

# CANCER CARE BY DESIGN

INTERNATIONAL SYMPOSIUM

ROYAL COLLEGE OF PHYSICIANS, LIVERPOOL | 27 FEB 2024



## FINAL PROGRAMME

### EQUITABLE INNOVATION

TRANSFORMING CANCER CARE FOR ALL

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# Accelerating Discovery, Advancing Treatment

At HDR, we put people first by design. We believe that meaningful impact arises from empathy, exploring new strategies, and challenging barriers to scientific discovery — especially in cancer care and research.

- 01, 02 Champalimaud Foundation Bottom-champalimaud Pancreatic Cancer Centre, Lisbon, Portugal
- 03 Chris O'Brien Lifehouse Royal Prince Alfred Hospital, Sydney, Australia
- 04 University of Nebraska Medical Center and Nebraska Medicine, Fred and Pamela Buffett Cancer Center, Omaha, NE, United States
- 05 University of Texas, MD Anderson Cancer Center, Zayed Building for Personalized Cancer Care, Houston, TX, United States



**Dear colleagues,**

Cancer is a devastating disease, impacting individuals, families, communities and health systems across the world, and costing the world economy an estimated US\$1.6 trillion.

In the last 50 years, advances in life-saving cancer research and new treatments have seen cancer survival rates double, yet 10m people still die from cancer globally every year, including 150,000 deaths in the UK alone. As populations grow and age, overall cancer incidence is set to rise by more than a third by 2040, raising the pressure to implement long-term, strategic plans across the cancer pathway that focus on prevention, reducing late-stage disease, and introducing the latest treatments to all.

Innovation and scientific advances are set to accelerate further. While chemotherapies, radiotherapies, and surgery have successfully characterised the battle against cancer for decades, new advancements, including the rise of personalised treatments, precision medicine and targeted therapies, are transforming both outcomes and the patient experience. From pioneering immunotherapy and cell therapy research, and the development of genomic and personalised medicine, to next-generation cancer organoids, nanomedicine, and AI in oncology, we are in a transformative era of cancer research, with remarkable innovations paving the way for breakthrough treatments.

At the same time, there is greater recognition of the value of social innovation rooted in communities through new forms of advocacy, destigmatisation, patient empowerment, survivor networks, and public health education. Alongside organisational innovations, a shift towards people-centred health and community-based interventions is creating meaningful benefit to patients and families.

Every stage of a patient's cancer journey can create new fears, anxieties and stress for both patients and family members. Health professionals and caregivers working in cancer care environments also experience huge stresses and trauma. The settings and facilities in which cancer care is provided need therefore to offer a humanistic and supportive environment, where wellbeing, dignity and comfort are embraced in the design to reduce physical, psychological and emotional stresses, and positively influence the patient, family and staff experience.

Providing access to outdoor spaces and views to nature, maximising daylight, natural ventilation and air quality, incorporating natural materials, and taking a thoughtful approach to interior design and art can ensure a calm, empathetic environment, at the same time as providing distraction and hope. And non-clinical support spaces for consultation, social support and rest can provide the patient and family members with a sense of dignity, choice, control and meaning in their journey.

Organised by European Healthcare Design and streamed on SALUS TV, in collaboration with leading international partners from research, practice and policy, the 2nd Cancer Care Design 2024 International Symposium aims to share international knowledge on the future design and development of cancer care services, technology, the arts, and infrastructure. And we hope that delegates who booked our study tours to leading cancer facilities in the area will have gained much from their visits.

We're delighted to welcome delegates and sponsors to the Royal College of Physicians at The Spine in Liverpool, to contribute to and stimulate a new dialogue on the future of cancer care by design.

**JOHN COOPER**

Director, JCA  
Programme chair, Cancer Care by Design

**MARC SANSON**

Director,  
SALUS Global Knowledge Exchange

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1. Northern Centre for Cancer Care, North Cumbria, P+HS Architects; 2 & 4. Botton-Champalimaud Pancreatic Cancer Centre, designed by HDR; 3. The Royal Marsden Oak Cancer Centre, BDP; 5. Cambridge Cancer Research Hospital, NBBJ

**Dear colleagues,**

## **Equitable innovation by design – how do we improve outcomes for all?**

According to NHS England's national clinical director for cancer, Professor Peter Johnson, "a record 3 million people were checked for cancer in England, in the 12 months from November 2022 to October 2023" – an increase of 150,000 people. Using innovative targeted messaging to raise awareness through partnerships with Morrisons Supermarkets and P-Wave, outside of traditional methods, NHS England is detecting three in every five cancers at their earliest stage.

The 'Longer, better lives: A manifesto for cancer research and care', published by Cancer Research UK (CRUK), highlights that the likelihood of surviving a decade or more with cancer is at its highest level.

On the face of it, there is much to be positive about. However, we cannot ignore the fact that the incidence of cancer is likely to increase due to the growth and ageing of the population, as well as other factors such as societal inequalities. According to CRUK's projections, the number of new cancer cases diagnosed each year will reach almost 500,000 by 2040.

