



IX CBDEH

**CONGRESSO BRASILEIRO PARA O DESENVOLVIMENTO
DO EDIFÍCIO HOSPITALAR**

CONEXÃO E DIVERSIDADE NOS ESPAÇOS DE SAÚDE

Centro de Convenções de Pernambuco - Auditório
Eixo 2 - Pandemias e epidemias: desafios e oportunidades.
Conferência 2 on Thursday 20th October 2022, 18:15 - 19:15

Título do trabalho:

HEALING ARCHITECTURE: the experience based approach for re-thinking the Next Generation Hospital

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President of the Italian Center for Hospital Building and Design [CNETO]

President of the “Urban Public Health” of the European Public Health Association [EUPHA]

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Design&Health Lab. POLITECNICO DI MILANO

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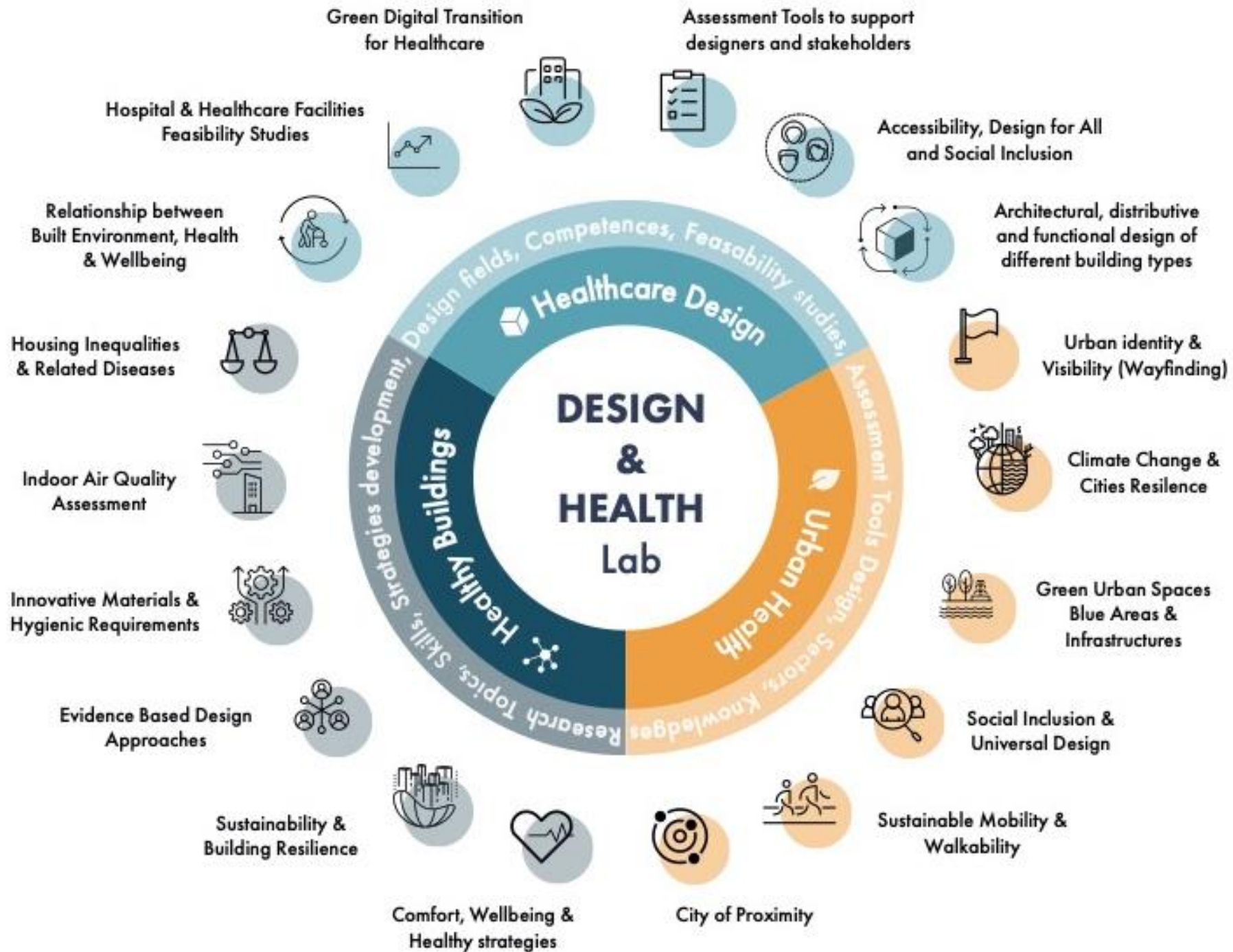
Erica Brusamolin
PhD Candidate



Yong Yu
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Stefano Arruzzoli
PhD Candidate



PAST

THE EVOLUTION OF HEALTHCARE FACILITIES

VENICE
LAZARET
1423



CA GRANDA
HOSPITAL
MILANO
1456



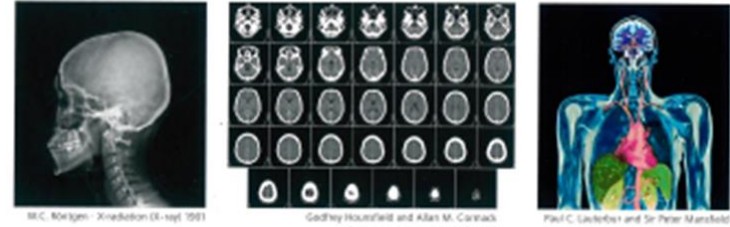
Hospital Architecture
Nickl-Weller, 2010



Historical Review



Under-pressure chamber for thoracic surgery
 Diagnostic radiology
 Bacteriology and microbiology
 Cellular pathology
 Modern Nursing
 Medical microbiology
 Practical hygiene
 Hygiene / disinfection standards in clinics



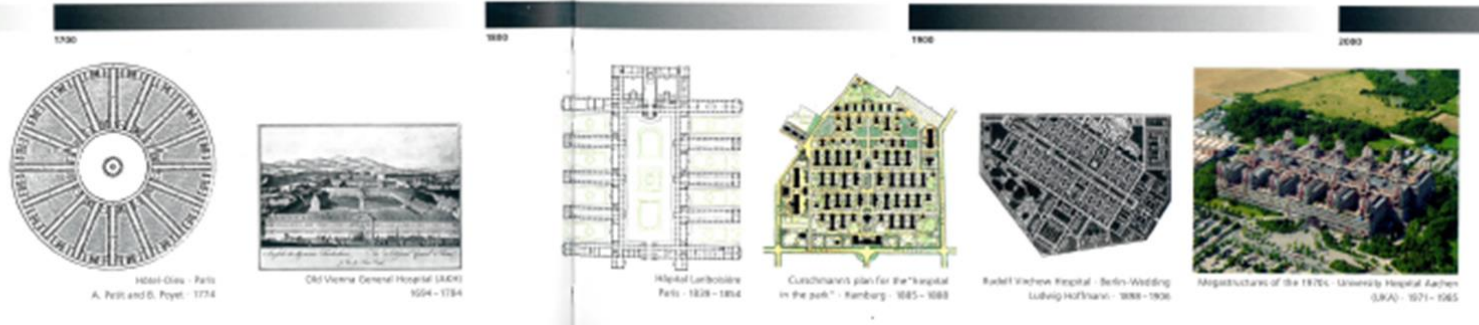
Magnetic Resonance Imaging (MRI)
 Computer Tomography (CT)

Ernst Ferdinand Sauerbruch
 Wilhelm Conrad Roentgen
 Robert Koch
 Rudolf Ludwig Karl Virchow
 Florence Nightingale
 Louis Pasteur
 Max Josef von Pettenkofer
 Ignaz Philipp Semmelweis
 Sir Peter Mansfield - Paul C. Lauterbur
 Albert Michael Cormack - Geoffrey Hounsfield

