allison, Clemson University, USA

16.00 **Doing the possible and then the impossible: A conference strategic health planning panel**
Tara Veldman, Billard Leece Partnership, Australia
Isabelle Mansour, Mott Macdonald, Australia
Benjamin Woenig, Visione Group, Australia
Lesley Alway, Strategic Health Resources, Australia

This presentation will report on a workshop held by the Australian Health Design Council (AHDC) at the inaugural Australasian Health Design Conference 2022.

16.20 **Why are there not more post-occupancy evaluations?**
Gemma Ham, MJ Medical, UK
Dan Gibson, MJ Medical, UK

16.40–17.00 **Panel discussion**

Stream 6 will be brought to a close at 17.00, whereupon delegates are invited to return to the Wolfson Theatre for the day's closing plenary session (17.00–18.00).



08.30–10.05 **WORKSHOP: De-institutionalising furniture for healthcare**
For the full abstract and details of the panel, please go to page 21

Organised by:
mjmedical



SESSION 23

Smart hospital design, planning and operations

Chair: **Brenda Bush-Moline**, Stantec, USA

10.45 **Maximising the digital benefits of capital projects by planning and thinking as a system: Lessons learned from the Monklands Replacement Project**

Alison Evans, Currie & Brown, UK
Kathryn Henderson, NHS Lanarkshire, UK
Graeme Reid, NHS Lanarkshire, UK

11.05 **Project vision: Data-driven design – Empowering the third eye**

Michele Cohen, NORR Architects & Engineers, Canada
Frank Panici, NORR Architects & Engineers, Canada
Andrew Petrosoniak, Advanced Performance Healthcare Design, Canada

11.25 **Using digital twins and simulation in planning of complex healthcare projects**

Thomas Leitner-Marzano, Ramboll Denmark, Denmark

11.45 **Science, technology and digital transformation: Smart hospital innovations**

Richard McAuley, Brandon Medical, UK

12.05 **Panel discussion**

12.30–14.00 **LUNCH, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 24

Equitable digital health and wellbeing

Chair: **Sasha Karakusevic**, NHS Horizons, UK

14.00 **Digital placemaking for health and wellbeing in North East London**

Dr Jo Morrison, Calvium, UK
Louise Phillips, NHS North East London, UK

14.20 **Seamless monitoring of physiological data in domestic space: A cross-national and multi-linguistic study**

Noemi Bitterman, Technion, Israel Institute of Technology, Israel

14.40 **'Leave no-one behind': Unlocking the potential of digital health equity to strengthen health system resilience for all people with chronic conditions**

Lucio Naccarella, University of Melbourne, Australia
Nana Folmann Hempler, Copenhagen University Hospital, Denmark

15.00 **Panel discussion**

15.30–16.00 **COFFEE, EXHIBITION & VIDEO+POSTER GALLERY**



SESSION 25

Digital design of command and control

Chair: **Duane Passman**, Percipio Consulting, UK

16.00 **From nurse station to control tower: Operating hybrid care models across the healthcare ecosystem**

Nirit Pilosof, University of Cambridge, Israel
Eivor Oborn, University of Warwick, UK

16.20 **Importance of interconnectivity within command centres**

Beau Herr, Arcadis, USA
Phi Kim Ho, Arcadis, USA

16.40–17.00 **Panel discussion**

Stream 7 will be brought to a close at 17.00, whereupon delegates are invited to return to the Wolfson Theatre for the day's closing plenary session (17.00–18.00).



SESSION 26

Innovation in emergency, critical and surgical care

Chair: Cemal Sozener, Univeristy of Michigan Medical School, USA

- | | |
|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 10.45 | Future-proofing EDs: Adaptable environments for supporting community crises
Brian Silva and Ellen Leise, CannonDesign, USA
Steven Petrovic, University of Cincinnati Health, USA
Ben Bassin, Emerging Healthcare Design Consulting, USA |
| 11.05 | Clinical perspectives: Enhanced collaboration for innovative operating theatres
Eve Edelstein, Clinicians for Design International, UK/ USA
Hala El Khorazaty, Perkins&Will, UK |
| 11.25 | Designing and constructing new hospital facilities that can be “flexible in use” for high infrastructure-dependent patients using design for manufacture
Anne Symons and Grant Mills, UCL, UK |
| 11.45 | Digital twin tools to test models of care and health infrastructure planning assumptions
Carla Edwards, TSA Management, Australia
Robyn Brigden, TSA Management, Australia |
| 12.05 | Panel discussion |
| 12.30–14.00 | LUNCH, EXHIBITION & VIDEO+POSTER GALLERY |



SESSION 27

Clinician wellness and engagement

Chair: Ganesh Suntharalingam, London North West University Healthcare NHS Trust, UK