Research continues to unlock innovative ways to profile and prescribe treatment in less time, targeting cancer in quicker and less invasive ways. Increased checking and detection are providing quicker access to advice, treatment, and support for more of our population. Immunotherapy is playing an ever-greater role in targeting cancer in children and adults without the need to use chemotherapy. And personalised cancer treatment is now more widely available.

This shift can and does provide an opportunity to deliver care differently and perhaps tackle the inequalities that some in society face.

## **Applied innovation – cancer facilities**

The constantly evolving medical equipment solutions and the plethora of treatments available allow those who face and support the cancer community the opportunity to change the way they deliver treatment. When these combine, increasingly multi-faceted teams comprising scientists, clinicians, dietitians, councillors, and, of course, cancer patients all benefit in ways not thought possible even three years ago. The traditional "engineering-led" treatment need not be the primary driver when assessing the scale and elements that the cancer facilities of tomorrow must include.

We know from AECOM's current work on projects in Australia, such as the Queensland Health Expansion Programme and Building Rural and Remote Health Programme, as well as here in the UK at Cambridge Cancer Research Hospital and Abergavenny Radiotherapy Satellite Unit, that clinicians and designers are collaborating more closely to deliver the next generation of buildings to support the cancer community. These buildings deliver facilities that have a lower impact on the environment, and incorporate modern methods of construction to create safe, welcoming, adaptable, and stimulating buildings where patients can access gardens and outdoor areas. These buildings support the ever more specialised treatments and multidisciplinary teams who tackle every aspect of the patient's treatment, care, and survivorship.

How do we reach, diagnose, treat, and support more of the cancer community? We can do so by continuing to explore ever more innovative ways of raising awareness and taking the facilities and treatment to all of society, including socio-economically disadvantaged communities.



**RICHARD MANN**

Director, healthcare, science and tertiary education sector leader, Europe and India, AECOM

Platinum Health Leader



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- **Discussion** – Join in with fellow attendees in a discussion forum and share your thoughts on the Symposium streams and topics beyond the Symposium.
- **Social** – Share your involvement with the Symposium on social media via the hashtag **#CCDIS** and tagging us on X (formerly Twitter) with the handle **@EHDCongress**



# PROGRAMME AGENDA

All sessions to be held in Space One. All breaks to be held in The Axis.

## 08.00 Registration opens



**Opening keynote session: Policy and strategy**  
Chair: Prof Nagesh Kalakonda, chair of experimental haematology  
University of Liverpool; hon. consultant, Clatterbridge Cancer Centre

Platinum Health Leader

**AECOM**

### 09.00 Welcome and introduction

John Cooper, director, JCA; programme chair, Cancer Care by Design (CCD 2024), UK

### 09.10 Platinum Health Leader address: Equitable innovation by design

Richard Mann, director, healthcare, science and tertiary education sector leader, Europe and India, AECOM, UK

### 09.15 Strategies to address the wider determinants of health in cancer care – ‘State of Health in Liverpool 2040’

Prof Matthew Ashton, director of public health, Liverpool City Council, UK

### 09.40 Cancer strategy and research by design

Prof Tim Maughan, professor of oncology, University of Liverpool; prof emeritus, University of Oxford, UK

### 10.05 Panel discussion

## 10.30 Coffee, networking and exhibition – in The Axis



**Session 2:**  
**Research and social innovation: Transforming cancer care**  
Chair: John Cooper, director, JCA; programme chair, CCD 2024, UK

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### 11.00 Innovation and the future of cancer care

Prof Stephen Johnston, head of medical oncology, head of Breast Unit, professor of breast cancer medicine and consultant medical oncologist, Royal Marsden, UK

### 11.30 Maggie's: Everyone's home of cancer care

Dame Laura Lee, CEO, Maggie's, UK

### 11.40 Architecture of Hope: Maggie's, Oldham

Alex de Rijke, founding director, dRMM, UK

### 12.10 My journey with Maggie's: An interview with a Maggie's Centre visitor

Kirsty Ruddin, centre visitor, Maggie's, UK

## 12.30 Lunch, networking and exhibition – in The Axis

**Session 3:****Case exemplars: Designing cancer care and research environments****Chair: Sunand Prasad, chair, UK Green Building Council; principal, Perkins&Will, UK****13.30 Christie Paterson Cancer Research Centre in Manchester**

Ged Couser, principal, BDP, UK

**13.50 Botton-Champalimaud Pancreatic Cancer Centre, Portugal**

Fernando Rodrigues, health planning principal, HDR, USA

**14.10 Cambridge Cancer Research Hospital**

Julia Davies, senior associate – architect, NBBJ, UK; Colin Page, director, AECOM, UK

**14.30 Oak Cancer Centre, Royal Marsden**

Dominic Hook, architect director, BDP, UK

**14.50 Panel discussion****15.15 Coffee, networking and exhibition – in The Axis****Session 4:****Arts in oncology****Chair: Vivienne Reiss, independent arts consultant, UK****15.45 The role of art in enhancing and humanising cancer care environments**

As new models of care redefine the environments in which cancer care is experienced, arts professionals have been exploring how art can help create therapeutic environments and transform the experience for patients, carers, staff and wider communities. Early-stage involvement of artists can result in integrating art into the fabric of both hospital buildings and more holistically across the patient journey, from prevention to diagnosis, treatment and survivorship. Our expert panel will discuss how innovative approaches to art can enhance and humanise cancer care, in and out of hospital. They will present art strategies, works and outcomes at different stages of development, exploring how to: use art to enable positive conversations about cancer and recovery; create a sense of place and narratives supporting the patient journey; develop multi-sensory experiences and connections with the natural world; and foster creative engagement contributing to co-design processes.