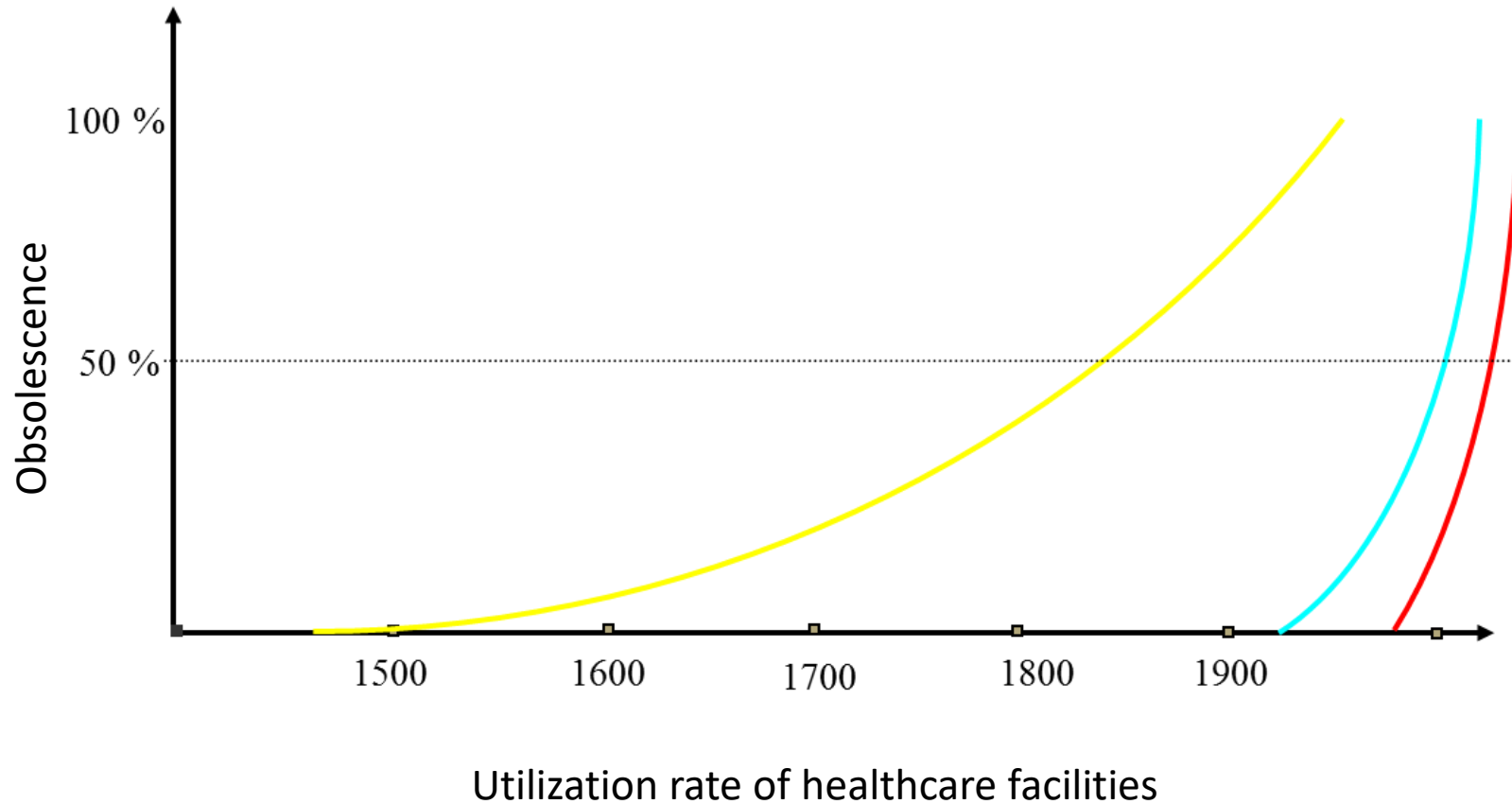


Healing Architecture

Technical Progress



THE OBSOLESCENCE OF HEALTHCARE FACILITIES



European scenario

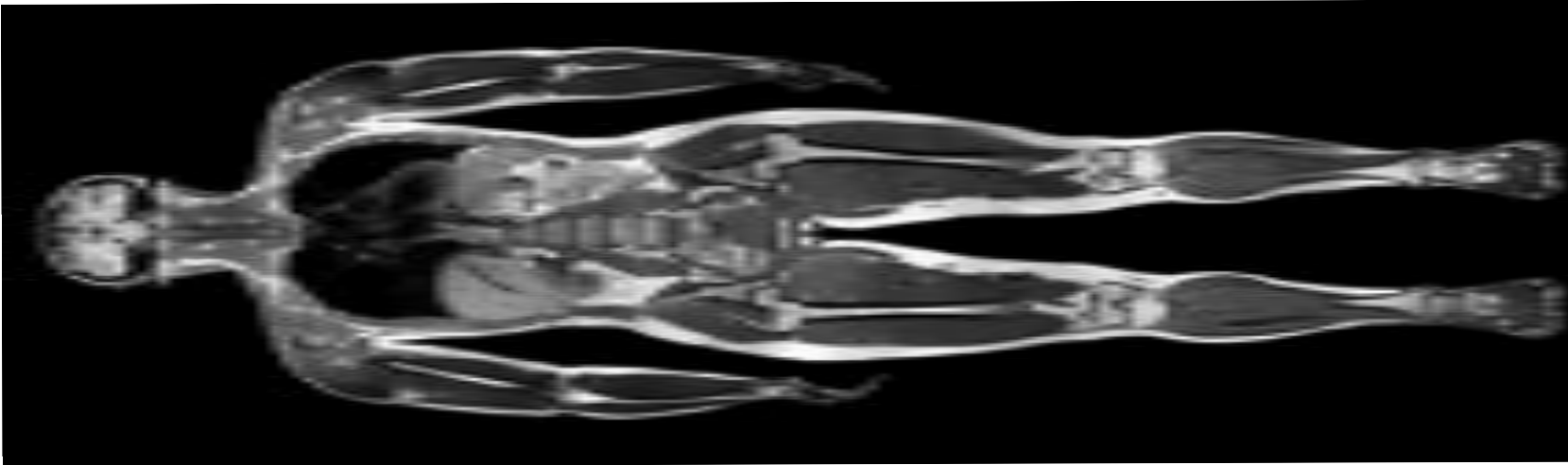
40-50 YEARS
HOSPITAL LIFE CYCLE

10-20 YEARS
DESIGN AND BUILDING TIME
NEW HOSPITAL

70% OF ITALIAN
HOSPITALS
HAVE MORE THAN 50 YEARS
(OPTIMAL LIFE SPAN) INAIL, 2012

50% OF ITALIAN
HOSPITALS
CANNOT HOST CURRENT
ORGANIZATIONAL MODELS
IRES, 2017

THE EVOLUTION OF HEALTHCARE FACILITIES



PREDICTIVE MEDICINE

"In the next 10 years.
will change more than
80%

of knowledge and
of methods of diagnosis,
of therapy and especially
of prevention."

M. Mauri, Polisanità,
Politecnico di Milano

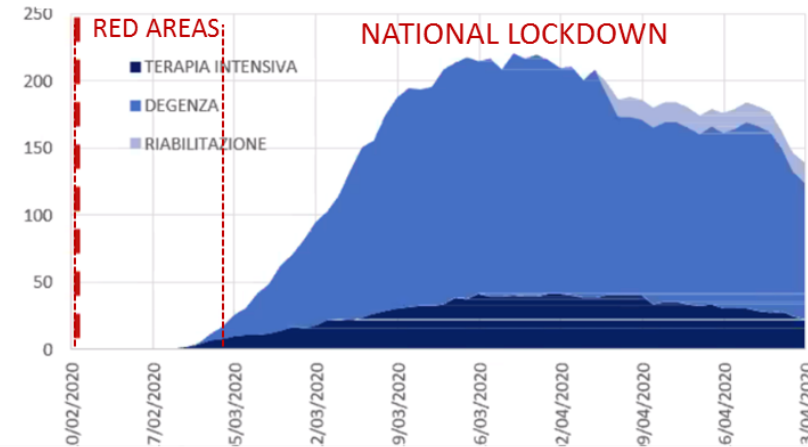


PRESENT

THE COVID-19 CHALLENGE NEW PERSPECTIVE IN THE HEALTHCARE SCENARIO



Increase of COVID-19 patients

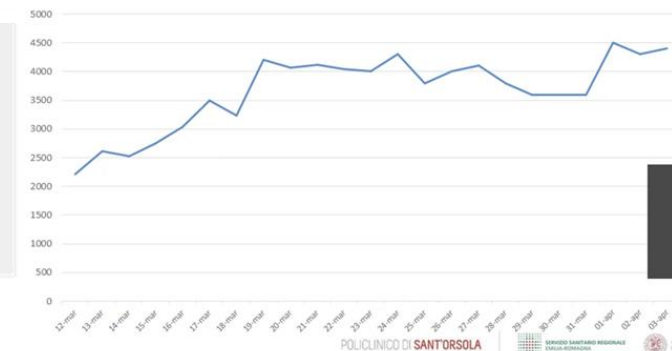


Ing. Simone Arduca – Humanitas Research Hospital



Increase of Hoxigen request

Most adaptable hospital spaces for patients isolation	
Reanimation	85,7%
Operating rooms	71,4%
Open spaces	28,6%
Day hospital	14,3%



Ing. Daniela Pedrini



Ing. Matteo Persico – Ospedale Papa Giovanni XXIII Bergamo

THE COVID-19 CHALLENGE NEW DESIGN PERSPECTIVES



**POLITECNICO
MILANO 1863**

DIPARTIMENTO DI ARCHITETTURA,
INGEGNERIA DELLE COSTRUZIONI
E AMBIENTE COSTRUITO

DECALOGUE DABC-POLIMI RESILIENT HOSPITALS:

1. STRATEGIC LOCALIZATION
2. BUILDING TYPOLOGY
3. FLEXIBILITY / RESILIENCE
4. FUNCTIONAL PLANNING
5. SPECIFIC FUNCTIONAL AREAS
6. USER-CENTERDNES
7. INDOOR AIR QUALITY
8. ECO-ACTIVE MATERIALS
9. DIGITAL INNOVATION
10. HEALTH PROMOTION

OSSERVATORI DABC

OSPEDALI RESILIENTI

Decalogo per la Progettazione di Nuovi Ospedali
e la Rifunionalizzazione di Ospedali Esistenti

1 LOCALIZZAZIONE STRATEGICA



2 PROMOZIONE DELLA SALUTE



3 ASSETTO TIPOLOGICO



4 FLESSIBILITÀ



5 PROGETTO FUNZIONALE



6 AREE FUNZIONALI SPECIFICHE



7 QUALITÀ DELL'ARIA



8 MATERIALI ECO-ACTIVI



9 INNOVAZIONE DIGITALE



10 USER-CENTERDNES



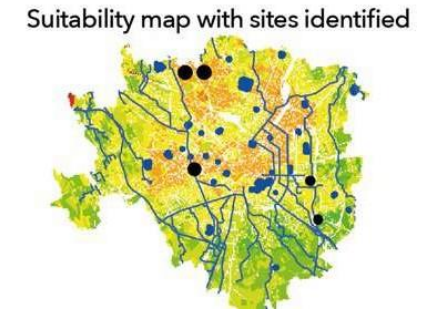
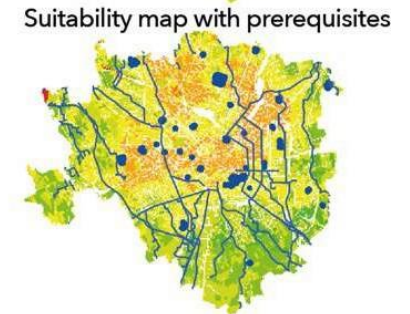
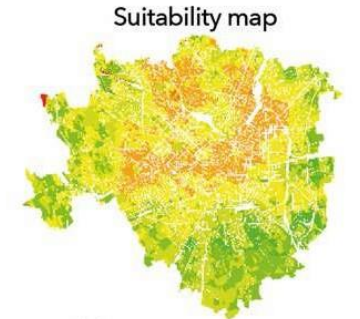
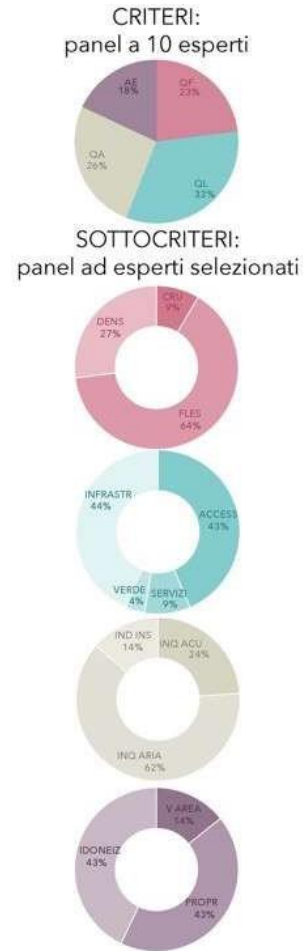
THE COVID-19 CHALLENGE

1. STRATEGIC LOCALIZATION



KEYWORDS:

- Accessibility
- Expansion areas
- Different access



THE COVID-19 CHALLENGE

1. STRATEGIC LOCALIZATION



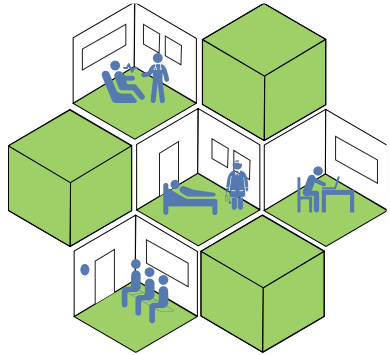
THE COVID-19 CHALLENGE

1. STRATEGIC LOCALIZATION



THE COVID-19 CHALLENGE

2. FLEXIBILITY / RESILIENCE

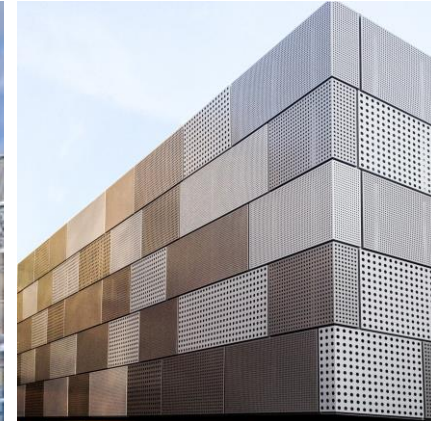


KEYWORDS:

