



European Health Property Network

2019 WORKSHOP

Basel, Switzerland, 18-20 September

Getting It Right First Time, For Patients



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Programme at a glance, essential information

Wednesday, 18.09.19

AM EuHPN member meeting at Launchlabs venue (10.00 – 11.30)

Registrations and lunch (from 12.00)

PM Welcome and introductions (13.00 start)
Keynote address
Case studies and discussion

Thursday, 19.09.19

08.45 start

AM Keynote address

Group 1: to prototyping zone (09.30)

Group 2: case study presentations (09.30)

Lunch (group 2 12.30-14.00; group 1 13.00-14.30)

PM Group 2: to prototyping zone (14.00)
Group 1: case study presentations (14.30)

Workshop gala dinner at Werk8 (next door to the Launchlabs venue)

Friday, 20.09.19

08.30 start

AM Prototyping feedback and panel discussion
Keynote addresses

Lunch (12.00-12.45)

PM Study tours (12.45 – 14.15)

Venue: Launchlabs GmbH, at Dornacherstrasse 192, 4053 Basel. Google maps reference:
<https://goo.gl/maps/3Uh11TNdi4JtrXJe9>

Hotel: Most participants are staying at the Ibis Styles Basel City hotel, Grosspeterstrasse 44
4052 Basel. Tel: +41 61/5440444. Email: h9665@accor.com.

Contact number: Jonathan Erskine, +44 7910 188 703

Emergencies: Police 117; Ambulance and Emergency Services 144

Basel, Switzerland, 18-20 September

Getting It Right First Time, For Patients

We all know that healthcare facilities are complex and expensive to plan, design, build and maintain. Infrastructure projects need input from a huge range of people – managers, designers, engineers, clinicians, technicians, estates professionals and patients – if they are going to be a success, and no one wants to finish a project only to find that it doesn't meet the needs of staff or patients, or both. So how do we 'get it right first time, for patients'? How do we ensure that new build or rebuilt or reconfigured facilities meet the original brief in terms of utility, design and sustainable affordability? How can we do our very best to make our healthcare built environment the best place possible for patients?

Organisational development and management studies suggest that three factors can help to ensure that facilities will properly support care models and meet patient need. First, having the right **leadership**. Not just the CEO or the president of the board, but leadership throughout an organisation when capital investments are being planned and implemented. Second, being willing to **learn** from the past and from contemporary exemplars in the health and care (and other) sectors. Third, **integrated project delivery**: using tools and methods to bring together the right stakeholders, with the right expertise, at the right time.

The 2019 EuHPN workshop will be exploring these factors through keynote presentations, case studies and evaluations of health building projects around Europe and some hands-on, interactive co-design challenges. We hope you'll find the three days of debate and co-design prototyping both informative and enjoyable.

As in recent years, the EuHPN 2019 workshop is an opportunity to engage with an eclectic mix of individuals and organizations, representative of every aspect of health infrastructure development. Participants typically represent a wide variety of professional backgrounds: health policy makers, healthcare architects and engineers, health system planners, clinical/medical professionals, capital investment experts, health infrastructure academic researchers, and many others. The annual EuHPN workshop is structured to give our member organisations an opportunity to share examples of best practice and to learn from each other's experiences. But the workshop is also an important opportunity for participants to hear from outside our immediate network and from a range of professionals who bring different perspectives.

Our supporters

This year we are experimenting with a highly interactive format where participants will co-create an infrastructure design or a patient experience together with healthcare professionals. This is thanks to the support of [walkerproject](#), one of Europe's leading consultancies for innovation in healthcare. Walkerproject works closely with healthcare professionals to improve patient experience, quality of care and team collaboration.

Our sponsors

In 2019 we are delighted to welcome Ramboll as our main corporate sponsor. Ramboll is a leading engineering, design and consultancy company founded in Denmark in 1945. The company employs 15,000 people globally, with more than 400 employees dedicated to pioneering the design of healthcare facilities.

Workshop Programme

18th September

10.00 – 11.30	EuHPN member meeting EuHPN members are invited to a pre-workshop meeting to review network activity over the year and to look ahead at plans for 2020.	Ground floor room at Launchlabs (Dornacherstrasse 192, 4053 Basel).
12.00 – 13.00	Arrival, registration and buffet lunch Workshop participants are invited to meet speakers and other attendees for lunch at the Launchlabs venue.	
13.00 – 13.30	Welcome and context setting Marte Lauvsnes, EuHPN Chair, Norway Micha Kämpfer, walkerproject, Switzerland/Sweden Michael Gustavsson, Ramboll, Sweden	Welcome and introductions. Getting It Right First Time: The Challenges. Getting It Right First Time: The Challenges.
13.30 – 14.15	Dr Werner Widmer, CEO, Stiftung Diakoniewerk Neumünster in Zollikerberg/Zürich	<i>Keynote address:</i> The Swiss context for hospitals and healthcare.
14.15 – 15.15	Dr Antonio Duran, CEO, Alldmh Consulting, Spain and Mr Stephen Wright, Independent Consultant	<i>Keynote address:</i> Does size matter? What's the future for hospitals in health systems?
15.15 – 15.45	Coffee break	
15.45 – 17.45	Organising infrastructure differently Prof. Christine Nickl-Weller, Nickl and Partner, Germany Dr Nirit Pilosof, Architect and Post-Doctoral Researcher, Faculty of Architecture and Town Planning Technion, Israel Institute of Technology Unni Dahl and Lilian Leistad, Sykebusbygg, Norway Hrafnhildur Olafsdottir, JCA Architects, UK	Hospital 4.0: Quo Vadis? Planning for Change: Evaluation of Hospital Design Strategies Evaluating infrastructure: a perspective from Norway. The same needs, different solutions: getting it right for patients in Switzerland, Palestine and the UK.
17.45	Closing remarks Jonathan Erskine, Executive Director, EuHPN	