**Panel:****Ellen Nowak**, joint head of arts, Cambridge University Hospital Arts, UK**Hannah Jane Walker**, artist, Cambridge University Hospitals NHS Foundation Trust, UK**Dr Lauren Walton**, member, CUH Arts Steering Group; member, CCRH Patient Advisory Group, UK**Guy Noble**, arts curator, UCLH Arts and Heritage, UK**Joanna Callaghan**, artist filmmaker; professor of filmmaking, University of Sussex, UK**17.00 Final remarks**

John Cooper, director, JCA; programme chair, Cancer Care by Design, UK

**17.15 Close**



**Prof Matthew Ashton** (UK)

Director of public health,  
Liverpool City Council

## Strategies to address the wider determinants of health in cancer care – ‘State of Health in Liverpool 2040’

Liverpool is the third most deprived local authority in England. Social determinants, including poverty, income level, education, employment status, and characteristics such as gender and ethnicity, have a marked influence on how long a person lives and how many years they will live in good health.

‘State of Health in Liverpool 2040’ is an independent report by Professor Matt Ashton, Liverpool director of public health. The report describes how health in the city has evolved since 1984, the current state of health in the city, and, for the first time, a projection of health and wellbeing in the city to 2040 based on current trends.

The report shows that Liverpool residents living in the poorest areas live 15 years less than those in more affluent areas, and they live 18 more years with poor health. People aged 15 years and over in the most deprived areas of the city experience co-morbidities and major illness, such as cancer, significantly worse than those in the least deprived areas.

Looking ahead to 2040, life expectancy is projected to increase by 0.5 years for men and to fall by one year for women. The number of people with major illness is predicted to increase by between 33,000 and 38,000 people, and the overall number of health conditions is projected to rise by over half (54 per cent) to 546,600. Individual disease projections show an increase in cancer by 16,100 to 34,100 people. On average, residents will live 26.1 per cent of their lives in ill health, with people living in the most deprived areas likely to live longer in ill health. This is unacceptable but it’s also avoidable, provided there is concerted action at a local level with national support.

The report sets out local, system-wide and national recommendations to improve health outcomes and reduce health inequalities. This means taking action on the wider social determinants of health in the prevention, early diagnosis and treatment of cancer to create a healthier city for everyone. There needs to be more integrated working between health and care services and community activities and support; greater appreciation of the emotional impact of managing long-term and major health conditions and disabilities for both individuals and their families; and more tailored support that breaks down barriers to accessing and continuing to access services effectively.



## Cancer strategy and research by design

The strategy of targeting defects in the cancer genome as a means to treat patients with cancer has led to some startling successes, particularly in the relatively few cancers with single genomic drivers. However, in most cases, cancer evolution thwarts the long-term benefit of this approach. Harnessing the power and flexibility of the patient's immune system has shown longer-term benefit, notably in those patients whose cancers carry high numbers of genetic mutations, making them more visible to the immune system.

A key strategy in cancer treatment is to extend the number of patients in whom immune-based therapies are effective. This requires detailed understanding of how the human immune response is either blocked or enabled to 'see' the cancer and mount a response against it, as well as identification of strategies to evaluate this in relevant patient groups. The clear aim is to gain long-term disease control, even in patients with advanced cancer, with minimal adverse events.

Research is also developing new strategies to prevent the development of cancer or to detect cancer earlier, and this approach is key to reducing mortality from cancer on a population basis. Novel insights from tumour immunology and from mass vaccination during the Covid-19 pandemic have accelerated the prospect of wider use of vaccination as a strategy to prevent cancer. Earlier detection of other cancers through the targeted lung health check, and blood tests to detect changes due to cancer at its earliest stage, have been developed and need end-to-end evaluation to show their benefit in the population. This will require a strategic shift of resources to earlier detection of cancer in an integrated approach alongside other health promotion programmes addressing the wider determinants of health.



**Prof Tim Maughan** (UK)

Professor of oncology,  
University of Liverpool;  
Professor emeritus,  
University of Oxford



**Prof Stephen Johnston**  
(UK)

Head of medical oncology,  
head of Breast Unit, professor  
of breast cancer medicine and  
consultant medical oncologist,  
Royal Marsden

## Innovation and the future of cancer care

Stephen Johnston is head of medical oncology, head of the Breast Unit, professor of breast cancer medicine, and consultant medical oncologist at the Royal Marsden NHS Foundation Trust and the Institute of Cancer Research, London.