- Resilience
- Adaptability
- Exchangeability
- Lung spaces
- Pre-fabrication



Martini Hospital, Groningen



Neurologic
Institute C. Besta,
Milano Italy



THE COVID-19 CHALLENGE

2. FLEXIBILITY / RESILIENCE

Martini Hospital, Groningen, SEED



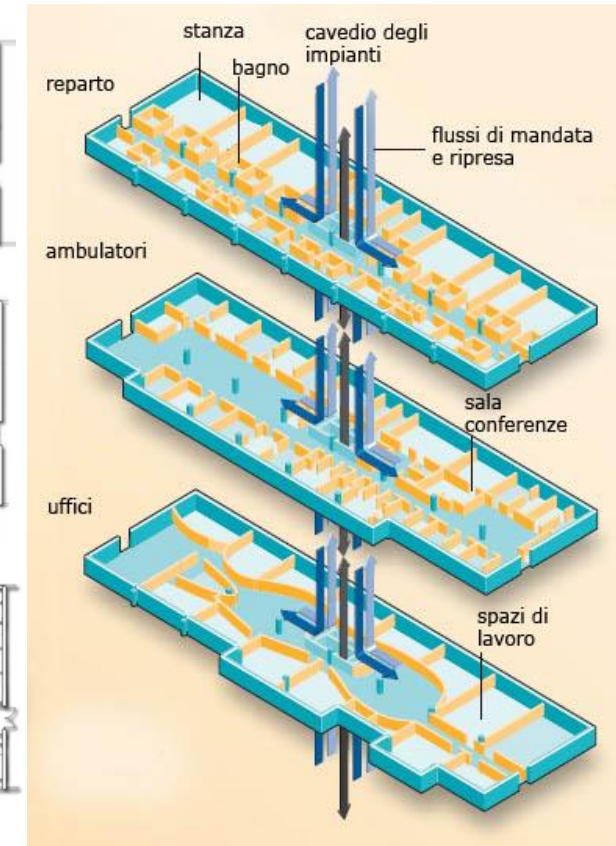
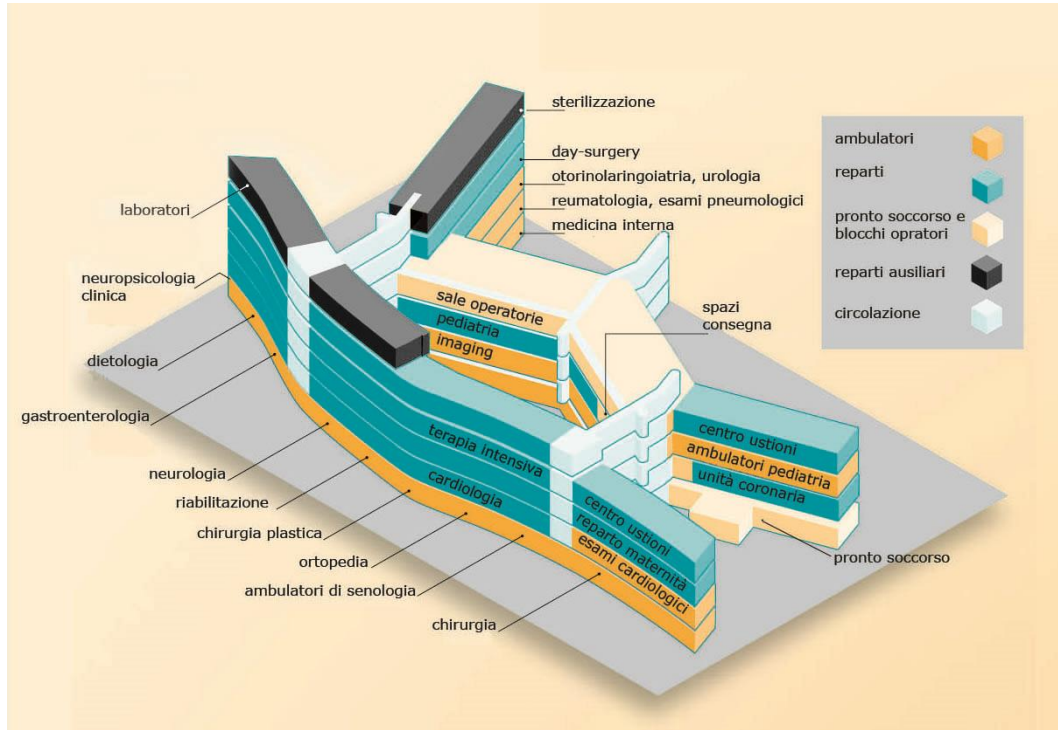
Stefano Capolongo

POLITECNICO DI MILANO

THE COVID-19 CHALLENGE

2. FLEXIBILITY / RESILIENCE

Martini Hospital, Groningen, SEED



THE COVID-19 CHALLENGE

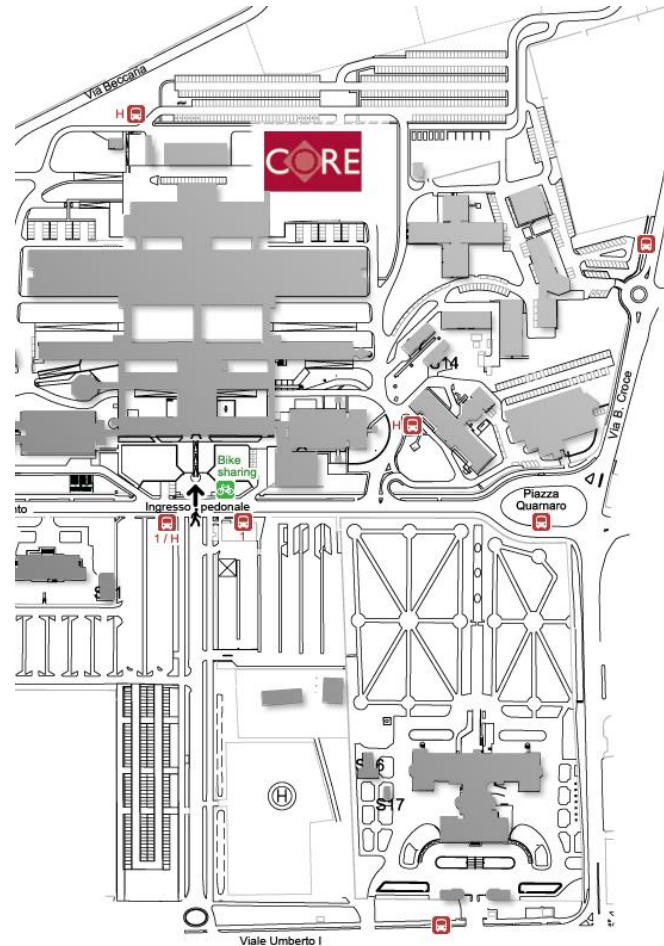
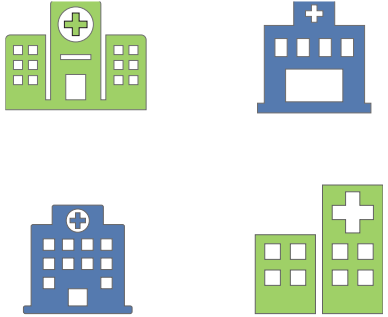
2. FLEXIBILITY / RESILIENCE

Sammy Ofer Hearth Building, Tel-Aviv, Israel



THE COVID-19 CHALLENGE

3. BUILDING TIPOLOGY



CORE / MIRE, Reggio Emilia

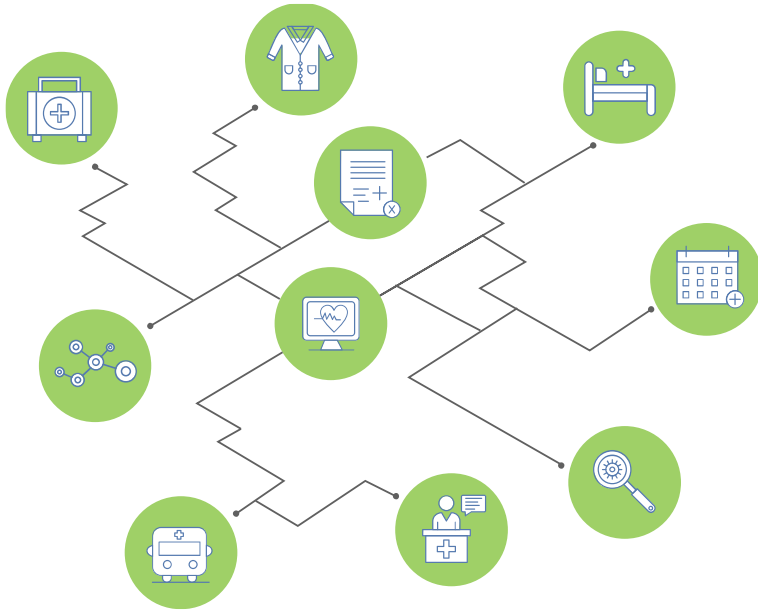


KEYWORDS:

- Satellite buildings
- Autonomus nucleus
- Compartments

THE COVID-19 CHALLENGE

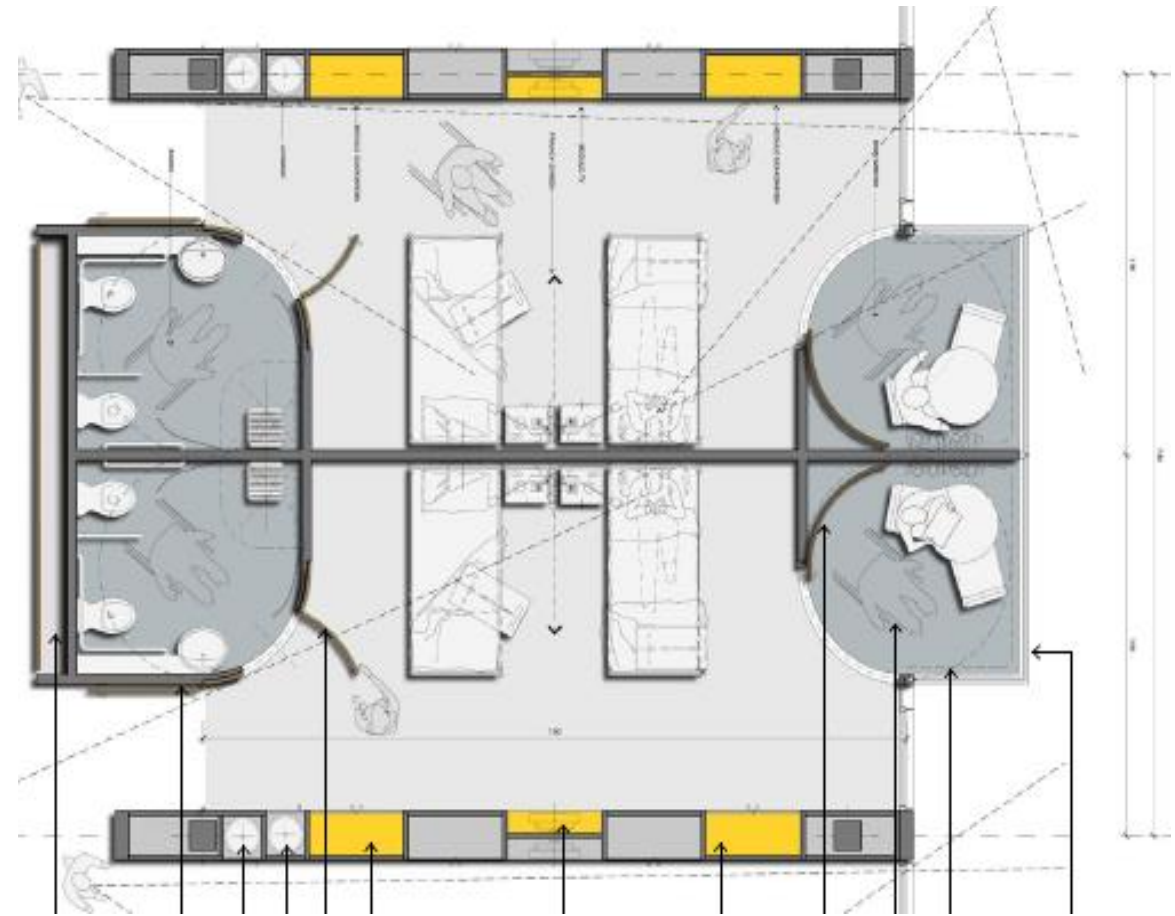
4. FUNCTIONAL PLANNING



KEYWORDS:

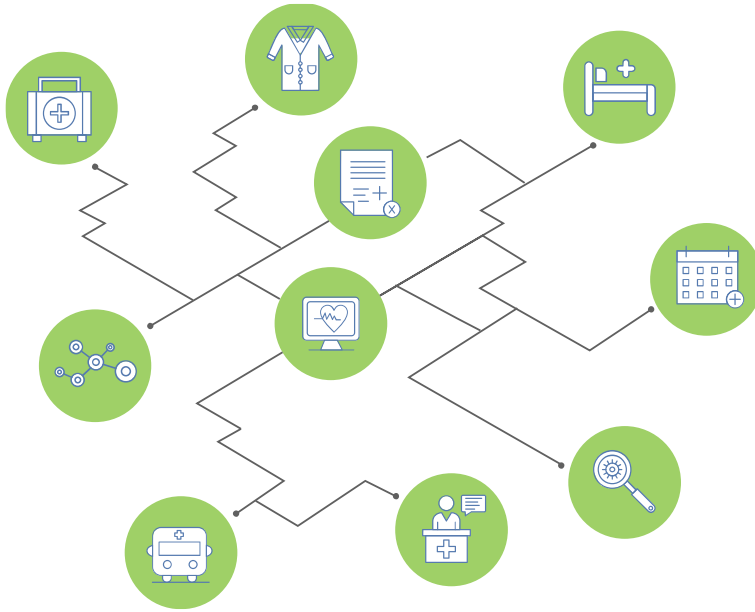
- Single patient rooms (+1)
- Fluxes and path differentiations
- Waiting room dimension

Città della Salute
RPBW, Milano



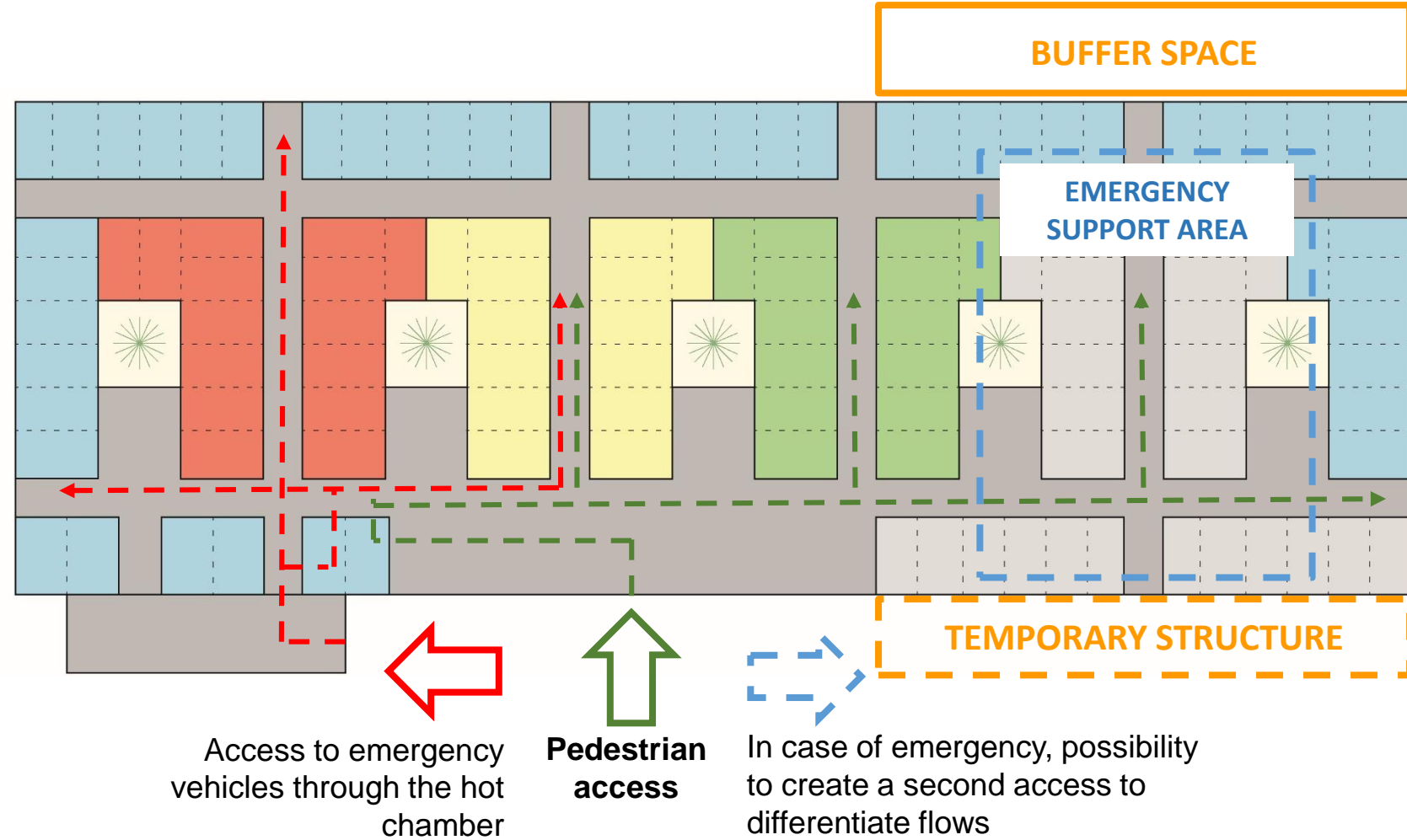
THE COVID-19 CHALLENGE

5. SPECIFIC FUNCTIONAL AREAS



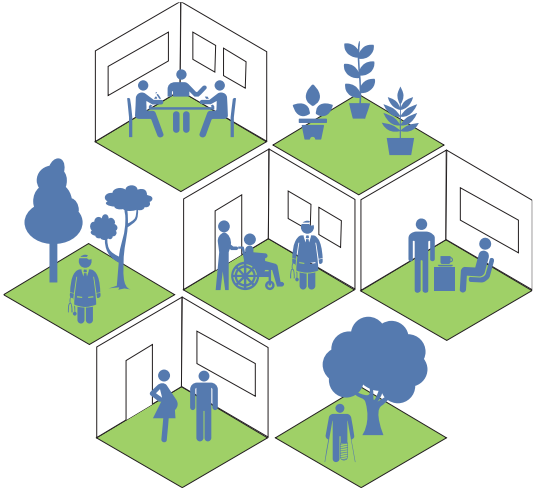
KEYWORDS:

- Emergency Department
- Intensive Care Unit



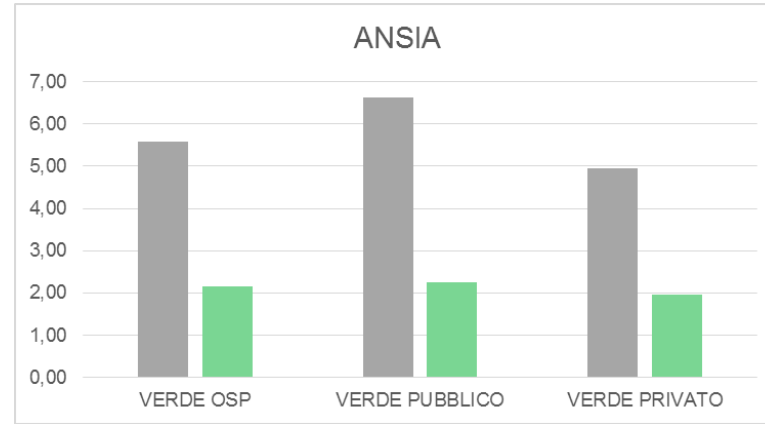
THE COVID-19 CHALLENGE

6. USER CENTEREDNESS

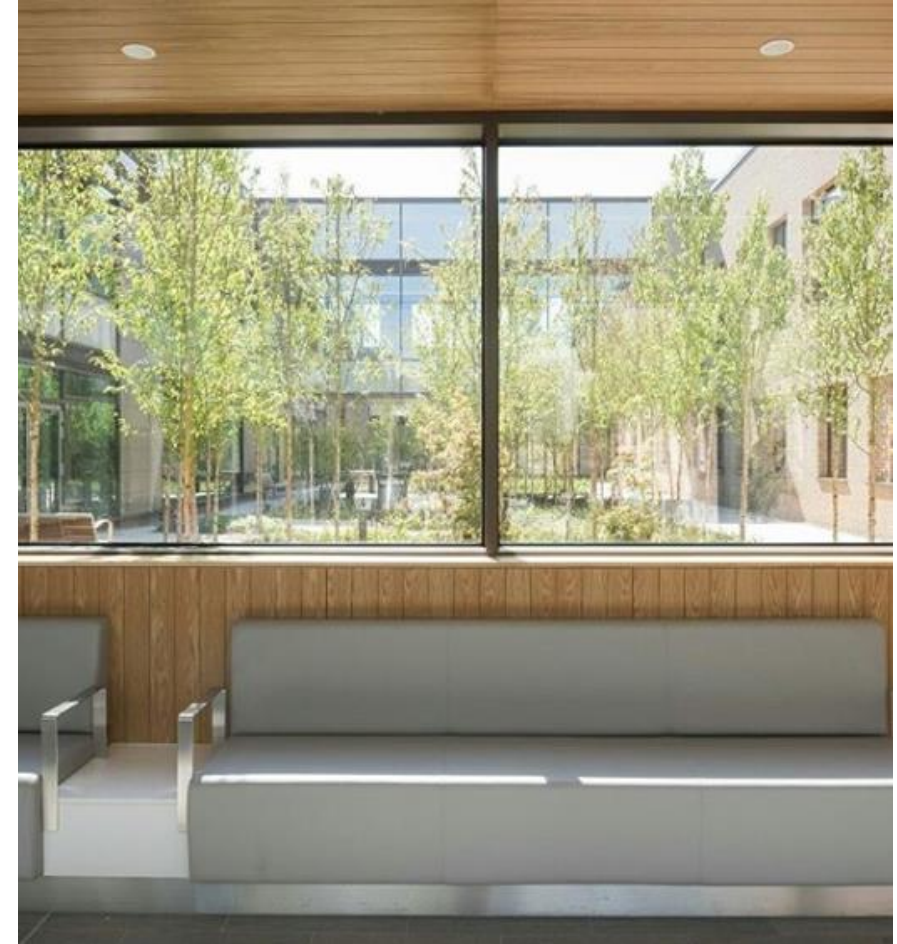


KEYWORDS:

- Amenities dedicated to staff
- Presence of green areas & *Healing Gardens*

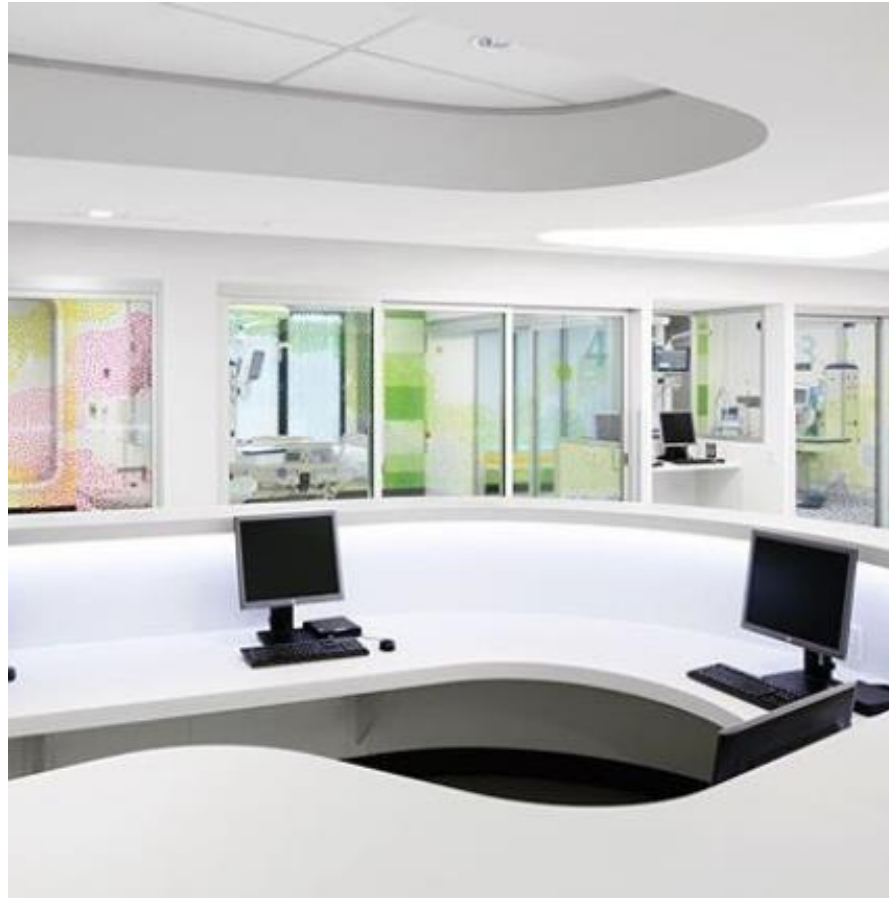


A POLIMI survey showed during lockdown, how 30 min of time in the hospital green for healthcare staff greatly reduces the state of anxiety and stress.



THE COVID-19 CHALLENGE

6. USER CENTEREDNESS



THE COVID-19 CHALLENGE

6. USER CENTERDENESS



THE COVID-19 CHALLENGE

6. USER CENTEREDNESS



THE COVID-19 CHALLENGE

6. USER CENTEREDNESS

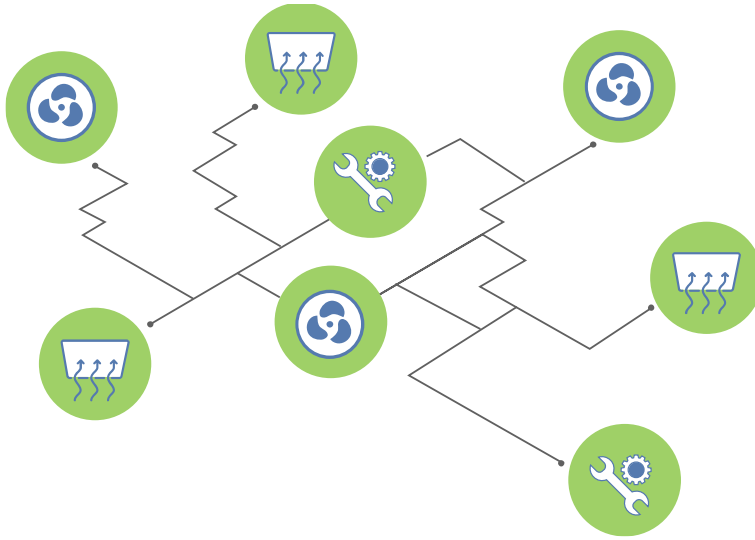


Stefano Capolongo

POLITECNICO DI MILANO

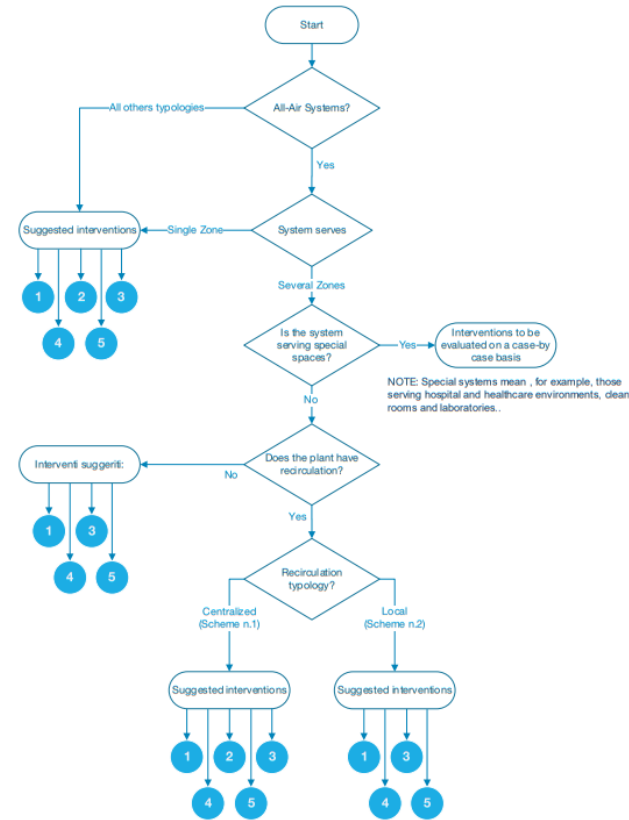
THE COVID-19 CHALLENGE

7. INDOOR AIR QUALITY



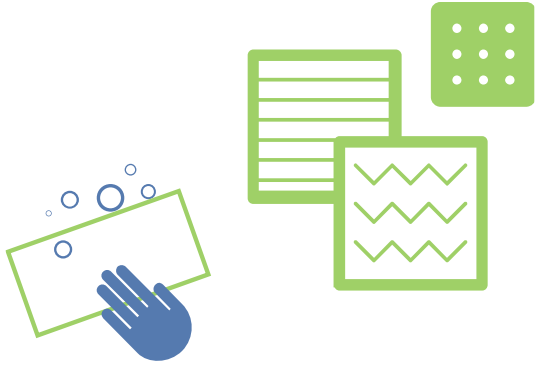
KEYWORDS:

- Ventilation systems
- Products' emissions



THE COVID-19 CHALLENGE

8. INNOVATIVE AND ECO-ACTIVE MATERIALS



KEYWORDS:

- antiviral materials
- antibacterial materials
- photocatalytic materials
- suitable cleaning products



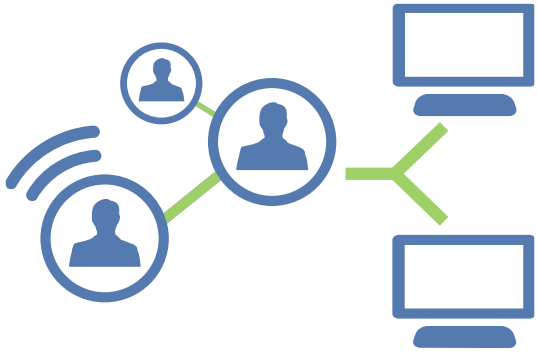
THE COVID-19 CHALLENGE

8. INNOVATIVE AND ECO-ACTIVE MATERIALS



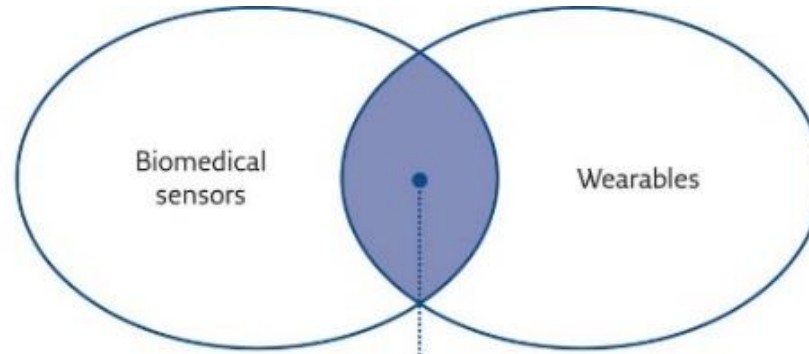
THE COVID-19 CHALLENGE

9. DIGITAL INNOVATION



KEYWORDS:

- installations
- ventilation systems
- diffused telemedicine
- Wearables systems
- sensory rooms