19th September

08.45 – 09.30	Keynote session: groups 1 and 2 together	
	Professor Reinhard Busse, Berlin Technical University, Germany	Assuring and improving healthcare quality in Europe.
09.30 – 13.00	Group 1 joins the Prototyping Zone: co-design challenges	
09.30 – 12.30	Group 2: Changing our Thinking, Launchlabs venue	
09.30 – 10.15	Alice Green, P+HS Architects, UK	Using the stakeholder community to co-design healthcare buildings.
10.15 – 11.00	Astrid Hansson, Kirsti Marttila-Gaard, Kristina Olsson, Region Skåne, Sweden	Patient collaboration in Region Skåne. Patients in the planning processes, crucial for the future.
11.00 – 11.30	Coffee break	
11.30 – 12.00	Anders Medin, White Arkitekter, Uppsala office, Sweden	Improving project delivery through systematic post-occupancy evaluation: Swedish examples.
12.00 – 12.30	Liesbeth van Heel, Senior Policy Advisor, Erasmus MC, Netherlands	20 years of transformative change in hospital development.
12.30 – 14.00	Group 2 lunch	
13.00 – 14.30	Group 1 lunch	
14.00 – 17.30	Group 2 joins the Prototyping Zone: co-design challenges	
14.30 – 17.30	Group 1: Changing our Thinking, Launchlabs venue	
14.30 – 15.10	Brendan Smyth and Katherine Hanratty, Health Projects Division, Department of Finance, Northern Ireland	Learning lessons from health facilities in Northern Ireland.
15.10 – 15.40	Laia Isern Meix, Vitaller Arquitectura, Spain	How can we perfect nursing home design?
15.40 – 16.00	Dr Maria de Fátima Castro, University of the Minho, Portugal	Health Building Sustainability (HBSA) Tool app launch.
16.00 – 16.30	Coffee break	
16.30 – 17.00	Professor Laura Arpiainen, Aalto University, Finland	The Foundry: making a success of integrated, population-based care for youth.
17.00 – 17.30	Pentti Itkonen, CEO, South Karelia Social and Healthcare District, Finland	Shifting care resources using predictive analytics and AI: the case of Finland.
19.30 – 22.00	Workshop gala dinner: Join us for drinks and dinner, discussion and networking.	Werk 8 venue next to Launchlabs.

20th September

08.30 – 10.00	Prototyping feedback – what did we learn?	
	Led by Micha Kämpfer, walkerproject, Switzerland	Group reflections and panel discussion on learning from the prototyping challenges.
10.00 – 10.30	Coffee break	
10.30 – 11.00	Keynote speaker: Miklós Szócska, Director, Health Services Management Training Centre, Semmelweis University, Hungary. Minister of State for Health, Hungary, 2010-2014.	Rebuilding and reconfiguring health facilities for future care – lessons from Hungary and beyond.
11.00 – 12.00	Keynote speakers: Dr Marisa Mason and Dr Vivek Srivastava, National Confidential Enquiry into Patient Outcome and Death (NCEPOD), UK	<i>Methods, doubts and data.</i> How do we really know what patients and staff want from care models and infrastructure?
12.00 – 12.45	Grab 'n' go farewell lunch	
12.45 – 14.15	Study site tours:	
	<ul style="list-style-type: none">• University Department of Geriatric Medicine Felix Platter• University Children's Hospital Basel• Roche Tower	
14.30 / 15.00	Study tour drop off at Basel central train station	

Please note that speakers and titles may be subject to change.

Speakers

We have a fantastic group of speakers at the 2019 EuHPN workshop. They represent 15 different countries and health systems, and bring a wealth of expertise in health facility planning and design, infrastructure evaluation, capital investment and governance of health systems. We are delighted to welcome colleagues from Switzerland to help us understand the local context of healthcare infrastructure, as well as practitioners and academic colleagues from north, south, east and west Europe to provide their unique perspective on *getting it right first time, for patients*.

This year's workshop has been designed to be more interactive than ever, so in addition to our speakers we welcome a range of facilitators and panel members from our local partners **walkerproject**, our major sponsor **Ramboll**, and from **ZHAW** (Zurich University of Applied Sciences, Life Sciences & Facility Management) and, of course, from our EuHPN member organisations.

Many thanks to everyone who has contributed to making the 2019 EuHPN workshop such a lively and educational experience, and particularly to those who have provided their pen portraits below.



Marte Lauvsnes

Manager for Planning and Advisory Department, Sykehusbygg, Norway
Chair of the European Health Property Network

Since 2015 Marte has been manager for the department for planning and advisory department in Sykehusbygg, the Norwegian Hospital Construction Agency. She is now chair of the European Health Property Network.

Previously, Marte was a hospital planner and research manager for the hospital planning group at SINTEF Health Research, part of the SINTEF Group – the largest independent research institution in Scandinavia.

Trained as an intensive-care nurse, Marte has continued her education in management, economics, pedagogic and research methods. After 18 years working as a nurse, and as head nurse in a Rheumatology unit (implementing the Planetree model in Europe's first Planetree unit), she became a hospital planner at RIT 2000, working on St Olav's Hospital – a new university hospital in Trondheim. After five years, she moved on to be a hospital planner at Medivi and, later, at SINTEF.

During her 22 years in hospital planning, Marte has largely worked on projects for the hospital regions and health directorate, in both strategic and detailed planning. This work has mostly involved activity analysis and forecasting, programming, area planning, and evaluation of physical solutions in the context of patient experiences, safety, staffing, flexibility and medical innovation. She has also been working on the development of methodology and tools for hospital planning. In addition to Norwegian projects, Marte also worked on planning projects abroad and has a broad network of hospital planners internationally.



Micha Kämpfer

Partner, walkerproject ag, Scandinavia

Micha Kämpfer is Partner, leading the Scandinavian branch of walkerproject ag, the leading hospital consulting group in Switzerland. He is an accomplished project manager for strategy development and execution in healthcare. Micha facilitates patient-centric innovation and acts as expert for continuous improvement in emergency, inpatient and primary care. His focus

is on deploying strategies, best practice and evidence into daily practice. Micha has a track-record in applying lean and design thinking methodology in healthcare. He provides international experience and a network for patient-centricity in Europe (Switzerland, Scandinavia, Netherlands) and USA. Micha also hosts lectures about « Lean Hospital » for the Swiss Hospital Association H+ Bildung.

Michael Gustavsson

Ramboll

Global Spearhead Director, Hospitals

Michael has more than 25 years of design, engineering, project management and construction expertise with hospitals and pharmaceutical research facilities. Currently, he is leading Ramboll's spearhead organisation for hospitals with almost 170 experts in eight European countries.





Dr Werner Widmer

CEO, Stiftung Diakoniewerk Neumünster in Zollikerberg/Zürich

Werner Widmer (1953) is an economist (Dr. rer.pol., University of Basel) and is working as CEO of Stiftung Diakoniewerk Neumünster in Zollikerberg/Zürich, Switzerland, since 2002. This foundation runs a hospital and two senior centers. He was president of the governing board of the public hospital in Baselland from 2014-2019 and has been a lecturer at the University of St. Gallen since 2011. He has some publications about the Swiss health care system and is a regular speaker on topics such as Hospital Strategy, Hospital Management, Health Care System Improvement.