He was the first director of the UK's National Institute for Health Research (NIHR) Biomedical Research Centre at the Royal Marsden from 2007 to 2012, and is currently clinical director of the Breast, Lung and AOS Clinical Business Unit at the Royal Marsden.

He graduated in 1983 from Trinity College at Cambridge University, and in 1986, from the Medical School at the University of Newcastle-upon-Tyne. He trained in general medicine at St Bartholomew's Hospital and Hammersmith Hospital in London, and subsequently in medical oncology at the Royal Marsden. He gained his PhD from the Institute of Cancer Research at the University of London, and he took up his current position as consultant medical oncologist in the Breast Unit at the Royal Marsden in 1997.

He has a specialist interest in the treatment of metastatic breast cancer, and his major research interests lie in understanding mechanisms of endocrine resistance in breast cancer. He is actively involved in facilitating the interface between basic and applied research, and he is chief investigator of several phase II/III trials of novel therapeutic approaches in advanced disease, including new endocrine therapies and targeted signal transduction inhibitors.

He has published more than 250 breast cancer-related articles in peer-reviewed journals and is a regular invited lecturer at national and international meetings. He is a member of several scientific committees and advisory boards, a prior faculty member at the American Society for Clinical Oncology, a current member of the San Antonio Breast Cancer Symposium abstract review committee, and serves as deputy/associate editor for the international journals *Breast Cancer Research* and *Clinical Breast Cancer*.

## Maggie's: Everyone's home of cancer care

Dame Laura Lee has been at the helm of Maggie's since its inception in 1995. She met Maggie Keswick Jencks when Maggie was being treated at the Western General Hospital in Edinburgh. Laura was her oncology nurse, and together they worked on a blueprint for a different type of cancer care.

Laura acts as a co-client for every new centre build and has overseen the development of our professional programme of support to meet the practical and psychological needs of people living with cancer.

People living with cancer have experienced an incredibly difficult few years because of the pandemic, treatment delays, and the cost of living crisis. Maggie's has seen a huge increase in people seeking support for money worries, as well as stress, anxiety, fear and trauma.

Under Laura's leadership, Maggie's centres were visited more than 310,000 times in 2023; some 45,000 were visits from new people with cancer and nearly 35,000 were visits from people newly caring for someone with cancer.

Laura says: "The critical need for expert psychological and practical support after a cancer diagnosis is well proven and it's essential that this is offered as part of the cancer pathway. Maggie's is the answer to this need, and I will not stop until everyone in the UK has a Maggie's within geographical reach."



**Dame Laura Lee** (UK)

CEO,  
Maggie's



**Alex de Rijke** (UK)

Founding director,  
dRMM

## Architecture of Hope: Maggie's, Oldham

Conventional hospitals are often referred to as 'no place to get well', the familiar critique of the depressing experience of institutionalised environments. Staff and patients are routinely housed in windowless rooms, buried deep in labyrinthine plans in buildings organised like medical machines.

Maggie Keswick, while living with cancer, was an astute critic of hospitals and medical processes, and initiated the first Maggie's Centres as an alternative cancer support environment for patients and loved ones to use during or post treatment. Her partner, the writer Charles Jencks, defined the subsequent Maggie's Centres building programme as 'The Architecture of Hope'.

Prof Alex de Rijke points out that, in addition to design issues around layout, space and daylight, hospital buildings are often constructed from materials that are harmful to people and planet.

Maggie's Oldham is a deliberate response to the tropes of hospital design and a modest manifesto for a new kind of healthcare building; one which addresses physiological and psychological wellbeing through considered decisions about building design and natural materials.

The first Maggie's Centre to be built in timber is presented as 'The Architecture of Health'.



## My journey with Maggie's: An interview with a Maggie's Centre visitor

Kirsty Ruddin, 45, a criminal solicitor from Wirral, was diagnosed with stage 2 melanoma in 2017. Then, in December 2021, after feeling unwell, she was diagnosed with stage four melanoma. It was at that stage that Kirsty found out about Maggie's Wirral and says she was "absolutely blown away by it".

Her mum and brother accompanied her to all of her treatments and appointments but, owing to Covid restrictions, were not able to come onto the ward and so would often go and sit in Maggie's while they waited for her. She says it gave both them and her peace of mind because she knew they were happy and distracted, having chats and tea and cake, while she was on the ward.

Kirsty has accessed benefits advice, psychological support, and general support and advice from the centre team.

Kirsty says: "Not only is the centre beautiful, aesthetically, but the people are what makes it stand out and the programmes on offer are just fantastic. I've got a lot of time and a lot of praise for the centre. I've raised money for them and my brother is planning to as well. It would be fantastic to have centres for all patients, regardless of the hospital you go to.

"It will be my last immunotherapy session on 14 February and I've asked the hospital to make my appointment earlier than usual so that I can go into Maggie's afterwards. I know it will be an emotional day for me but I want to see the team there after I've rung the bell.

"I know that when treatment stops it could trigger emotions and I might feel the need to access some of the services. It's reassuring to know that such services are always available, even after my treatment has stopped."