Wearable biomedical sensors



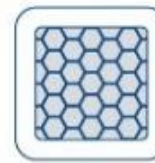
Activity trackers



Smart watches



Smart clothing



Patches/
tattoos



Ingestibles/
smart implants



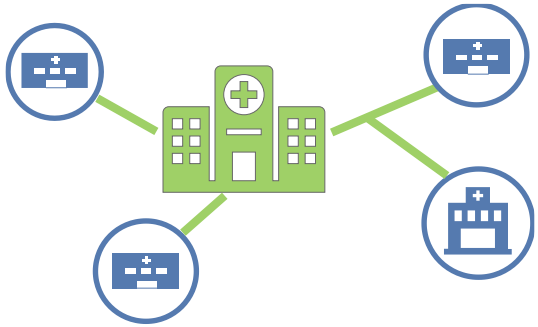
THE COVID-19 CHALLENGE

9. DIGITAL INNOVATION



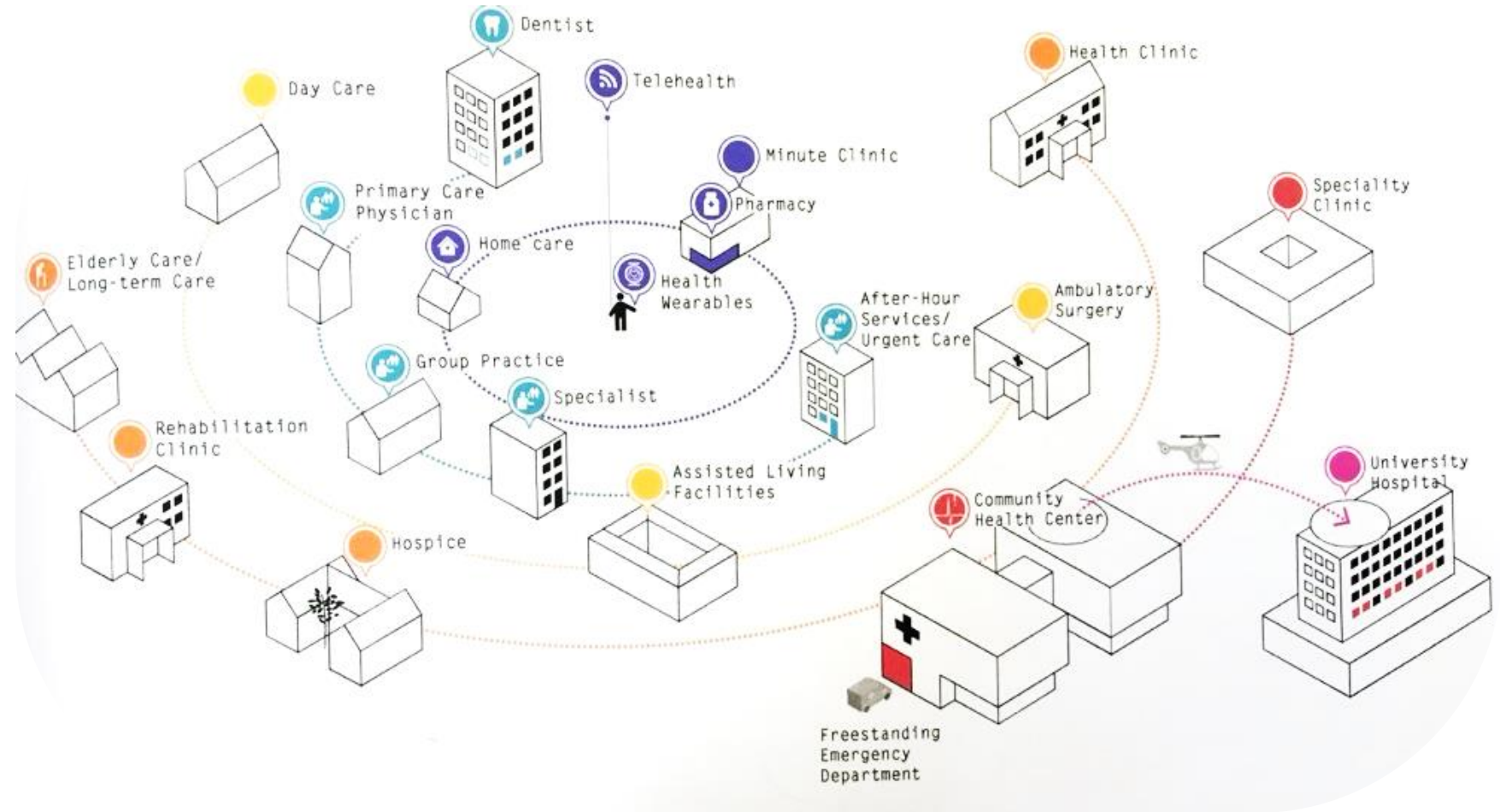
THE COVID-19 CHALLENGE

10. HEALTH PROMOTION AND PREVENTION



KEYWORDS:

- Community Houses
- Community Hospitals
- Rehabilitation Centers



THE COVID-19 CHALLENGE

10. HEALTH PROMOTION AND PREVENTION

Barts' Maggie Center, London, UK



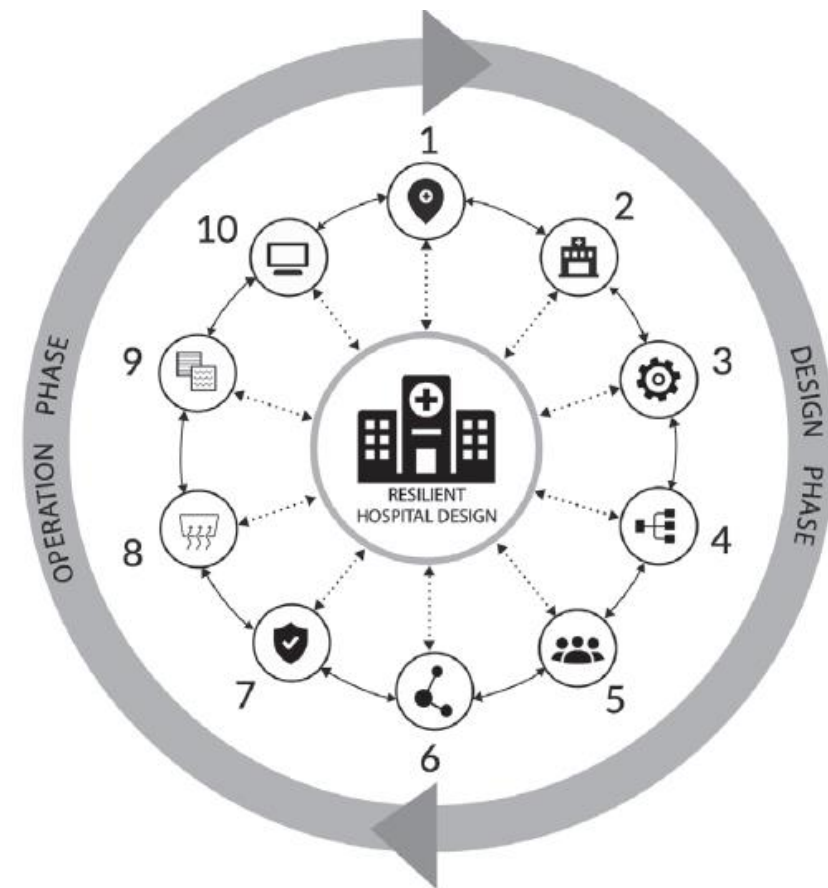
Center for Cancer and Health, Copenhagen, Denmark



COVID-19 and Healthcare Facilities. A Decalogue of Design Strategies for Resilient Hospitals

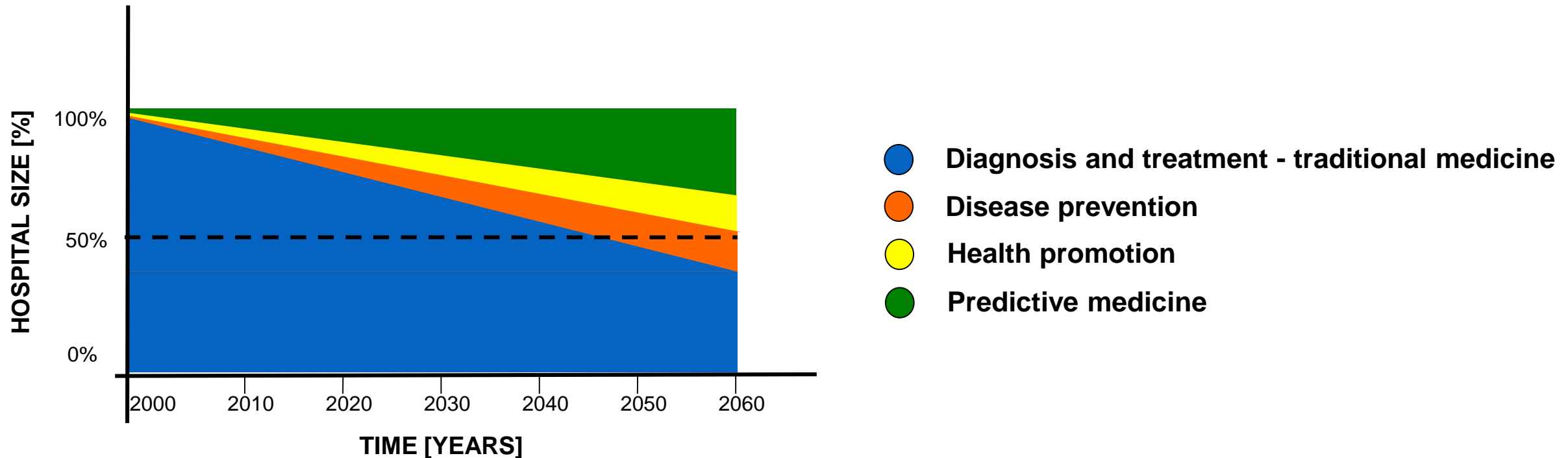
*Stefano Capolongo¹, Marco Gola¹, Andrea Brambilla¹, Alessandro Morganti¹,
Erica Isa Mosca¹, Paul Barach^{2,3,4}*

¹Politecnico di Milano, Department of Architecture, Built environment and Construction engineering (DABC), Design and Health LAB, Italy; ²Department of Pediatrics, Wayne State University School of Medicine, Detroit, MI, United States of America; ³Jefferson College of Population Health, Philadelphia, PA, United States of America; ⁴Sigmund Freud University, Wien, Austria