Dr. Antonio Duran
ALLDMHEALTH director

Dr Antonio Duran is a senior consultant in health policies and systems for WHO, World Bank, EU and DfID, and Technical Adviser for the European Observatory on Health Systems and Policies. Frequent lecturer and speaker at relevant fora. He recently published peer-reviewed articles and edited a book on governing Public Hospitals.

Mr Stephen Wright
Independent Consultant

After posts in management consultancy and industry, Stephen Wright joined the European Investment Bank to work on various economic areas – energy, industry, transport, waste management, economic development - before establishing and running the Bank’s policy and project appraisal in the health and education sector. He ended his career in the Bank as a Director. Now he is a freelance consultant in health policies, macroeconomics, social investment, and health finance and investment, for EU Member States, European Commission, EIB, World Bank and WHO. Mr Wright has co-edited a number of books. He publishes and presents frequently on these topics.



Summary:

Antonio Duran and Stephen Wright will be talking on themes contained in their most recent co-edited book, which seeks to reframe current policy discussions on hospitals. Healthcare services turn expensive economic resources - people, capital, energy, materials - into care. Hospitals concentrate the use and cost of this. But paradoxically other areas of health, such as public health and primary care, attract more attention and affection, at least within the health policy community. Hospitals choose, or are assigned, to deliver certain parts of care packages. They are organised to do this via business models. These necessarily incorporate care models – the processes that patients follow. The activity needs to be governed, in the widest senses. Rational decisions need to be taken about care and resources used. This book pulls these elements together, to stimulate a debate.



Professor Christine Nickl-Weller

Nickl and Partner, Germany

After graduating with a degree in architecture from the Technical University of Munich, Christine Nickl-Weller joined the Munich-based architecture team of Nickl & Partner in 1989 and became Chief Executive Officer of the corporation in 2008. Prof. Christine Nickl-Weller is dedicated to the design and execution of healthcare, research and education buildings, development plans and masterplans.

In 2004, she was appointed Professor at the Technical University of Berlin and holds the only university chair for the design of hospitals and health care buildings in Germany. The chair covers a broad field of research topics related to healthcare architecture and urbanism including healing architecture, energy-efficiency in healthcare buildings, healthy urban planning and housing for the elderly.

Christine Nickl-Weller initiated the biannual Health Care of the Future symposia taking place in Berlin since 2006 and the Healing Architecture conferences (Berlin, 2011; St. Petersburg 2013; Dubai, 2015) supported by the Federal Ministry of Health. She is author and editor of numerous articles and books, most recently Healing Architecture (2013, with Hans Nickl), Hospital Architecture (2013, editor with Hans Nickl) and Health Care of the Future Vol. 1-6. She gives lectures in Germany and abroad and is founder of the European Network Architecture for Health.

Summary:

Hospital 4.0: Quo Vadis?

Is the general hospital, as we know it, a thing of the past?

Changing remuneration systems and regulatory frameworks, governmental budgetary restraints and aging societies, constant evolution the medical science and digitalization along with big data are transforming the health care landscape. Given these revolutions, hospital design is undergoing a fundamental change. Like the shopping mall or general store, the presently, mostly complex and all-round versatile „general hospital machine“ is likely to experience slow, but inevitable extinction. Inefficient and difficult to operate, challenging capacity utilization and building structures unable to react to changing technological and utilization demands are just some of the shortcomings.

But what does the hospital of the future entail? In her lecture, Prof. Christine Nickl-Weller will explore new forms of space production of future hospital buildings by outlining some of the questions of principle within the healthcare sector in the next decades. Which functions form the core of a general hospital in order to comply with its public service obligations and which elements might be outsourced, for example as affiliated institutions. What type of health care facilities are required in the age of affluent diseases and same day surgery's allowing patients a close to normal life style and a high degree of convenience? How can built structures react to constant technological developments and advancements and how does the the need for modularity interact with the growing demand for individuality?

At a time when many operational hospitals have reached the end of their lifecycle, it is essential to put these issues up for discussion across disciplines. The future of our general hospitals affects us all.



Dr Nirit Pilosof

Faculty of Architecture and Town Planning, Technion - Israel Institute of Technology

Dr Nirit Pilosof is a healthcare architect with a Ph.D. from the Technion - Israel Institute of Technology. She is a Post-Doctoral researcher at the Technion Faculty of Architecture and Town Planning and serves as the Israeli representative at the International Union of Architects (UIA) Public Health Group. She holds a Post-Professional M.Arch from McGill University, B.Arch from the University of Wales, and an EDAC from the Center for Health Design. Nirit practiced architecture as a design project manager at leading architecture firms in Israel and Canada, specializing in healthcare design, as well as teaching academic architecture programs. She has gained international awards including the prestige's AIA Academy of Architects for Health award, the American Hospital Association (AHA) graduate fellowship, the McGill University major fellowship, and the Azrieli Foundation fellowship.

Summary:

Sustainable hospital architecture requires a design strategy for future change. A whole life-cycle approach to the hospital operation must consider the constant and rapid change of healthcare environments resulting from transformations in medicine, technology, and sociology. Since the 1960s, architects have developed theories and methods to design hospitals for maximum flexibility and expansion. Yet, many hospitals, which were designed to be ‘infinitely’ flexible and dynamic, did not fulfill their original vision, and have become obsolete and face demolition after only thirty years. Given the high cost and complexity of healthcare, hospital directors and designers can no longer afford to let prediction of hospital performance drive investment and design decisions. They are demanding proof that the design strategy chosen will support hospital performance over time. This research proposes to develop a method to help evaluate hospital design strategies for change, by testing ‘what-if’ scenarios and simulating not only whether the building can be physically changed, but how the change would affect the future operation of the hospital. Case studies of different medical units demonstrated a systematic approach to predict and evaluate the complex and dynamic use of the hospital in a pre-occupancy phase. The evaluation system, linked to Evidence-based Design (EBD) framework, provided valuable insights about the future impact of the physical environment on the organization outcomes. The transparent, data-driven process, which visualizes the physical, social and behavioral dynamics of the hospital after it has been changed, promotes collaboration between inter-disciplinary members of the project team to optimize the design strategy. In addition, multi-criteria evaluation, reflecting different stakeholders design goals, enhances knowledgeable decision making during the design process and throughout the lifecycle of the hospital.