**Kirsty Ruddin** (UK)

Centre visitor,  
Maggie's



**Ged Couser** (UK)

Principal,  
BDP

### Christie Paterson Cancer Research Centre in Manchester

Designed by BDP for the Christie NHS Foundation Trust, the University of Manchester, and Cancer Research UK, the £150m Christie Paterson Cancer Research Centre includes laboratories, research spaces, and consultant workspace.

At more than 25,000 sq m and ten storeys high, the new building is more than twice the size of the previous facility, which was severely damaged in a fire in 2017. It promises to transform organisational adjacencies through co-location of research groups and clinicians. The design also includes an area for a publicly accessible exhibition space, to facilitate engagement with the local community, to educate and inform.

The building will be occupied by the Cancer Research UK Manchester Institute, as well as several teams from the University of Manchester's Division of Cancer Sciences. Serving as Manchester's scientific headquarters for discovery science, as part of the International Alliance for Early Cancer Detection, the building will house more than 300 scientists, 400 clinicians, and operational staff. They will deliver clinical trials covering the full extent of the patient pathway, from prevention and novel treatments to living with and beyond cancer.

A central component of the building will be the new Cancer Research UK Biomarker Centre, which will be situated on the third and fourth floors of the building. The centre's focus will be on biomarkers to aid in early cancer detection and diagnosis, and enable personalised management of a patient's cancer, including which therapy will bring the most benefit.



## Botton-Champalimaud Pancreatic Cancer Centre, Portugal

The new Botton-Champalimaud Pancreatic Cancer Centre follows a translational methodology to improve the success rate of cancer treatment and, ultimately, the quality of life for those affected by pancreatic disease.

To increase operational efficiency and shorten the time required to treat each patient, the vertical circulation of the interior layout unites surgical services, research and clinical trials under one roof, creating a seamless patient experience and enhancing medical professionals' ability to accelerate the discovery and implementation of novel therapies in pancreatic cancer care.

An ambitious design goal was established at the outset of the project: to create an extraordinary place that becomes part of the healing process and provides an atmosphere of tranquility, possibility, and hope. Allowing the architecture to demonstrate this message, the new centre embraces its seaside environment and offers moments of calm, connecting patients to the water and bringing them closer to the natural world during a trying time in their lives.

The design includes a BSL-2-compliant cGMP Gene Therapy Facility, which is split into two zones and consists of two unidirectional ISO 7 processing suites, enabling the institution to produce CAR-T and blood stem cells for Phase 1 and Phase 2 clinical trials. The glass-enclosed processing suites offer views of the public corridor and feature interactive media displays with information about the research and production process of CAR-T and peripheral blood stem cells. The proximity of the labs to inpatient and surgical services has the potential to speed up the time-sensitive process of receiving pancreatic care.

Through critical adjacencies, revolutionary circular operating rooms, high-design concepts that enhance the human experience, and advanced medical technology, the new centre is a leading destination for pancreatic cancer care.

The project design was a collaboration by HDR and Sachin Agshikar & João Laranjo Arquitectos.



**Fernando Rodrigues (USA)**

Health planning principal,  
HDR





**Julia Davies (UK)**

Senior associate – architect,  
NBBJ, UK



**Colin Page (UK)**

Director,  
AECOM

## Cambridge Cancer Research Hospital

Cambridge Cancer Research Hospital will change the story of cancer. It will bring together clinical and research expertise in a new, world-class hospital, revolutionising cancer care and transforming patient outcomes in the first net-zero carbon healthcare building in the UK.

The hospital will detect cancer earlier, treat it more precisely and save more lives. The breakthroughs and innovations will have a huge impact across the region, the UK and the world, bringing hope to millions of people.

About 26,300m<sup>2</sup> in size, the seven-storey facility is set to be the first hospital delivered in the East of England as part of the Government's New Hospital Programme and will reflect many aspects of Hospital 2.0, meeting the Programme's 13 criteria assessment, with design features including programme standardisation, using modern methods of construction, net-zero carbon goals, a digital strategy, and delivering excellent patient experience and outcomes.

The hospital, designed in partnership with patients, their families and staff, will include three embedded research institutes focused on accelerating the early detection of cancer and leading the way in delivering bespoke precision treatment to radically improve patient outcomes.

The design also maximises the benefits of co-locating research, care and treatment, offering opportunities to meet, collaborate, and exchange knowledge and experience.

The new cancer hospital, a partnership between Cambridge University Hospitals NHS Foundation Trust, the University of Cambridge and the Cancer Research UK Cambridge Centre, is being built on Europe's leading life sciences campus, the Cambridge Biomedical Campus.

Designed by architects NBBJ and engineers AECOM, in collaboration with staff and patients, construction is expected to start in 2025.





## Oak Cancer Centre, Royal Marsden

The Oak Cancer Centre is a new clinical care and research centre for the Royal Marsden NHS Foundation Trust's Sutton hospital campus.