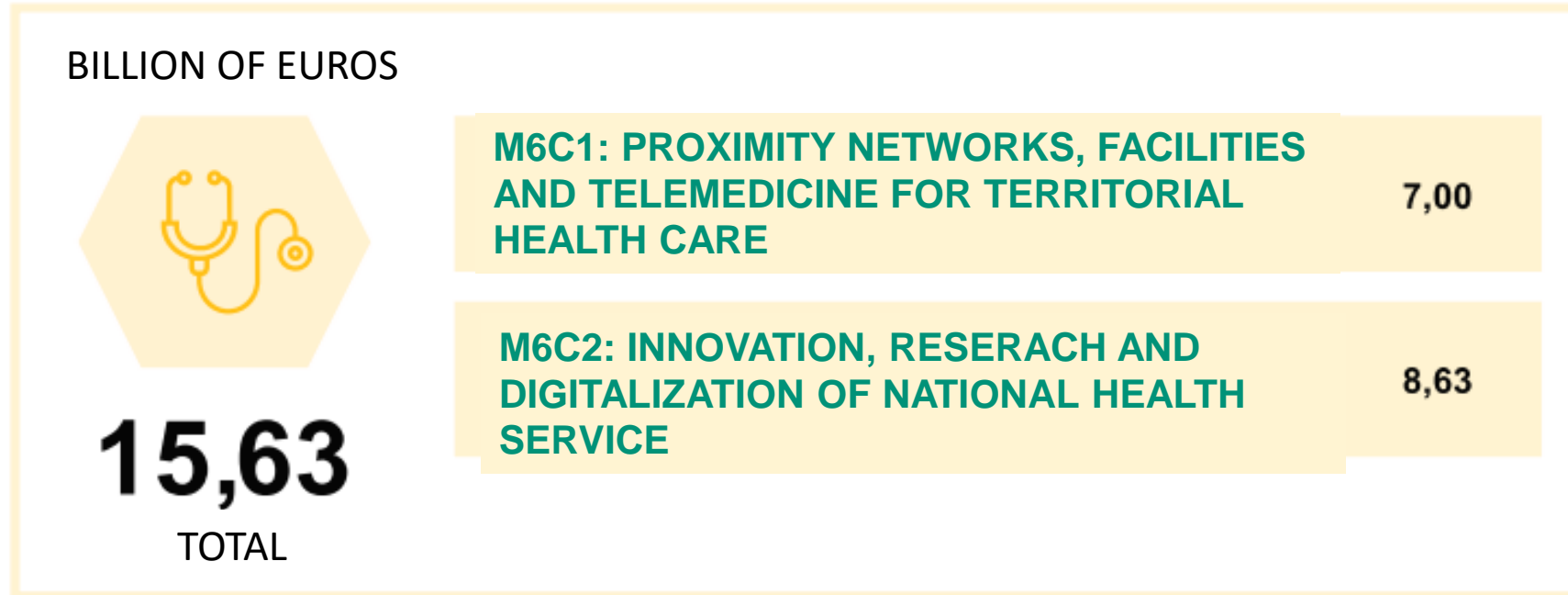


FUTURE

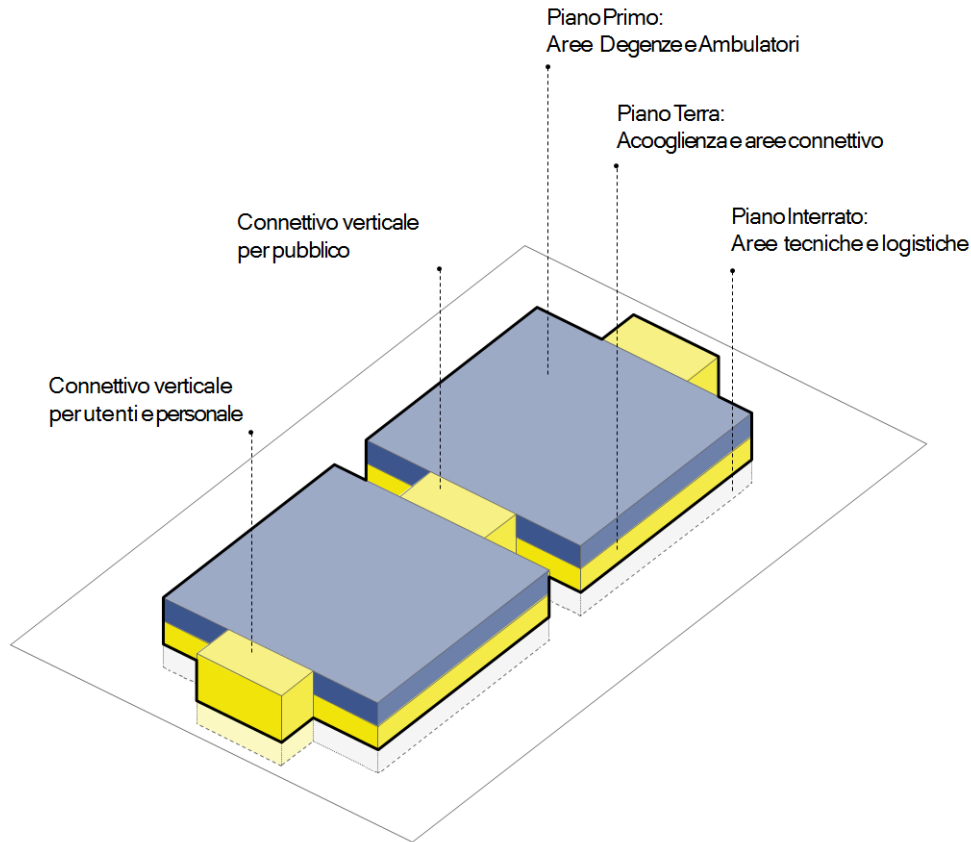
REORGANIZATION OF HOSPITAL FACILITIES OVER TIME



MISSION 6: HEALTH



MISSION 6: HEALTH / M6C1: PROXIMITY NETWORKS, FACILITIES AND TELEMEDICINE FOR TERRITORIAL HEALTH CARE



SCHEMA 3D

Proximity networks, intermediate structures and telemedicine for territorial health care

The interventions of this component aim to strengthen the services provided on the territory thanks to the strengthening and creation of territorial structures and garrisons (such as **Community Homes and Community Hospitals**), the strengthening of home care, the development of telemedicine and a more effective integration with all socio-health services

Investment 1: Community homes and personal care

Investment 2: Home as the first place of care, home care and telemedicine

Investment 3: Development of intermediate care

MISSION 6: HEALTH / M6C2: INNOVATION, RESEARCH AND DIGITALIZATION OF THE NATIONAL SERVICE



Ospedale Pediatrico Meyer (Italia), 2006

Innovation, research and digitalization of the National Health Service

the measures included in this component will permit the renewal and modernization of existing technological and digital structures, the completion and diffusion of the Electronic Health File (Fascicolo Sanitario Elettronico - FSE), an improved capacity for the provision and monitoring of the Essential Levels of Care (Livelli Essenziali di Assistenza - LEA) through more effective information systems. Significant resources are also earmarked for scientific research and to promote technology transfer, as well as to strengthen the skills and human capital of the NHS, including through the strengthening of staff training.

Investment 1.1: Modernization of the hospital technological and digital park

Investment 1.2: Towards a safe and sustainable hospital

Investment 2.1: Enhancement and strengthening of biomedical research in the NHS

Investment 2.2: Development of technical, professional, digital and managerial skills of health system staff

NEW CHALLENGES FLEXIBILITY ASSESSMENT FOR HOSPITAL FACILITIES



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DIPARTIMENTO DI ARCHITETTURA,
INGEGNERIA DELLE COSTRUZIONI
E AMBIENTE COSTRUITO

OFAT

OPTIMIZED FLEXIBILITY ASSESSMENT TOOL FOR
HOSPITAL PLANNERS

EVALUATION OF FLEXIBILITY FOR



Healthcare Facilities during Designing
and Planning Phase



Existing Facilities to understand to
what extent they satisfy the criteria



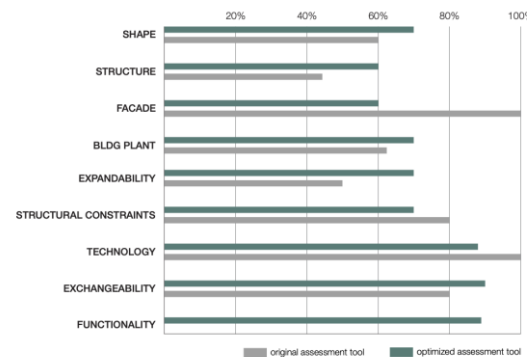
International Journal of
*Environmental Research
and Public Health*



Article

Flexibility during the COVID-19 Pandemic Response: Healthcare Facility Assessment Tools for Resilient Evaluation

Andrea Brambilla ^{1,2,*}, Tian-zhi Sun ¹, Waleed Elshazly ³, Ahmed Ghazy ³, Paul Barach ^{1,4,5}, Göran Lindahl ^{1,2}
and Stefano Capolongo ¹



NEW CHALLENGES ASSESSMENT OF HOSPITAL SUSTAINABILITY



DIPARTIMENTO DI ARCHITETTURA,
INGEGNERIA DELLE COSTRUZIONI
E AMBIENTE COSTRUITO



MACRO AREA	1. SOCIAL QUALITY (S)	2. ENVIRONMENTAL QUALITY (E)	3. ORGANIZATIONAL QUALITY (O)
CRITERION	1.1 Sustainable Accessibility (SA)	2.1 Sanitization and Policies (SP)	3.1 Patient Safety (PS)
INDICATOR (11)	Public Transport Accessibility (PTA)	Sustainable Food Provision (SFP)	Clinical Risk Management (CRM)
DESCRIPTION	How to evaluate the accessibility of the hospital building and its surroundings for people with reduced mobility.	How to evaluate the sustainability of the hospital's food provision.	How to evaluate the hospital's clinical risk management.
SOURCE	LEED for Healthcare, Capolongo et al., 2019, "Evidence-based Hospital Design".	Capolongo et al., 2019, "Measuring Hospital Quality".	Capolongo et al., 2020, "Validation of a Multiple Criteria Tool for Healthcare Facilities Quality Evaluation".
INDICATOR (12)	3.4 LE	3.5 TI	3.6 FM
INDICATOR (13)	1.1 SA	1.2 SE	1.3 CI
INDICATOR (14)	1.4 SI	1.5 HP	1.6 VE
INDICATOR (15)	2.1 PS	2.2 WM	2.3 EM
INDICATOR (16)	2.4 IC	2.5 WE	3.1 PSa
INDICATOR (17)	3.1 PSa	3.2 SM	3.3 FP

SUSTHEALTH 2.0



Brambilla, Rebecchi & Capolongo Evidence-based Hospital Design, 2019
 Brambilla, Buffoli & Capolongo Measuring Hospital Qualities, 2019
 Brambilla, Lindahl, Dell'Ovo & Capolongo Validation of a Multiple Criteria Tool for Healthcare Facilities Quality Evaluation, 2020