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| 14.00 | Clinical time not stakeholder engagement: What is the optimum model?
Emma Stockton, Great Ormond Street Hospital NHS Foundation Trust, UK
Marc Levinson, Murphy Phillips, UK
Elizabeth Whelan, Made for Health, UK
Tom Best, King’s College Hospital, UK
(Organised by Building Blocks for Clinicians) |
| 14.20 | Realising clinician faculty wellness through facility design
Niraj Dangoria, Dean, Stanford University School of Medicine, USA
Paul Woolford, HOK, USA |
| 14.40 | Bytes’: Design decisions on a video consulting area
Harry van Goor, Radboud University Medical Center, Netherlands |
| 15.00 | Panel discussion |
| 15.30–16.00 | COFFEE, EXHIBITION & VIDEO+POSTER GALLERY |



SESSION 28

Inclusive design and accessibility

Chair: Jim Chapman, Client advisor, UK

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| 16.00 | Evaluating the built environment for multi-sensory independent navigation and facility readiness for persons with disabilities
LarriJo Boone, EwingCole, USA
Suzy Genzler, EwingCole, USA |
| 16.20 | Co-designing a collaborative wayfinding system for vision-impaired users
Michel Verheem, ID-LAB, Australia |
| 16.40–17.00 | Panel discussion |

Stream 8 will be brought to a close at 17.00, whereupon delegates are invited to return to the Wolfson Theatre for the day’s closing plenary session (17.00–18.00).

VIDEO+POSTER GALLERY

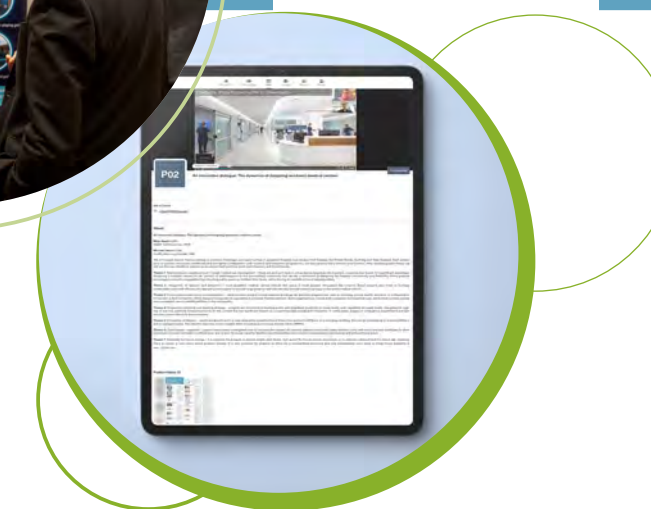
Dorchester Library

Supported by:

AECOM

The cultured surroundings of the Dorchester Library will play host to the Video+Poster Gallery, supported by AECOM.

Featuring an array of visual and dynamic presentations on scientific research, cutting-edge policy, technological innovations and landmark healthcare design projects, the Video+Poster Gallery will be on display throughout the Congress, providing ample opportunity for delegates to peruse at their leisure in between sessions.



P01 The disposable culture of maternity care and design – can we make it more sustainable?

Sarah Joyce, University of Leeds, UK

P02 A qualitative investigation into the implications of immersive technologies in the healthcare sector and its built environment

Eunsil Yang, UCL Bartlett Sustainable Construction, UK

P03 Designing to promote safety and occupational health in Covid-19 care: Lessons learned about areas for doffing of PPE in inpatient units

Herminia Machry, University of Kansas, USA; Zorana Matic, Northeastern University, USA; Jesse T. Jacob, Emory University School of Medicine, USA

P04 Planning and design of a resilient network of care

Anthony Roesch, HOK, USA; Deirdra Orteu, Imperial College Healthcare NHS Trust, UK

P05 Empowering hospital systems in achieving top-quality design and planning of their large-scale healthcare facilities, focusing on Asian healthcare construction

Sumandeep Singh, HKS, Singapore

P06 The modernisation programme for the Princess Elizabeth Hospital, Guernsey – flexibility of services and buildings in a small island setting to strengthen resilience

Michael Clarke, MC Consult, UK; Andrew Street, Arcadis, UK; Jan Coleman and Robin Bailey, States of Guernsey, Guernsey

P07 Developing visions for the hospital of the future to achieve integrated sustainable and resilient-to-climate-change healthcare real estate

Federica Pascale, Anglia Ruskin University, UK

P08 Identifying barriers to health innovation in London

Kelsea Little, Lexica, UK

P09 Sabará Children's Hospital

Lara Kaiser, Gabriel Freditas, Manuel Cadrecha, Perkins&Will, Brazil

P10 Older aged patients' experience with hospital food services on surgical and internal medicine wards of tertiary hospitals

Katarina Vojvodic, Institute of Public Health of Belgrade, Serbia

P11 A case study on the performance evaluation of senior housing in South Korea from the wellbeing perspective of elderly residents