Acknowledgment: This research was generously supported by a European Research Council grant (FP7 ADV 340753) and the Azrieli Foundation Fellowship.



Hrafnhildur Ólafsdóttir

JCA Architects, UK

Hrafnhildur Ólafsdóttir has over 20 years' experience of the design and planning of health-related projects. She is driven by the desire to improve the built environment of patients and clinicians with high quality architecture that builds on clear, strong organisational principles, focusing not only on clinical processes but equally on the wellness of its users. She also has a keen interest in the contextual and urban issues that shape the design of hospitals and clinics as buildings of civic importance and positive

catalysts for healthy urban living.

Originally from Iceland, Hrafnhildur studied architecture in the US and Denmark. She set up JCA in 2009 with John Cooper. The practice has worked in the UK, Ireland, USA, Scandinavia, South Africa and is currently working in Switzerland, Uganda and Palestine. This provides Hrafnhildur with an international perspective and a wide-ranging understanding of best practice and project contexts.

She combines design skills with detailed knowledge of medical planning and works with clients both at strategic and detailed level on projects ranging from complex tertiary hospitals for oncology, paediatrics or neurology to innovative community facilities and redevelopment strategies.

Professor Reinhard Busse

Department of Health Care Management, Berlin University of Technology

Professor Reinhard Busse is the head of the Department of Health Care Management in the Faculty of Economics and Management at the Berlin University of Technology. He is also a faculty member of The Charité, Berlin's university hospital, is Associate Head of Research Policy and head of the Berlin hub of the European Health Observatory on Health Systems and Policies, is a member of several scientific advisory boards, as well as a regular consultant for the WHO, the EU Commission, the World Bank, OECD and other international organizations within Europe and beyond, in addition to national health and research institutions.



His research focuses on the methods and contents of comparative health system analysis (with a particular emphasis on reforms in Germany, the social health insurance of other countries including those in Central and Eastern Europe, the role of the EU, financing and payment mechanisms, and disease management), health services research and health economics including cost-effectiveness analyses, and health technology assessment (HTA).

His department has been designated as a WHO Collaborating Centre for Health Systems Research and Management. He is the director of the annual Observatory's summer school in Venice and was the coordinator of the EU-funded project "EuroDRG: Diagnosis-Related Groups in Europe: towards Efficiency and Quality" (2009-2011). He has been Editor-in-Chief of the international peer reviewed journal Health Policy since 2011. Professor Busse studied medicine in Marburg (Germany), Boston (USA), and London (UK), as well as public health in Hannover (Germany).



Alice Green

Healthcare Lead and Senior Architect at P+HS Architects

Alice is passionate about improving healthcare environments through high quality design. Alice is both a qualified Architect as well as an Interior Designer working at P+HS Architects, based in Yorkshire in the North of England.

Alice is leading multiple healthcare schemes nationally and has worked extensively in healthcare for over a decade delivering a variety of community primary care centres, outpatient services and acute inpatient ward environments.

As a Healthcare Lead within P+HS Alice has a holistic approach to design from both an Architectural and Interiors perspective, including Artwork and wayfinding by focusing on improving the service user experience through proactive engagement with stakeholders.

Summary:

An overview of the importance of engaging with the stakeholder community and how this assists in positive outcomes for service users and staff. Alice will discuss the primary principals P+HS focus on when engaging with stakeholders within the context of a variety of Healthcare Environments

Astrid Hansson

Hospital planner at Regionfastigheter, Region Skåne, Sweden

Astrid has a genuine interest in planning the very best hospitals for both staff and patients. Having worked as a assistant nurse in both Sweden and in Norway's extreme north she moved on to study light design and urban planning. This made her the perfect choice for leading planning projects at Malmö's new hospital.

She was hired as a hospital planner by Region Skåne in 2015 and has worked with the planning processes for the new care wards and intensive care unit ever since. Through setting high standards for herself, but even more importantly, listening carefully to the needs and wishes of the staff and patients, she has with her planning team created large parts of what could be the best planned hospital in, at least, Scandinavia.

When not working or spending time with her family you will find Astrid painting, windsurfing or travelling.





Kirsti Marttila Gaard

Care operations manager at New Skåne University Hospital.

Kirsti Marttila Gaard has worked in healthcare for 34 years, served in Sweden and Denmark, trained as a nurse since -91.

She worked as a unit manager for 9 years in an emergency orthopedic ward. Working since April -18 full time for the program office New Skåne University Hospital.

Kristina Olsson

Patient representant at Region Skåne, Sweden

Kristina Olsson is the patientrepresentant in the ICU and inpatients process at the new Malmö Hospital Project. Member of the Board of the Personal Injury Association RTP. Solid experience as a patient. Has previously worked 25 years in healthcare.



Summary:

Billions are invested in major hospital projects in Sweden, Scandinavia and globally. It is of utmost importance that we build right, at once (GETTING IT RIGHT FOR THE PATIENTS FIRST TIME...). FOR and WITH the patients and those who will work there. How can we create person-centered and health-promoting medical facilities and good work environments in the right way, if we don't include patient- and health care staff representatives in the process?

We would like to present an example of the method and planning process that we from Region Skåne (Sweden) work with, when we plan and build for new care buildings. "Verksamhetsprocessen" is a form of design dialogue, supported by evidence based design, with the health care staff and the patient representatives. We view both of these groups as key people and indispensable for the process. From guiding standards to completed projects both staff and patients should be represented.



Anders Medin

White Arkitekter, Uppsala office, Sweden

Anders Medin is an architect and partner of White Arkitekter in Uppsala, Sweden. Anders graduated from Chalmers Technical University in 1990. The main part of his 30 year career has been spent in Gothenburg with White Arkitekter and since 2015 with the Uppsala office of the same company.

As an architect Anders has been involved in many types of projects, but his primary focus has been public buildings – commercial projects, schools, nursery schools, retirement homes – gradually concentrating on healthcare and hospital projects.

Over the years Anders has been involved in almost all kinds of healthcare projects: from small adaptations and alterations of existing wards to large scale planning of hospital areas. Working in close contact with hospital managers and staff members has led to a deep understanding of the challenges and conditions in both hospital master planning as well as the everyday life for medical staff. This has been possible thanks to participation in projects from programming in early stages to finalizing ‘to build’ drawings and documents.