The Royal Marsden Hospital opened in 1851 as the world's first hospital dedicated to cancer diagnosis, treatment, research and education. The Oak Cancer Centre, named after Oak Foundation, which donated £25 million to the Royal Marsden Cancer Charity's Oak Cancer Centre fundraising appeal, will enable clinicians to diagnose more cancers at an earlier stage and will help accelerate the development of new cancer treatments, offering hope for cancer patients worldwide. The building has also been designed with a very clear intent of aiming to enhance patients' experience while they undergo treatment.

The new building for the world-renowned specialist cancer hospital, is located adjacent to the Institute of Cancer Research (ICR), the Royal Marsden's principal academic partner. The Oak Cancer Centre is an integral component of the new London Cancer Hub – an emerging 'knowledge cluster', which will become a global leader for cancer research, treatment, and innovation.

Carefully considered clinical design has created a blend of world-leading cancer research space, bringing together researchers in the Kuok Research Centre with outpatient and day treatment activity, including 66 chemotherapy treatment bays in the Olayan Day Care Unit and the new Charles Wolfson Rapid Diagnostic Centre. Using the very latest technology, the new Charles Wolfson Rapid Diagnostic Centre will enable earlier, faster diagnosis for more people, enhancing outcomes.

The Kuok Research Centre brings together more than 400 scientists and researchers into a space designed specifically to encourage collaboration at the very heart of the building. The design deliberately embraces the visibility and transparency of this vital work, to provide a reassuring presence and real sense of progress and advancement for those being treated.



**Dominic Hook (UK)**

Architect director,  
BDP





**Vivienne Reiss** (UK)  
Independent arts consultant



**Guy Noble** (UK)  
Arts curator,  
UCLH Arts and Heritage



**Joanna Callaghan** (UK)  
Artist filmmaker; professor of  
filmmaking, University of Sussex

## The role of art in enhancing and humanising cancer care environments

As new models of care redefine the environments in which cancer care is experienced, arts professionals have been exploring how art can help create therapeutic environments and transform the experience for patients, carers, staff and wider communities. Early-stage involvement of artists can result in integrating art into the fabric of hospital buildings and more holistically across the patient journey, from prevention to diagnosis, treatment and survivorship.

Our expert panel will discuss how innovative approaches to art can enhance and humanise cancer care, in and out of hospital. They will present art strategies, works and outcomes at different stages of development, exploring how to use art to enable positive conversations about cancer and recovery; create a sense of place and narratives supporting the patient journey; develop multi-sensory experiences and connections with the natural world; and foster creative engagement contributing to co-design processes.

### Grafton Way Building

UCLH Arts and Heritage, UCLH NHS Foundation Trust's arts programme, has been responsible for the development and implementation of the arts strategy for the Grafton Way Building. UCLH Arts and Heritage aims to provide a welcoming, uplifting environment for all patients, visitors and staff through the use of a varied and stimulating arts and heritage programme. It aims to improve patient wellbeing, boost staff morale, and widen access to the arts and the Trust's rich heritage.

The arts strategy has been developed with these aims in mind, as well as providing a 'wow' factor; providing distraction and reassurance for patients from their anxieties; providing uplifting colourful art works; encouraging conversation about the arts; and standing the test of time.

The natural world has also influenced the theme for many of the artworks in the hospital, as research suggests that views of nature help improve recovery rates and wellbeing for patients. For example, art work in patient bedrooms created by Alex Echo uses images of forests, lakes, skies, flowers and beaches to offer patients a distraction while in hospital.

The art works have been funded by UCLH Charity, Haematology Cancer Care Charity, and other private individuals.



**CUH Arts**

CUH Arts is Cambridge University Hospital's arts-in-health programme, dedicated to shaping care through creativity. Its goal is to create welcoming, positive and inspiring environments that surpass expectations and play a genuine role in patient care.

At CCD 2024, it will be sharing an artist-led creative engagement project delivered in partnership with the University of Cambridge Museums, the outcome of which provides a valuable insight into what cancer patients and NHS staff want from arts and culture while in hospital. The learning from this project is actively informing the design of its oncology environments of the future and will be of relevance to anyone with an interest in the role that arts and culture can play in humanising cancer care.

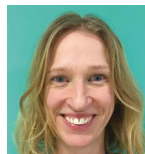
CUH Arts will be delivering a drop-in creative activity throughout the day, offering the opportunity to reflect on your connection to the natural world and giving you the opportunity to make your own mini natural colour chart.

The activity is inspired by an exhibition created by botanical dye specialist Mia Sylvia, who worked with cancer patients and NHS staff to extract colour pigments from local flora and fauna, including plants used in cancer treatments, and used them to create beautiful textiles. These were then curated in a gradation of colour and exhibited at Cambridge University Hospital, offering staff and patients a direct link to the natural world on their doorstep.

**Goodbye Breasts!**

Goodbye Breasts! is a creative transdisciplinary project that explores women's experiences of breast cancer, mastectomy, and recovery. It includes a touring art installation of a Big Breast, an inflatable that you can enter to and encounter breast anatomy, short films, a feature documentary, and a social media campaign. The project aims to create a space outside of clinical settings for positive conversations about breast health, increase understanding of faulty genes, and highlight the role of creativity and art in healing and recovery.