Mingi Kim, Miseon Jang, Jiyun Kim, Jeonbuk National University; Yeunsook Lee, Yonsei University, Korea

P12 The New University Hospital Monklands: A case study

David Ross, Keppie Design, UK

P13 Regenerative design for better health and wellbeing

Andrew Tempany, Lynne Houlbrooke, RSK Group, UK

P14 Integrating resilience into design

Sophia Hami, Miguel Angel Lopez, Sammy Shams, HKS, UK

P15 Delivering the southern hemisphere's first standalone heart hospital

Paul Emmett, Conrad Gargett, Australia; Yee Jien, John Wardle Architects, Australia; Bernadette Commiti, Victorian Heart Hospital, Monash Health, Australia

P16 Transformation – a thousand moments of care: Quietly charting a course in patient-centred healthcare design

Frank R Panici, NORR Architects and Engineers, Canada; Siamak Hariri, HPA Architecture, Canada; Rudy Dahdal, North York General Hospital, Canada

P17 'Behaviour': Design to heal and feel well

Iris Hobo, Harry van Goor, Radboud University Medical Center, Netherlands

P18 The art of distraction

Melanie Jacobsen Cox, Andy Illingworth, HLM Architects, UK

P19 "Bricks": Design decisions for a health(y) Radboudumc campus

Willemineke Hammer, EGM architects, Netherlands

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| <p>P20 The Florence Project
Michal Eitan, Bezalel Academy of Art and Design
Jerusalem, Israel</p> | <p>P21 Wellness approach
Melanie Jacobsen Cox, HLM Architects, UK</p> | <p>P22 Addressing healthcare resilience through new genotypes of hospitality buildings
Debjyoti Pati, Farzane Omid, Texas Tech University, USA; Armin Piriyaee, Jennie Evans, HKS Architects, USA</p> | <p>P23 Shaping the healthcare estates of the future
Hannah Callingham, Lucy Symons-Jones, Lexica, UK</p> | <p>P24 The architectural medicine system and the architectural doctor: Providing interoperability for health and wellness in the built environment
Timothy Rossi, Architectural Medicine, USA</p> | <p>P25 The importance of a collaborative approach between clinical medicine and the hospital estate: Optimising environments and furthering the adoption of new technologies to support clinical service planning strategies
Sarka Oldham, Lucy Meecham Jones, Vanguard, and Q-bit Healthcare Solutions, UK</p> | <p>P26 Going up! The evolution of mental health facilities from countryside to city
Victor Muniz, Mark Carter, Ryder Architecture, UK</p> | <p>P27 Applying mixed-reality for healthcare simulation in participatory architectural planning
Jan A. Eckert, Swiss Center for Design and Health, Switzerland</p> | <p>P28 A phased, clinically led, and strategic approach to infrastructure development programmes
Charlotte Bambridge, Samuel Rose, The PSC, UK
Nicola Collas, University Hospitals Plymouth NHS Trust, UK</p> | <p>P29 Innovation in ventilation: Aligning infection prevention with energy efficiency
Alyson Prince, Archus, UK
Kathy Warye, Infection Prevention, USA</p> | <p>P30 Digital health, illustrated
Levina Siswanto, Kate Bradley, Kieren Morgan, MJ Medical, UK</p> | <p>P31 Establishing a resilience team and building trust – insights from the process
Shani Brosh, Carmel Medical Center, Israel</p> | <p>P32 Home modification experience and continuity of living for older adults
Yoonseo Hwang, Chungbuk National University, Korea; Miseon Jang, Jeonbuk National University, Korea; Yeunsook Lee, Yonsei University, Korea</p> | <p>P33 Hidden in plain sight – The Orange Door: A new ‘model of care’ and community service hub aimed at supporting and saving the lives of those experiencing partner violence
Tonya Hinde, Billard Leece Partnership, Australia</p> | <p>P34 Mapping design guidelines and clinical guidelines to the process of care: A case study of stroke rehabilitation in Australia
Ruby Lipson-Smith, Juan Pablo Saa, Julie Bernhardt, Professor, The Florey Institute of Neuroscience and Mental Health, Australia; On Behalf of the NOVELL Collaboration</p> | <p>P35 100-per-cent single-occupancy rooms: Impact on the microbiological safety of the hospital environment
Adriëne S. van der Schoor, Anne F. Voor in 't holt, Jüliëtte A. Severin, Margreet C. Vos, Erasmus MC University Medical Center, Netherlands</p> | <p>P36 West Suffolk Future System: An inclusive briefing and design process
Elly Williams, Ryder Architecture, UK; Helena Jopling, West Suffolk NHS Foundation Trust, UK; Jane McMahon, Adcuris Consulting, UK</p> | <p>P37 Barrier-free hospitals – more than just a couple of ramps
Birgit Dietz, Eva Henrich, Bavarian Institute of Architecture for the Elderly and Cognitively impaired, Germany</p> | <p>P38 Humanising cancer clinics: Co-producing an interdisciplinary tool to examine the link between cancer patients’ mental health and architecture
Lusi Morhayim, Yasmin Garcia-Sterling, Keri Wong, University College London, UK
Katriina Whitaker, University of Surrey, UK</p> |