Many of the projects Anders has been engaged in have been made for The Jönköping County in southern Sweden: County Hospital Ryhov in Jönköping as well as the hospitals in Eksjö and Värnamo. In recent years projects in central Sweden have been in focus for Anders. Eye Centre of Excellence in Stockholm and Psychiatry Centre in Mora, Dalarna are two worth mentioning.

White Arkitekter is one of the major architecture firms in Sweden with close to 1000 employees. Healthcare projects have always been an important issue for us. White has a vibrant internal network specializing on healthcare architecture and is also internally funding an R&D organization, which gives employees possibilities to carry out practice-based research.

Summary:

Visual contact between patient rooms and corridor

An evaluation of the design in four Swedish in-patient wards

Anna Arias Ortega (1), Magnus Carlstrand (2), Saga Karlsson (1), Anders Medin (3)

(1) White Arkitekter, Gothenburg, Sweden; (2) Arkitema, Gothenburg, Sweden, (3) White Arkitekter, Uppsala, Sweden

Framework

Previous research indicates that visual contact between patients and staff can contribute to better healthcare and safety. For instance, visual contact gives patients a feeling of control, enabling them to combat isolation and preventing falls from patient beds. However, clear visual contact between ward rooms and corridors can place limitations on privacy.

Description of the Practical Application

In the renovation of a Swedish hospital, four in-patient wards were designed reflecting current research concerning visual contact. To enhance visual contact, the doors to the patient rooms were fitted with a glazed panel. To allow patients their privacy, adjustable blinds were fitted. In 2017, after two years of usage, a post occupancy evaluation was carried out by White Arkitekter, through White Research Lab¹. The aim was to study the outcome of the design concerning visual contact. The two questions asked were: How was the design received by patients and staff? How much visual contact between

their room and the ward corridor did patients choose? Data was collected from observations and semi-structured group interviews with patients, their relatives and the staff. Observations were conducted six times over two days to determine the position of the doors (open/ closed) and the position of the blinds. In total, 64 rooms were studied.

Outcomes

During interviews, both patients and staff expressed their satisfaction with the design of the glazed door with adjustable blinds. Staff on nightshift highlighted that the visual contact facilitated their work as most patients left the blinds partially open, whilst patients appreciated the possibility of contact with their surroundings. During all observations, at least 80% of the rooms had some form of visual contact with the corridor. During daytime 94% of rooms had visual contact with the corridor, with 67% of patients choosing to leave their door open.

Implications

The study shows it is possible to consider both visual contact and privacy in the design of in-patient wards. In this case it also suggests that the patients like to be seen if they have the possibility to control the degree of privacy. Future studies might focus on how the size of the glazing may affect patient comfort and personal privacy.

1 White Research Lab is White Arkitekter's R&D organization, which gives employees possibilities to carry out practice-based research through internal funding. The present research program focuses on equitable architecture, resource efficiency and informed design.



Liesbeth van Heel

Senior Policy Advisor, Erasmus MC, Netherlands

Liesbeth van Heel MSc (1964) trained in Facility Management and Business Economics, before entering Erasmus University Medical Center in Rotterdam, the Netherlands as a management trainee. In 1998 she became part of the team developing the new Erasmus MC hospital building. With experience as an university hospital real estate professional, she was well equipped to translate the organization's vision into ambitions and requirements for 'tomorrow's building',

Liesbeth's focus has shifted in 2014 towards the coordinating effort to align the various strategic programs within Erasmus MC toward a safe transition to the new hospital building in May 2018, with fitting work processes, logistics and IT-support. Her special attention remains with patient's needs, creating a 'healing environment', using (inter)nationally acquired evidence and experience-based design knowledge. She is actively seeking to share knowledge from the 'once in a lifetime' Erasmus MC project and aims to build a network for 'better informed clients' for Dutch hospital organizations.

Since 2017 Liesbeth is also co-coordinating the scientific Program for Evaluating Our New Erasmus MC (PEONE), with focus on infection prevention, experience with wards with 100% single rooms and ownership of change and innovation. On this last subject she will start a PhD candidacy later this year.

Summary:

Liesbeth will reflect on the workshop theme by looking back at 20 years of involvement of the project- and program management of Erasmus MC's redevelopment and transition program.

What does it mean to get things right, first time, when you are planning 10-15 years ahead? How do you prepare for flexibility along the way and during the lifetime of the building? And should all the focus be on patients? Yes, of course seems the obvious answer, but what can and must we do to keep the workforce connected and well accommodated?

And how do we know if we did things right, for patients and staff? How can we measure outcomes, perform Pre- and Post-Occupancy studies, design evaluations, et cetera. And to what and whose use?

What factors help to ensure that facilities will properly support innovative or even transformative care models and meet patient's needs, what can we add on leadership, willingness to learn and integrated project delivery? Liesbeth will share some of the lessons learned on these factors, based on and illustrated by experiences at Erasmus MC.

Brendan Smyth

Director of Health Projects within Construction and Procurement Delivery (CPD – Finance Department) Northern Ireland

Brendan Smyth is the Director of Health Projects within Construction and Procurement Delivery (CPD – Finance Department) Northern Ireland. Brendan had previously worked in Health Estates (DoH) for over twenty years.



This group merged into CPD in October 2014 as a key component in the creation of a centralised government body and provides support and project management services to the Department of Health and its allied bodies. Qualified as an architect in the early 1980s he has a particular interest in the procurement of high quality healthcare environments and the roles of client, designer and contractor.

He has served on the board of the Department of Health and is currently a board member of the European Health Property Network.



Katherine Hanratty

Programme Director in Health Projects within Construction and Procurement Delivery (CPD – Finance Department) Northern Ireland

Katherine Hanratty is Programme Director in Health Projects within Construction and Procurement Delivery (CPD – Finance Department) Northern Ireland. CPD is a centralised government body and Health Projects provides a service to the Department of Health and its allied bodies. She is a chartered architect and project manager. She is Programme Director for the Northern Ireland Government Flagship Maternity and Children's Hospital Project, the largest healthcare construction project in NI.

Laia Isern Meix

Architect partner at Vitaller Arquitectura, Spain

Laia Isern Meix is architect partner in Vitaller Arquitectura, being part of the team since 2006. MArch in “Architecture, Organization and Management of Hospital Infrastructures” CEU San Pablo 2015



We are a company with over 20 years of experience in the field of design and architecture, innovating in improving the health of people with our designs in order to complete projects that combine architectural quality with the capacity to serve clients, from the comprehensive perspective of the project, its construction and its management.