Image credits: (p18) 1. Grafton Way Building; (p19) 1 & 2. CUH Arts; 3. Goodbye Breasts!



**Ellen Nowak (UK)**

Joint head of arts,  
Cambridge University Hospital Arts



**Hannah Jane Walker (UK)**

Artist, Cambridge University  
Hospitals NHS Foundation Trust



**Dr Lauren Walton (UK)**

Member, CUH Arts Steering  
Group; member, CCRH Patient  
Advisory Group



Places on both tours are fully booked.

## Study tour 1

### Christie Paterson Cancer Research Centre in Manchester and Maggie's at the Robert Parfett Building, Manchester

**Departure point:** Novotel Liverpool Paddington Village

**Date:** Monday 26 February

**Time:** 14.15–19.30 (including travel time)

#### Christie Paterson Cancer Research Centre in Manchester

Designed by BDP for the Christie NHS Foundation Trust, the University of Manchester, and Cancer Research UK, the £150m Christie Paterson Cancer Research Centre includes laboratories, research spaces, and consultant workspace. At more than 25,000 sq m and ten storeys high, the new building is more than twice the size of the previous facility, which was severely damaged in a fire. It promises to transform organisational adjacencies through co-location of research groups and clinicians, and will serve as Manchester's scientific headquarters for discovery science.

#### Maggie's at the Robert Parfett Building, Manchester

Designed by Sir Norman Foster of Foster + Partners, this Maggie's centre is set in the grounds of the Christie Hospital in Manchester. The centre's design draws on natural themes that engage the outdoors. The building is arranged over a single storey and the natural timber structure focuses around a wide, central spine, with the roof creating a mezzanine level illuminated with natural light. An integrated glass house extends from the south of the building, providing a space for people to enjoy the therapeutic qualities of nature while being sheltered from the elements.

## Study tour 2

### Christie Paterson Cancer Research Centre in Manchester (as above) and Maggie's Oldham

**Departure point:** Novotel Liverpool Paddington Village

**Date:** Wednesday 28 February

**Time:** 08.45–16.00 (including travel time)

#### Maggie's Oldham

Designed by Alex de Rijke of dRMM, Maggie's Oldham opened in 2017 in the grounds of the Royal Oldham Hospital. It's believed to be the world's first engineered hardwood building, set across one storey and supported over its garden by steel legs. The interior is designed around a circular window, through which a tree rises up from the garden below. The exterior is clad in corrugated, thermally treated tulipwood, which has also been worked into cross-laminated timber to create the main load-bearing structure.

# EUROPEAN HEALTHCARE DESIGN

RESEARCH • POLICY • PRACTICE

**Contact for sponsorship:**

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 Managing director  
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 europeanhealthcaredesign.eu

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## European Healthcare Design Congress

Now in its tenth year, the annual European Healthcare Design Congress, Exhibition and Awards brings together interdisciplinary researchers, practitioners and policy thinkers from across the fields of health system and service design, technology and infrastructure.

Scheduled to be held on 10-12 June at the Royal College of Physicians in London, the theme of the world's leading healthcare design forum in 2024 is 'Natural Intelligence: Creating self-learning health systems'. Featuring 200 talks, workshops and video posters, up to 1000 delegates from 40 countries will attend in-person and virtually over two days of conference activity, followed by a day of study visits to benchmark new projects around the country.

All attendees attending in-person and virtually also receive access, via the event platform and mobile app, to the video recordings of all the talks for two months after the event. The preliminary programme for this year's Congress will launch in early March.



To view over 2750 hours of video talks and 6000+ articles and research papers, visit: [www.salusglobal](http://www.salusglobal)

## SALUS TV

SALUS TV is our online broadcasting channel dedicated to designing for human and planetary health. Throughout the year, SALUS TV will stream live and 'on demand' content from our conferences and, 'Future Health 2050' webinar series, enabling remote access to a global audience on the latest research, practice and policy thinking.

As our professional lives become ever busier, the desire for 'on demand' content is changing the way audiences are consuming content. SALUS TV gives our audiences the choice to participate 'live' or view 'on demand' at a time that suits their schedules or time zones, extending access and reach to many more researchers, practitioners and policy thinkers around the world.



**W:** [www.salusglobal](http://www.salusglobal)

## SALUS Global Knowledge Exchange

SALUS is an entrepreneurial global media, research, publishing, events and training organisation with a vision to improve human and planetary health through the global exchange of knowledge. Our mission is to create, share and disseminate knowledge concerning the relationship between human health and the natural, built, social and technological environments.

Focusing on knowledge exchange at the intersection of science and technology, architecture, lifestyle, urbanism, and sustainable development (SALUS), we support the UN's Sustainable Development Goals by building interdisciplinary professional communities that facilitate global collaborations. We do this through a range of knowledge-based activities that promote the application and interaction of art, science, culture and innovation.