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| <p>P39 In a tight spot: The challenge of delivering incremental improvement to optimise the clinical environment on a hospital site with little room to move
Alexis Carlyon, Jon Clarke, Royal Cornwall Hospitals NHS Trust, UK</p> <p>P40 Tying capital to improvement: Understanding the impact of investment, and disinvestment on system transformation
Malcolm Lowe-Lauri, Archus, UK</p> <p>P41 Ageing hospitals and facilities – to reuse or replace?
Paul Yeomans, Lianne Knotts, Medical Architecture, UK</p> <p>P42 Art from the start
Arabella Creed, Lucy Grimble, Jack Hirons, University of Dundee, UK; Lauren Shaw, NHS Tayside, UK</p> <p>P43 Maximising social impact on capital healthcare projects
Ruth French, Elliott Shaw, Ryder Architecture, UK</p> <p>P44 Accessing the right mental healthcare in the right environment
Rachelle McDade, Perminder Gill, Currie & Brown, UK</p> <p>P45 The importance of a clear brief: Balancing clinical requirements and fire strategy at a neuro-critical care unit
John Wiggett, Jim Haigh, AD Architects, UK</p> <p>P46 Designing for future generations: Working for now
Hannah Moscrop, Rhiannon Freshney, Velindre University NHS Trust, UK</p> | <p>P47 Turning healthcare on its head: System-level estates planning in Scotland
Nicola Clemo, Andrew Branch, Anna Daley, Archus, UK</p> <p>P48 Between embodied and operational carbon emission: What makes flooring sustainable?
Andy Gordon, Gerflor, UK; Eric Berteau, Gerflor, France</p> <p>P49 Investigating the impact of window blind positions on patient experience in a cardiac intensive care unit: A comparison between on-site observations and computer simulations
Roxana Jafarifiroozabadi, Alina Osnaga, Lawrence Technological University, USA</p> <p>P50 Towards new criteria for comfort in healthcare infrastructure
Peter-Willem Vermeersch, archipelago architects, Belgium</p> <p>P51 Healthcare resilience through design excellence: The Ottawa Hospital
Jason-Emery Groen, Mike Ryan, HDR, Canada
Joanne Read, Karen Stockton, The Ottawa Hospital, Canada</p> <p>P52 Online co-design applications: A new medium for collaboration in the design of healthcare environments
Sara Bayramzadeh, Hamid Estejab, Kent State University, USA</p> <p>P53 Engaging performance-based and evidence-based knowledge to design future-proof healing environments: Transformation from multidisciplinary to transdisciplinary
Peter-Willem Vermeersch, archipelago architects, Belgium</p> | <p>P54 A paradigm shift for elder and end-of-life care: How radical inclusivity leads to resiliency
Mahina Wright, HDR, Canada</p> <p>P55 Developing a statistical model to estimate the impact of room environment on patients' length of stay in a cardiac intensive care unit
Roxana Jafarifiroozabadi, Lawrence Technological University, USA; Andrea Franks, AnMed Health, USA</p> <p>P56 Bringing new life to maternity care in Belfast
Peter Wilson, Jason Pearson, AECOM, UK
Belfast Health and Social Care Trust (TBC), UK</p> <p>P57 How enhanced 3D digital tools can support the transformation of existing healthcare buildings
Charlotte Ruben, Linda Mattson, White Arkitekter, Sweden</p> <p>P58 New restaurant works at Altnagelvin Hospital, Londonderry, Northern Ireland
Gonzalo Vargas, Todd Architects, UK</p> <p>P59 NHS Scotland – net-zero route maps to 2040
Siobhan Gibbons, Hannah Dunn, Jacobs, UK
Rob Dixon, Energy Systems Catapult, UK</p> <p>P60 Climate change resilience framework for health systems and hospitals
Mai Shafei, Health Care Without Harm (Europe), Belgium; Stelios Karozis, National Center for Scientific Research Demokritos, Greece</p> <p>P61 Delivering more for less – validating performance to inform the next generation of healthcare buildings
Chris Taylor, Richard Mann, AECOM, UK
Paul McNally, Clatterbridge Cancer Centre, UK</p> |
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- P62** **Future healthcare: Thinking differently about how we deliver care**
 Rachelle McDade, Currie & Brown, UK
 Anthony Mistretta, Perkins&Will, USA
- P63** **Is the progressive procurement model the key to more resilient hospital projects?**
 Suzanne Crysedale, Michael Moxam, Stantec, Canada
 David Longley, Matthew Kenny, Trillium Health Partners, Canada
- P64** **Young Maggie Centre: An appropriate design model for caring for children and their families living with life-limiting conditions**
 Hedyeh Gamini, Richard Tucker, Mirjana Lasanovska, Deakin University, Australia
- P65** **Blackpool Victoria Hospital – emergency ambulance discharge/triage facility**
 Alan Kondys, Vincent Boodea, Integrated Health Projects, UK; Clare Boyd, Blackpool Teaching Hospitals NHS Foundation Trust UK
- P66** **The evolution of bone marrow transplants and the impact/design of the respective facilities**
 Linda Vela, CannonDesign, Canada
 Ian McDermott, University Health Network, Canada