We employ a team of over 20 professionals. We believe in teamwork, collective authorship and compatibility between professional and private lives. We therefore promote equal opportunities between men and women, opportunities for personal growth and the permanent training of those working with us. Our company develops healthcare architecture projects. Our designs focus on the experience of our users, as our architecture focuses on the individual.

We use innovative strategies through technologies and advanced methods, focusing on excellence, design, schedule fulfilment and budget to align our response with the goals of our clients.

Summary:

How can we perfect nursing home design?

Person-centred care aims to provide greater dignity to elderly people, to ensure that they continue to have a life project and hence the architectural model, their "home". It is essential for this goal to be a success.

How can we improve their environment to achieve this? We started working in a project that focuses in the person centred design (PCD) in collaboration with a company named SUMAR, applied in nursing homes and day care centres. These centres have some characteristics that differences them form the others. We can divide in three fields: architecture, technical and professionals. Different types of care centres for the elderly tend to converge in general design criteria. It must guarantee the achievement of these principles, recreating spaces such as those of a home, human-sized, welcoming, comfortable and safe for people with different degrees of dependency.

We made a pilot experience in this principles, where it was the references that are inside the design and management centred in people who live there. As a result, there is an auto-evaluation tool. It allows us to know the level of an existing nursing home, and some tips to improve it. Also, it allows us to design a new one using this principles as a guide or recommendation.



Dr Maria de Fátima Castro

Architect at the University of the Minho, Portugal

Maria de Fátima Castro is an Architect. She holds a MSc in Sustainable Construction and Rehabilitation, and a PhD in Civil Engineering. At this moment, she is a Researcher at University of Minho, working in reVer+ project (Development of a new natural-based thermal insulation system to improve the life cycle performance of Portuguese vernacular buildings), and she is also a healthcare building sustainability consultant, working with different architects and engineers' companies. Moreover, she has been collaborating with the Portuguese Central Administration of Health System in different studies.

She is an author identified by ISI Web of Science and Scopus databases with several articles, and she has been participating in the organisation of many events in the field of Sustainable Architecture and Construction. Since 2011, she has been taking part through oral presentations on these topics at many international and national conferences, seminars and workshops. She is member of the Technical Committee (TC) of iISBE (International Initiative for a Sustainable Built Environment) and responsible for TC of iISBE Portugal secretariat, that aims to adapt the international building sustainability assessment tool "SBTool" to the Portuguese environmental, societal and economic contexts.

She published two theses in the field of sustainability of healthcare buildings and a significant number of scientific articles (in an indexed journals) in the same research domain. She has been participating as an architect, since 2009, in projects of new and retrofitted healthcare buildings (e.g., Portuguese Oncology Institute of Porto, Conde de Ferreira Psychiatric Hospital, Dental Clinic in Santo Tirso, Day Care Centre in Estoril, ...). This is her main expertise and her principal interest. She wants to contribute to a better performance of healthcare functions, improving its space flexibility and quality to achieve better results in daily-life routines in line to sustainable issues, and according to different life cycle concerns.

Summary:

Healthcare Building Assessment Mobile Application - to aid a more sustainable project

The HBSAtool App is based on a Healthcare Building Sustainability assessment method development to be applied to all infrastructure of care, during the use and design phases of a new building or a rehabilitation project. This Method allows the comparison between different similar healthcare buildings or between one building and defined benchmarks, regarding a list of indicator, categories and demarcated areas, and make possible to know how better one solution is, comparing to others.

Now this method is available on a Mobile APP which turns easier its uses by different stakeholders, anytime and anywhere. It is possible to achieve the final results by yourself, introducing the information required, to test different solutions for one single project and create different assessments for more than one building.



Laura Arpiainen

M.Arch. Professor, Health and Wellbeing Architecture at Aalto University, Finland

Laura is the inaugural professor of health and wellbeing architecture at Aalto University in Helsinki.

An architect by training, she is a long term healthcare specialist with an international track record in all areas of healthcare including strategic planning and operationalizing of systems, service design, clinical planning and of course architecture and facility planning. Laura holds dual Finnish / Canadian citizenship and is particularly interested in diversity, integrated and holistic solutions for healthcare, patient and family centered care, new definitions of wellbeing and the relationship of built environments to health. As an experienced yoga instructor and therapist, Laura also has an interest in holistic practices of health.

Summary:

Foundry – Integrated, Population-based Care for Youth in Canada

Foundry is a provincial network of local, community based outpatient clinics for youth aged 12-24 in British Columbia, Canada. Foundry brings several services under one roof so that families and young people can access a one-stop shop for primary care, mental health, substance use, and social services. Foundry interdisciplinary teams include e.g. physicians, nurse practitioners, occupational therapists, mental health and substance use clinicians, youth and family peer support and navigation workers, youth and guardianship workers, income assistance and supported employment service workers, outreach workers, LGBTQ+ support and navigation, Aboriginal child service social workers and other Aboriginal service providers.

The objectives of Foundry are to serve at-risk populations in an integrated, patient and family centered, low-threshold manner.



Pentti Itkonen

CEO, South Karelia Social and Healthcare District, Finland

In his capacity as the Chief Executive Officer of The South Karelia Social and Health Care District in Finland, Dr. Itkonen leads a community-wide integrated organisation that employs over 5,000 people. He manages acute care, primary care, social wellbeing services and services for elderly people in the district.

Earlier in his career, Dr. Itkonen was the former Development Manager in the Ministry of Social Affairs and Health in Finland. He played a pivotal role in facilitating structural and managerial changes at the national level, following the flow of information and communication technologies into social and healthcare organisations. He was the responsible director to develop the e-prescribing and e-achieving system in Finland. His portfolio also includes directing the North Karelia Hospital District in Finland and managing specialised healthcare in the region.

Mr Itkonen received his degrees from the University of Tampere and the University of Kuopio in Finland. In addition, he has written several articles on structural changes of healthcare in the society.



Miklós Szócska MD, MPA, PhD

Director, Health Services Management Training Centre, Semmelweis University, Hungary

Miklós Szócska graduated at the Semmelweis University (SU) of Medicine in 1989. He holds a Master of Public Administration degree from the John F. Kennedy School of Government at Harvard University (1998), and a Ph.D. from the Semmelweis University in the field of change management (2003).

His interest in the management of health services and organisations emerged in the late 80s when he served as a student president elected from the opposition before the Hungarian regime change. After his graduation at the SU, he and his colleagues initiated the creation of the Health Services Management Training Centre (HSMTC), which was officially established in 1995. Between 1995 and 2000, he was serving as the deputy director and in 2000 he was appointed to be the director of the Centre.