**AECOM**

**Contact:**

Richard Mann  
 Director, healthcare, science and tertiary education sector leader, Europe and India

**W:** [www.aecom.com](http://www.aecom.com)



Curing cancer is one of the fundamental challenges of the 21st century. We work in partnership with clients to design and advise on cancer care facilities that are smart, flexible, net zero, and built using modern methods of construction. We enable clinicians, researchers and scientists to work together to deliver the personalised treatment and care needed to help patients cope with diagnosis and treatment.

We never lose sight of the imperative that patient, family, clinician and staff experiences must lie at the heart of facility design. Detailed consultation with stakeholder groups and patients is critical to success. Across the UK and Ireland, we've advised on a wide range of award-winning translational research facilities that include bench-to-bed collaborations; facilities in major acute hospitals; major cancer centres; satellite radiotherapy centres; and community outpatient facilities.



**HDR**

**Contact:**

Ashley Tucker  
 Health strategic sector manager

**W:** [www.hdrinc.com](http://www.hdrinc.com)



We use the power of design thinking to reimagine space, environments, programming, planning, operations and function. We blend our deep knowledge of healthcare delivery with our understanding of how environments can shape behaviours and outcomes to create solutions for clients that respect the human impact of their work – solutions that champion human-centred design, solve real problems, make lives better, and advance wellness, wellbeing, healing and cures.

Through design and consideration of three important elements – patient care, context and community – we are working to reshape the way healthcare is perceived and delivered. Advancing health and wellness on a global scale and in local communities is at the heart of our endeavours.



**Guldmann**

**Contact:**

Lee Hubery  
 Senior project manager

**W:** [www.guldmann.com/uk](http://www.guldmann.com/uk)



**Guldmann**

The Guldmann brand is the flagship of world-class mobility equipment that provides patient moving, lifting, and positioning and rehabilitation solutions. Guldmann is a Danish firm that supplies the acute, long-term care, hospice, schools and residential markets, where patient hoists are used for transferring patients, repositioning, rehab and physiotherapy.

It has recently launched the world's only hoist system with dynamic weight control. A trainer module and positioning lock system enables patients to undertake independent movements with very little care assistance, and aids faster recovery, rehabilitation, belonging, quality of life, play, dancing, and interaction with sensory equipment. Guldmann is a specialist in creating more of what it likes to call 'Time To Care', delivering a number of solutions that meet lifting and moving requirements across the full spectrum of healthcare environments.



**Contact:**

Jason Gibbings  
IHP framework director

**W:** [www.ihprojects.co.uk](http://www.ihprojects.co.uk)



STUDY TOUR PARTNER

## Integrated Health Projects (IHP)

As an established integrated alliance, IHP combines the stability, capacity, coverage and experience of Vinci Building UK and Sir Robert McAlpine. Both are major organisations working in the UK and abroad, focused on development, construction and facilities management.

IHP was formed in April 2003 to act as a principal supply chain partner for the ProCure21 NHS Framework. It has secured a place on all subsequent iterations, including the ProCure 23 and Building for Wales frameworks, while also supporting the delivery of National Hospital Programme cohorts 1 and 2. IHP is committed to achieving excellence for NHS clients, working with them to provide best value for money through imaginative and sustainable solutions, which offer capital, operational and life-term efficiencies. IHP is a pioneer in standardisation and delivering low-carbon solutions across the building lifecycle.

**Contact:**

Ellen Nowark  
Joint head of arts

**W:** [www.cuh.nhs.uk/about-us/our-structure/other-departments/cuh-arts](http://www.cuh.nhs.uk/about-us/our-structure/other-departments/cuh-arts)

## Cambridge University Hospital Arts

CUH Arts is Cambridge University Hospital's art-in-health programme, dedicated to shaping care through creativity.

CUH Arts develops live and participatory programmes – bringing artists, musicians and dancers to the bedside of patients; offering wellbeing sessions to staff; and commissioning artists to create new works for our hospital environments.

CUH Print Portfolio offers the opportunity for people to own their own beautiful and meaningful artwork, with all proceeds going directly to supporting our arts programme.

**Contact:**

Dame Laura Lee  
Chief executive officer

**W:** [www.maggies.org](http://www.maggies.org)

## Maggie's

Maggie's provides free cancer support and information in centres that offer a breathing space away from the hospital – where a person living with cancer can meet people who understand what they're going through, or just take a moment to gather their thoughts.

Maggie's helps people take back control when cancer turns life upside down. The centres' professional teams provide expert help and information, and run groups and activities, all designed to make coping with cancer easier, and the evidence-based programme of support has been shown to improve physical and emotional wellbeing during treatment and recovery. Each centre is a calm, friendly and welcoming place, full of light and warmth. They all have a kitchen table at their heart, offer glimpses and views of nature and provide thoughtful spaces to find privacy, as well as places to come together as a group.

# Leaders in healthcare professional services

We work in partnership with our clients to design and advise on cancer care facilities that are smart, sustainable, flexible, and adaptable. Delivering major projects and programmes of work to help solve their most complex challenges.

## Satellite Radiotherapy Centre at Nevill Hall Hospital, Abergavenny

Our engineers and sustainability advisors are helping to improve cancer radiotherapy services, enabling them to be delivered closer to the homes of residents South Wales.