- P67** **How indoor airflow and quality impacts hospital-associated infection: A narrative literature review**
 Nazli Jafari, Zeekara Baset Nadi, Farimah Raisali, Sara Bayramzadeh, Kent State University, USA
- P68** **A new state-of-the-art design to deliver dedicated orthopaedic care, improve efficiency in care, and patient and staff experience**
 Nick Peaker, NORR, UK
- P69** **Delivering system capacity at a new patient care tower during a pandemic urgently needed ICU beds put into circulation**
 Aaron Smith, Frank Panici, NORR Architects & Engineers, Canada; Tom Parker, St Michael's Hospital, Unity Health Toronto, Canada
- P70** **Anaesthesiologists' perceptions of noise in operating rooms: Survey results**
 Eve Edelstein, Clinicians for Design International, USA; Robert Brustowicz, Children's Hospital / Harvard Medical School, USA; Priti G Dalal, Penn State Health, USA; Imelda Tjia, Texas Children's Hospital / Baylor College of Medicine, USA; Margaret Allen, Akron Children's Hospital, USA; Benjamin French, Xiaoke Feng, Christy J Crockett, Vanderbilt University Medical Center, USA

ART AND DESIGN WORKSHOPS

Room: Platt Room and Garden

12 – 13 JUNE

10.15–17.00 **The Art Room: Using arts engagement to unlock design imaginations**

Organised by:

Art in Site

Come join the Art in Site team during the Congress and get creative in the Art Room. Art in Site leads a series of discussions and an interactive installation exploring big ideas for art in the hospital of the future.

The Art Room will showcase new global innovations in art for health, and explore answers to the most pressing questions for the future: how can art practice help to bring healthcare into the community? What does a hospital look like when play is at the core of its design? How can clinical practice and storytelling work together to inspire trust and empathy? What opportunities does the future of digital creativity open up for patient-led journeys?

No former experience or “art expertise” is required – just drop in any time and bring an open mind. And if the weather allows, the group will spill out into the garden, making the most of the Royal College’s beautiful outdoor surroundings.

Facilitators:



Peter Shenai,
Art in Site, UK



Louisa Williams,
Art in Site, UK



Martin Jones,
Art in Site, UK



Paola Rozo,
Art in Site, UK

Room: Council Chamber

13 JUNE

08.30–10.00 **De-institutionalising furniture for healthcare**

Organised by:

mjmedical

Furniture in clinical environments can be dated and drab, often favouring low-cost functionality at the expense of well-designed, attractive alternatives. Such an approach is evident throughout much of the NHS estate, perpetuating an institutional feeling in many of our healthcare buildings. There should also be an increased focus on sustainability – both in reducing the carbon footprint through the use of more natural materials, and in reducing environmental / social damage resulting from mass-production processes.

A study will be completed through a review and tour of furniture manufacturers in an effort to seek alternatives to the standard NHS furniture palette, with a view to creating evidence-based alternatives. These should provide good value for money, be safe, meet infection control requirements, have good whole-life costs, and be sustainable.

A set of criteria has been developed through a literature review based on some of the following aspects, which can influence furniture selection: costs and lead times across materials; supply limitations / concerns long-term; use of natural and recycled materials; infection control risks; whole-life costing; and end-of-life processes.

To gain a greater understanding of these aspects, we are collaborating with two leading medical furniture manufacturers – Knightsbridge Furniture and Teal. Both manufacturers will be presenting on the challenges they encounter when trying to develop modern, innovative and functional pieces within the limitations of budgetary restrictions and infection control regulations.

The objective is to offer furniture alternatives that are not only compliant and cost-effective but are also attractive and consistent with the architecture of the space, be it public or clinical.

Facilitators:



Rose Jago,
MJ Medical, UK



Andrew Bertram,
MJ Medical, UK



Matthew Hammond,
MJ Medical, UK



Wayne Tilbury-Larter,
Knightsbridge Furniture
UK



Oliver Mitchell,
Teal Healthcare, Teal
LifeCare & Teal Living, UK



Nigel Davies,
Teal Healthcare, Teal
LifeCare & Teal Living, UK



STUDY TOURS



Participants in the European Healthcare Design 2023 Congress will get the opportunity to join three unique study tours featuring some of the UK's latest benchmark healthcare projects and architectural landmarks. Places on each tour are limited, so please register early to avoid disappointment.