Between 2010-2014, Dr. Szócska served a full electoral term as the Minister of State for Health of the Hungarian Government. During his term, he developed an evidence based consultative health policy. Besides managing to keep the sustainability of the Hungarian health services during the economic crisis, he also introduced a broad range of significant health reforms among which: the implementation of a radical public health regulatory framework with success and popular support. This included the full ban of smoking in public places and workplaces, the safety limitation of transfat content of food, and the introduction of public health tax on food and beverages with added sugar and salt. In his four years he also utilized central capacity planning for the rationalisation and regionalisation of the health care provision system as well as designed new efficient patient pathways.

Since the end of his term in office, he serves again as the Director of HSMTC. His areas of professional interest cover a range of topics – development of organisations, management of change and leadership. He and his colleagues had extensive research in health human resources migration and HR strategy for health. Most recently, he focuses on network analysis, big data solutions and data mining.

Due to his experience in shaping e-Health strategy on European and national level, he became responsible for the developments of the Institute of Digital Health Sciences at Semmelweis University.

In 2016 Dr. Szócska was nominated by the Hungarian Government for the Director-General position of the WHO.



Marisa Mason
NCEPOD Chief Executive Officer

Marisa joined NCEPOD in 2002 after completing her PhD at King's College Hospital and post-doctoral research at St George's Hospital, both in stroke prevention. Originally joining NCEPOD as a Project Manager, she took over as Chief Executive Officer in 2006 and has been part of the many changes and exciting challenges that have faced the organisation over the last 10 years; including the extension of NCEPOD's remit to include mental health and primary care and the addition of the Child Health Clinical Outcome Review Programme. Marisa has a strong interest in using data efficiently to improve the quality of care provided to patients whilst respecting information governance to maintain patient and clinician confidentiality.

Dr Vivek Srivastava
MD, FRCP(Glasgow), NCEPOD Lead Clinical Co-ordinator

Vivek is a consultant physician at Guy's and St Thomas' Hospital in London where he leads the specialty of Acute Medicine. He heads the Acute Medicine teaching programme for medical students at King's College London. Vivek is the Lead Clinical Co-ordinator at NCEPOD having got involved through reviewing cases on a number of studies. Vivek has an interest in improving the care provided to patients who have a mental health condition and who become medically unwell. He led the NCEPOD study on this issue called Treat as One. A short video on the study is available at (<https://youtu.be/hBhHb5sNTok>) and the full report at (<https://www.ncepod.org.uk/2017mhgh.html>).



Study Tours

This year we have three study tour options: the University Department of Geriatric Medicine Felix Platter Hospital; the University Children's Hospital Basel; the Roche Tower. Each is internationally renowned for medical care, research and built environment design quality. Buses will take tour participants to and from the sites.

The University Department of Geriatric Medicine Felix Platter, designed by wörner traxler richter and Holzer Kobler Architekturen, is one of the leading centers for evidence-based geriatric medicine and rehabilitation in Switzerland. The new complex "University Department of Geriatric Medicine FELIX PLATTER" offers one of the most modern and innovative geriatric health centers. It combines expertise in acute geriatrics, geriatric psychiatry and rehabilitation in a single facility.



In their joint planning of the new hospital, wörner traxler richter planungsgesellschaft mbh and Holzer Kobler Architekturen GmbH laid great value on the special needs of elderly patients and their often-extended hospitalizations. In addition, they incorporated energy-efficient design into the building, lean hospital operations, and were sensitive to the fit of the architecture into the neighbourhood district. The new seven-story building encompasses 280 stationary beds in 176 rooms. There are two units (acute care and rehabilitation) on each of the four upper floors of the complex, and a private unit on the top floor. The new building is considered one of the most expediently built hospital projects in Switzerland. It was constructed by use of the integrated 3-D modeling, Building Information Modeling (BIM). The interdisciplinary pioneer project has won the following prizes: the BIM Award 2016 from BIM Cluster Stuttgart in the Processes & Organization category and the buildingSMART bSI Award 2016 in the Operation & Maintenance category.

The new complex "University Department of Geriatric Medicine FELIX PLATTER" offers one of the most modern and innovative geriatric health centers in Switzerland. Dr Oliver Mauthner, Head of Nursing & Therapies, will guide this tour, which will include a presentation (20'), a site visit (30') and time for questions (10'). The focus will be on the planning and implementation from both process and patient perspectives.

The University Children's Hospital Basel (UKBB), by Stump & Schibli Architekten BSA, is an independent, university-based center for pediatric and juvenile medicine focused on teaching and research. In the new building, two clinical departments which were formerly located in different places recently merged. The center has 120 stationary beds,



an emergency unit and departments for surgery, pediatrics, orthopedics, psychosomatics and neonatology – all designed to accommodate the needs of juvenile patients.

The Children's Hospital stands out due to its colorful facade. Foil covered glass panels reflect light in different ways, highlighting this effect. Mesh-protected loggias installed on the front of the building give children the liberty to play "outside." Patient rooms located on the back of the building overlook a park-like courtyard. Hallways are wide and bright, covered in wood-like panels. On the walls, tall slivers of back-lit photos depict scenes from Basel and include child-scaled figurines.

The new infrastructure and the unification of all specialists under one roof make highly specialized juvenile medicine possible, and also enables the new UKBB to be even more of a family hospital.

The University Children's Hospital Basel (UKBB) is the most modern children's hospital of Switzerland. Mrs. Caroline Stade (Head of Nursing Service) will begin the tour with a short input speech on the range of services provided and guiding ideas concerning construction and planning with user groups (Children's Office Basel). Children's view will then be illustrated with real examples when visiting patient rooms.



Roche Tower is a skyscraper in the Swiss city of Basel. At 178 metres, it is the tallest building in the country. The building, also known as "Building 1", was financed by pharmaceutical company Hoffmann-La Roche and designed by Herzog & de Meuron. It cost 550 million Swiss francs to build. The entire construction ensemble, including a planned 205-metre "Building 2" research facility, is expected to cost three billion Swiss francs in total.

Since 2017, the Roche Tower has accommodated one of the largest IT innovation centres anywhere in the world. Mrs. Andrea Eichelmann (Visit Manager) will give insight into the administrative building 1 with views of several floors, a studio also known as "market place" and the Pebbles Lounge. A bird's-eye view of Basel is made possible thanks to the 360-degree panorama.