STUDY TOUR 1: LIVERPOOL (Maximum 25 participants)

At the time of completion in 2015, **Alder Hey Children's Hospital** (pictured top left) was the only hospital in a park in Europe, and set a new benchmark for the delivery of modern healthcare for children. Designed by BDP, the purpose-built, £237m development was one of the most ambitious medical construction projects ever undertaken in the UK.

Returning to the campus for the first time since the hospital became an EHD Award winner in 2016, the tour group will have the opportunity to visit a number of new buildings on the campus, including:

The Institute in the Park (pictured top right)

Designed by Hopkins Architects – a new research and education building, housing a mixture of spaces to support the needs of the NHS Trust and its university partners.

The Alder Centre (pictured bottom right)

Designed by Allford Hall Monaghan Morris – a building and gardens dedicated to providing healing for bereaved parents and anyone affected by the death of a child.

The Catkin Centre and Sunflower House (pictured bottom left)

Designed by Cullinan Studio – providing mental health services, including a new outpatients and residential tier 4 facility, designed around courtyard gardens against the backdrop of a new park, which will be shared between the hospital and the community.



STUDY TOUR 2: LONDON (Maximum 25 participants)

Children's Day Treatment Centre, Evelina London Children's Hospital (pictured left)

Due to complete in May, the Children's Day Treatment Centre is a five-storey building providing a day surgery facility for the Evelina London Children's Hospital. Designed by ADP, it includes an admissions area; two general admission theatres; first- and second-stage recovery areas; a discharge facility; and staff and clinical support accommodation. Owing to a constrained site, modern methods of construction were used for panellised baguette cladding with a steel-framed solution. To avoid crossover between pre-op and post-op, a 'one-way' flow loop was designed, so patients travel into theatre at one end and out the other end to recovery. Integral to a child's care journey, the artwork continues the hospital's natural world design concept of theming different floors to a different setting. 'Space' is the theme used, chosen in collaboration with children and young people.

Great Ormond Street Hospital

The Zayed Centre for Research into Rare Disease in Children (pictured right)

Opened in late 2019, this multi-award-winning building was designed by Stanton Williams Architects and brings together clinical activity, research and workspaces, to better integrate these activities and increase the impact and scope of medical discoveries. A collaboration between Great Ormond Street Hospital and University College London, the building puts research on show to the public, patients and families and, through translational research, aims to reduce the bench-to bedside-time of new medical breakthroughs.

The Great Ormond Street Sight and Sound Centre, supported by Premier Inn

This historic listed building originally provided healthcare for London's Italian population. After its closure in 1990, the building was purchased by Great Ormond Street and used for non patient-facing services. The building has now been fully refurbished, extended and remodelled to designs by Sonnemann Toon Architects, which transformed it into a modern healthcare facility. The brief was to provide welcoming, homely spaces that would be easy to navigate for children and young people with sight and hearing impairment.



STUDY TOUR 3: LONDON (Maximum 25 participants)

The Royal Marsden

Oak Cancer Centre (pictured left)

Designed by BDP, the new Oak Cancer Centre (OCC) for the Royal Marsden Hospital (RMH) is located within the existing RMH campus in Sutton, south London. The OCC site is located adjacent to the Institute of Cancer Research, the RMH's research partner, and sits within a planned wider 'London Cancer Hub' masterplan. This emerging 'Knowledge Cluster' aims to become a global centre for cancer innovation, augmenting it with complementary organisations to create a thriving community of scientists, clinicians and innovative companies. The building also incorporates a Rapid Diagnostic Centre and a floor dedicated to research.

Maggie's at The Royal Marsden (pictured middle)

Central to the vision of Maggie Keswick Jencks and her husband Charles for a new kind of cancer care was their belief in the potential of architecture to reassure people and make them feel valued. Nearly 25 years later, designing a Maggie's has given Ab Rogers Design the opportunity to extend its love of creating spaces that engage people on a human level, and make them alert to their surroundings through the firm's first complete building. Ab Rogers designed the centre's four staggered, red fanning volumes from the inside out.

The Pears Building, Institute of Immunity and Transplantation (pictured right)

The Pears Building accommodates the UCL Institute of Immunity and Transplantation, offices for the Royal Free Charity, and a 35-bed patient hotel. One of only five specialist immunology centres in the world, the Pears Building is a leading research organisation that enables UCL to deliver research excellence and the Royal Free Hospital to combine local patient care with world-class expertise. Opportunities for spontaneous interaction are built-in, with visual connectivity between departments. Lab and write-up spaces are arranged around a central atrium, which incorporates generous circulation, break-out spaces, and booths to support informal meeting, professional collaboration, and socialising.



By blending 'in person' participation with a fully immersive digital experience on SALUS TV, this year's Congress will build on last year's new and enhanced opportunities for knowledge exchange, professional development and networking.

The 9th European Healthcare Design 2023 Congress, Awards & Exhibition is returning to the prestigious Royal College of Physicians in London, UK.

The venue is expected to sell out quickly, as world-leading practitioners, researchers and policy thinkers from around the world will join the event 'in person' as delegates and as speakers to give talks, present posters, and participate in panels and workshops.

But with a live conference stream on SALUS TV feeding into our fully integrated virtual event platform, delegates will have the choice, just like last year, of whether to participate in person or virtually, providing new opportunities to access talks and expert content from anywhere in the world.

'In person' and 'virtual' delegates will enjoy exceptional networking and professional development opportunities, building knowledge of the socio-economic global context, and emerging practice, skills and core competencies in designing and planning health services, technology and infrastructure, project management, and the evidence base for healthcare design, sustainable development and quality improvement.

INTUITIVE USER INTERFACE

Easy to engage in sessions no matter where you are

Our intuitive hybrid event platform is designed to highlight key events and enable attendees to drill down to sessions of specific interest. Virtual and in-person attendees can engage in sessions using engagement tools such as live polls, chats and Q&A.

NATIVE MOBILE APP

A fully immersive experience

In-person and virtual attendees will be able to download a native, branded mobile application for them to browse session listings, connect and message other participants, both on-site and virtually, and view sponsors, partners, exhibitors and the programme agenda. The mobile application complements the day of in-person experience while enabling virtual attendees to engage on the move.

ON-DEMAND CONTENT

Choose when to view talks and sessions

All registered participants will also receive virtual access to both live streaming and video recordings of all sessions for on-demand viewing for three months after the event. So, as an in-person delegate, choosing one parallel session or stream no longer means you have to miss viewing the talks in the other streams.

CONNECT WITH MORE PEOPLE

Foster connections both online and offline

Connect and foster engagement with fellow attendees, virtually and in-person, throughout the event. Attendees have multiple options to connect and message other attendees in-person, or connect with each other virtually via 1-1 chats, video calls, rooms and lounges. All attendees can also enjoy our leaderboard, which ranks who is most active virtually during the Congress.



DELEGATE REGISTRATION

A range of in-person and virtual-only tickets are available in three categories: Public Sector; Event Partner; and Commercial. Registration is open now with Early Bird savings until 16 May. Visit www.europeanhealthcaredesign.eu to register today.

Public Sector and Event Partner discounts

Eligible event partner members include: Architects for Health, Australian Health Design Council, New Zealand Health Design Council, Health Planning Academy, European Health Property Network, and Healthcare Design Leadership.

Please select the correct ticket type at www.europeanhealthcaredesign.eu

Virtual group discounts

Virtual (2-day tickets only): Discounts for 3 (10%); 5 (20%) or 10 or more (30%) on application at info@europeanhealthcaredesign.eu

Please note: A discount code may only be used once by the same user. All ticket prices are exclusive of VAT.

'In-person' registration

Commercial Rate:

Early Bird rates (until 16 May): 2-day ticket: £625
1-day ticket: £425

Standard rates (from 17 May): 2-day ticket: £725
1-day ticket: £525

Public Sector Rate:

Early Bird rates (until 16 May): 2-day ticket: £495
1-day ticket: £325

Standard rates (from 17 May): 2-day ticket: £595
1-day ticket: £425

Event Partner Rate:

Early Bird rates (until 16 May): 2-day ticket: £575
1-day ticket: £410

Standard rates (from 17 May): 2-day ticket: £675
1-day ticket: £510

'Virtual' registration

Single Rate:

Early Bird rates (until 16 May): 2-day ticket: £185
1-day ticket: £95

Standard rates (from 17 May): 2-day ticket: £235
1-day ticket: £135

Garden Party: £130

Study Tour Rates:

Study Tour 1: £195

Study Tours 2: £150

Study Tours 3: £150

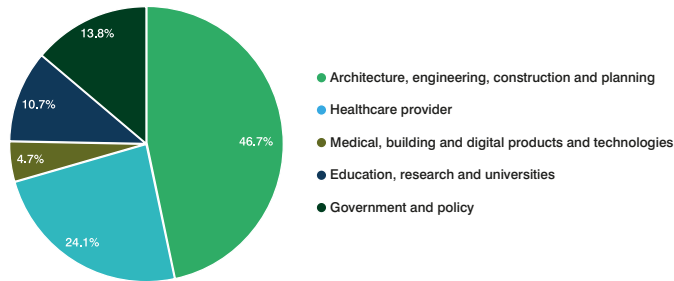


SPONSORSHIP AND EXHIBITION

By sponsoring or exhibiting at EHD2023, your organisation will be supporting in the creation and exchange of knowledge between 1000 of the world's leading health researchers, practitioners and policymakers.