Venue and Travel

Venue: Launchlabs GmbH

The venue for the 2019 European Health Property Workshop is Launchlabs GmbH located Dornacherstrasse 192, 4053 Basel. The Google maps reference is here: <https://goo.gl/maps/3Uh11TNdi4JtrXJe9>.



Launchlabs belongs to Gundeldinger Feld, a listed building in a former industrial factory close to the main station Basel.

The factory was founded in 1844 with the production of ribbon weaving machines for the silk ribbon manufacturers of the region. Later, machines were also manufactured for sawing, drilling, pressing and pumping. In 1945, after the end of World War II, the factory employed up to 500 workers. At the beginning of the sixties, the alliance was reached with the Sulzer Group. In 1999, the surprising decision to abandon the

production site in Basel falls. The newly founded Gundeldinger Feld Immobilien AG bought the property and in the year 2000 handed over responsibility for the conversion of the area of Kantensprung AG.

Launchlabs spaces are prototypes for new technologies and connect people in unconventional ways during events, workshops and corporate seminars. The event hall, with 240 m², offers countless possibilities thanks to the flexible furniture and equipment combined with the industrial charm.



Travel

Basel airport is located 12 km from the Central Station. There are several bus services to the city center. Further information is available from the airport website: <https://www.euroairport.com/en/passengers-visitors/access-parking/access/bus.html>

The alternative to flights to and from Basel airport is to fly to Zurich and then take a train to Basel directly from the airport, or via Zurich Central Station. The train options are available from SBB website (<https://www.sbb.ch/en/timetable.html>) The direct train journey from Zurich airport to Basel should take just over 1 hour.

2019 EuHPN Workshop Sponsors

Ramboll is a leading engineering, design and consultancy company founded in Denmark in 1945. The company employs 15,000 people globally, with more than 400 employees dedicated to pioneering the design of healthcare facilities. Our extensive multidisciplinary services enable us to offer our healthcare clients creative and innovative solutions to meet diverse needs. Working with local and national government departments, the private sector and building contractors, our experience includes designing new and refurbishing existing healthcare facilities from major hospitals and community care facilities to specialist care centres.

We offer management and client consultancy that includes project management, strategies for operation, identification of automation potential and change management, communication policy, engineering, BIM (Building Information Modelling) Level 2 and procurement, as well as IT solutions.

The healthcare sector is facing a changing world population evolving through changes in climate, lifestyle, urbanization, and ageing. All these impact on the delivery of healthcare facilities. Our local presence in over 35 countries allows us to recognize how these trends are influencing individual countries, counties and cities. We use this local understanding to integrate our healthcare expertise and experience from around the world into our solutions. Our holistic approach and ethical standards mean that we also look for solutions that meet the needs of our healthcare clients, the patients as end users and our whole society.



Michael Gustavsson

Ramboll
Global Spearhead Director, Hospitals

Michael has more than 25 years of design, engineering, project management and construction expertise with hospitals and pharmaceutical research facilities. Currently, he is leading Ramboll's spearhead organisation for hospitals with almost 170 experts in eight European countries.



Flemming Schmidt

Global Market Director, Hospitals

Flemming has more than 20 years of experience with markets, management, strategy, design and project execution in Denmark and internationally. In the hospital sector, he has been working on greenfield, refurbishment, EPC and ESCO contracting projects in all phases.

Rico Maritz

Market Director, Hospital Logistics Switzerland

Rico has more than twenty years of experience as an operational and general hospital director, in functional design and medical consulting for architectural projects, as well as in hospital tender project and life cycle management with contractors in Switzerland.



Thomas Forst-Wartenberg

Spearhead Director, Hospitals, Germany

Thomas is a graduated engineer and has more than 30 years of consulting and project management experience with organizational analysis, process development and logistics automation, master planning and space allocation, as well as user involvement and implementation within Hospitals in Europe and Australia.





Kevin Smith

Spearhead Director, Hospitals, United Kingdom

Kevin is a Chartered Engineer with over 35 years' experience within the Property, Buildings and Energy sector. He has been accountable for advisory and design teams whilst working with a diverse range of national and international public/private sector clients including Healthcare, Education, Commercial and Residential.

2019 EuHPN Workshop Supporters



walkerproject is one of Europe's leading consulting companies for innovation in healthcare. We work closely with healthcare professionals to improve patient experience, quality of care and team collaboration. We are enthusiastic about helping healthcare organizations through cutting-edge methods and collaborative learning. Our company culture is characterized by trust, autonomy and continuous learning with a lot of responsibility.

Our specialty is to translate strategies, evidence and best practices into daily operation and new buildings. We have in-depth knowledge of hospital organizations such as university hospitals, regional hospitals, rehabilitation and psychiatric clinics.

Delighted clients are the basis of our success, combining inspiration and impact.



Micha Kämpfer is Partner, leading the Scandinavian branch of walkerproject ag, the leading hospital consulting group in Switzerland. He is an accomplished project manager for strategy development and execution in healthcare. Micha facilitates patient-centric innovation and acts as expert for continuous improvement in emergency, inpatient and primary care. His focus is on deploying strategies, best practice and evidence into daily practice. Micha has a track-record in applying lean and design thinking methodology in healthcare. He provides international experience and a network for patient-centricity in Europe (Switzerland, Scandinavia, Netherlands) and USA. Micha hosts also lectures about « Lean Hospital » for the Swiss Hospital Association H+ Bildung.

Katja Rüegg is Senior Consultant at walkerproject ag, the leading hospital consulting group in Switzerland. She completed her master's degree in International Affairs and Governance at the University of St. Gallen. In her projects she puts the patient experience and patient needs always first. With this focus Katja supports clinics and hospitals on their journey to a Lean Hospital. With the approach of Design Thinking, Katja enables project teams to create new working processes along the patient journey.





Jacopo Dandrea is Consultant at walkerproject ag. Jacopo graduated from the University of St. Gallen with a master's degree in Business Innovation. During his time at walkerproject ag, Jacopo Dandrea has been supporting emergency departments with creating sustainable processes for the future building, using methods of Integrated Facility Design (IFD) and Design Thinking (DT). Moreover, he facilitates workshops on the topic "Value Based Healthcare" to work on forward-looking healthcare concepts.

Fabien Quirighetti is Junior Consultant at walkerproject ag. Fabien Quirighetti graduated from the University of St. Gallen in 2018 with a bachelor's degree in Economics. During his time at walkerproject, Fabien supports his team members in Lean projects in emergency units and stationary wards of hospitals.