A knowledge-led approach to sponsorship creates opportunities to build your thought leadership programme and align your brand with a range of content-focused offerings through both the 'in person' and live/on-demand event broadcast, including: themed sessions and posters; workshops; study tours; and networking events, such as the Welcome Reception, the Garden Party, and lunchtime networking sessions.

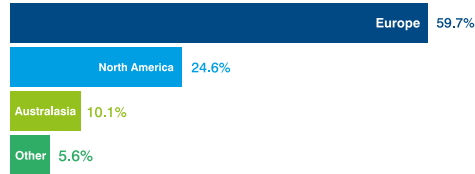
These can be combined with other exciting branding opportunities to raise the visibility of your organisation, such as an exhibition stand (limited availability), conference bag and lanyard sponsorship, or advertising online or in the printed Final Programme.



Integrating your physical exhibition stand with your virtual stand in our virtual event platform enables you to reach delegates in-person and online, to promote and provide education on your latest technologies, products and projects before, during and up to three months after the event closes. In a truly immersive experience, on your virtual stand, you'll have the opportunity to feature:

- videos, literature and product content;
- live chat and the ability to connect and message both in-person and virtual delegates;
- live video calls and product demos with virtual delegates;
- digital branding; and
- contact information and social media links.

Each sponsorship and exhibition opportunity also includes in-person and virtual delegate passes to support your own team's professional



and business development, while you can also offer them to your healthcare clients and partners.

The publication and dissemination of videos of all the talks, full written research papers, and posters on SALUS Global Knowledge Exchange (www.salus.global) and SALUS TV also ensure that your sponsorship support gains from association with the Congress partners, content and outputs across multiple social media channels all year round.

A range of sponsorship and exhibition packages is still available from £2500-£15,000 with discounts on purchases of two packages or more.

Awards sponsorship

By sponsoring the EHD2023 Awards, you can show your support and recognition of the outstanding performances of the award winners, aligning your brand in UK, European and international markets around the values of design excellence and innovation.

Your brand will also gain international exposure through the digital marketing around the Congress and the Awards. This includes promotion of the shortlist announcement before the event; e-news announcements of the award winners; broadcasting during the event of the videos of the shortlisted projects' presentations and the closing awards ceremony; as well as making these available to watch post event via SALUS TV. Live judging of the shortlisted presentations is planned for mid May.

We look forward to confirming your support and partnering with you in the raising of design quality standards around the globe.

To view available packages, contact:
Marc Sansom at marc@salus.global or visit:
www.europeanhealthcaredesign.eu



What our attendees say...

"Strengths were the real world examples presented in framing a concept or theme that could then be debated. I enjoyed the opportunity to see the breadth of practice and thinking"
Christopher Chiswell, Birmingham Women's and Children's NHS FT, UK

"The networking and learning about what was happening in health in different countries was excellent"
Clinton Greene, Turner and Townsend, UK

"Attending virtually meant I was able to attend all sessions either live or at a later time, and therefore had a full experience of the presentations"
Samantha Robinson, Oxford Health NHS FT, UK

VENUE & HOTEL ACCOMMODATION

THE VENUE: A MODERNIST MASTERPIECE

Founded in 1518, the Royal College of Physician's current headquarters is a Grade 1 listed building in Regent's Park, designed by architect Sir Denys Lasdun and opened in 1964. Considered a modernist masterpiece, it's one of London's most important post-war buildings. In 1992, Sir Lasdun was awarded the Royal Institute of British Architects' Trustee Medal in recognition of his work at the RCP, considered to be "the best architecture of its time anywhere in the world".

Sir Lasdun won the competition to design the new headquarters in 1959. He was surprised at being asked to design for such a traditional body, given his modernist philosophy, and he made it clear that he would not create a classical-style building. Ultimately, he responded to the challenge with a skilful integration of centuries-old traditions and his own modernist vision. As an award-winning and highly versatile venue for conferences, meetings, banquets, training and outdoor events, the building has an atmosphere of space and light, with contemporary architecture and a selection of both old and new styles.

DISCOUNTED ROOM RATES FOR DELEGATES

We have agreements with two hotels for discounted room rates for delegates at the Congress. Rooms are limited and available to book until a provisional date of 13 May.

The two hotels are the Holiday Inn Regents Park and the Melia White House Hotel. Both hotels are within walking distance of the conference venue.

On receipt of your registration, a website link will be provided to enable you to book your accommodation at the below rates. Please book early to avoid disappointment.

All room rates are VAT inclusive.

Holiday Inn Regents Park

Single room with breakfast £255 (without breakfast £245)
Double room with breakfast £265 (without breakfast £255)

Melia White House Hotel

Deluxe single room with breakfast £277 (without breakfast £259)
Deluxe double room with breakfast £295 (without breakfast £277)

We can also provide a list of alternative accommodation, please contact info@europeanhealthcaredesign.eu



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