Online at sust.health

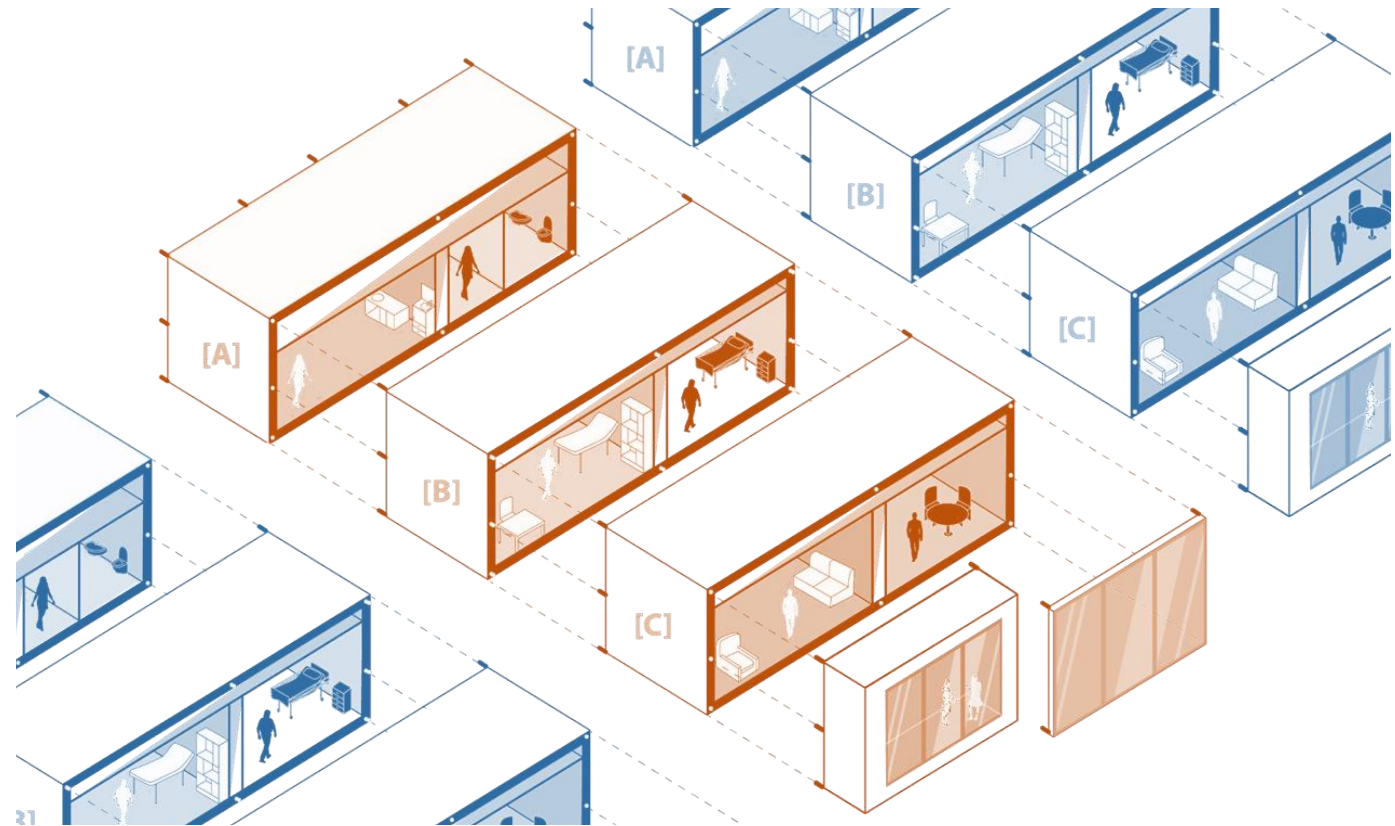
NEW CHALLENGES OPEN ROOM



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E AMBIENTE COSTRUITO

Capolongo et Al, Alta Scuola Politecnica XI-XIII cycle concept development
Brambilla, Finalist at Medaglia D'Oro all'Architettura – section Young, 2018
Gola et Al, Open Building Conference, 2019
AIA Academy of Architecture for Health, 2017



NEW CHALLENGES DESIGN FOR ALL



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INGEGNERIA DELLE COSTRUZIONI
E AMBIENTE COSTRUITO

Evaluating «Design for All» in Healthcare Environments. A new tool to assess Physical, Sensory-cognitive and Social quality – Design for All A.U.D.I.T. (Assessment Usability Design & Inclusion Tool).

Erica Isa Mosca (2021) Politecnico di Milano.

PhD program in Architecture, Built environment and Construction engineering.



15%

EU population has PERMANENT limitations



30%

EU population has TEMPORARY limitations



45%

EU population has SITUATIONAL limitations



**Fattori
FISICI
SPAZIALI**



**Fattori
SENSORIALI
COGNITIVI**



**Fattori
SOCIALI**

NEW CHALLENGES MOBILE HEALTHCARE: FASTCARE



**POLITECNICO
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INGEGNERIA DELLE COSTRUZIONI
E AMBIENTE COSTRUITO



THE CONTEXT

NON COMMICABLE DISEASE **63%** OF THE 57MILLION DEATH OCCURED IN 2015

PROBABILITY OF DYING PREMATURELY FROM NON-COMMUNICABLE DISEASES



PRINCIPAL CAUSES OF NON-COMMUNICABLE DISEASES



THE PROJECT

CONCEPT

In the last 10 years the number of people that use the train as means of transport is increasing, and in the future will be more. **We spend more time than we think in the trains and the target of the project is to make that time useful.** This is the starting point of the concept of **FASTCARE**. The concept is based on 3 steps: Re-use a standard wagon/ make a cut on the lateral facade/ insert the Fastcare modules. **The standard dimension of a wagon is a key point to create a project that could work everywhere.**



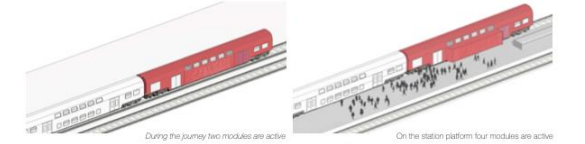
DIFFERENT SCENARIO - DIFFERENT COMBINATIONS

FAST CARE is composed by four modules of different colors. **Each color has a different function.** According the scenario there is the possibility to make different combinations. Each module is completely independent. The modules are joint together with a metal connector.



FUNCTION DURING THE JOURNEY AND STATIONARY

The wagon works in both situation: during the journey all the modules are closed for logical reason of space. In this situation only two modules works. When the train stops at the station is possible to open one of the two side of the wagon to have all four modules actives



PLAN - WAGON WHEN TWO MODULES ARE OPEN



NEW CHALLENGES MASSIVE VACCINATION CENTERS



Validation Checklist for Massive Vaccination Centers |

Checklist di Validazione dei Centri Vaccinali Massivi

Place Luogo	Date Data

Part 1: General structural requirements | Parte 1: Requisiti strutturali generali

CRITERIA CRITERI	INDICATORS INDICATORI
Typology Tipologia	<p>The facility has large internal areas without fixed vertical partitions or with easy removable ones La struttura possiede ampie aree interne senza partizioni verticali fisse o con partizioni facilmente rimovibili</p> <p>The facility is completely covered La struttura è interamente coperta</p> <p>The area is adequate to the inclusion of boxes with regular dimension in variable number L'area si presta all'inserimento di box di dimensione regolare in numero variabile</p>
Technological Systems Impianti	<p>There are technological elements for fire prevention and safety Sono presenti elementi tecnologici per la prevenzione di incendi</p> <p>There are standard-compliant electric/hydraulic and ventilation systems Sono presenti impianti elettrici/idraulici e di ventilazione conformi alle normative vigenti</p> <p>There is auxiliary power system E' presente un impianto di generazione ausiliaria</p> <p>Visibility through natural and/or artificial lighting is guaranteed during all times of activity La visibilità tramite illuminazione naturale o artificiale è garantita in tutte le fasce orarie in cui il centro vaccinale è attivo</p> <p>Existing ventilation systems allows the management of adequate air exchanges rate inside the environments I sistemi di ventilazione esistenti permettono di garantire all'interno degli ambienti la corretta gestione dei ricambi d'aria</p> <p>There is a data network distribution facility E' presente un impianto di distribuzione delle rete dati</p>
General Layout General Layout	<p>The general layout is composed by various areas: accoglienza, accettazione, anamnesi, iniezione, osservazione Il layout generale è composto da varie aree: accoglienza, accettazione, anamnesi, iniezione, osservazione</p>

Acta Biomed. 2021; 62(1): 1-10. DOI: 10.23750/abm.v92iS6.12229

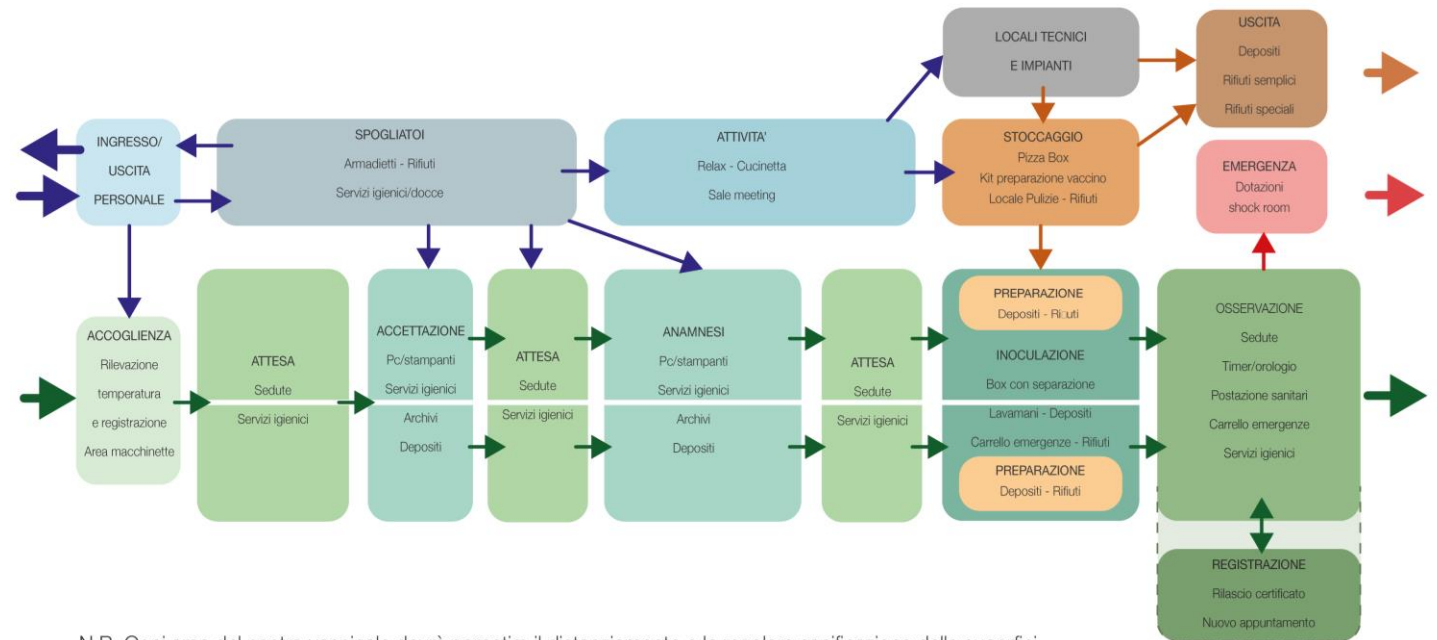
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EY

UniSR UNIVERSITÀ PIA-SABOTE SAN BIROLE

© Mattioli 1885

ORIGINAL INVESTIGATIONS / COMMENTARIES



N.B. Ogni area del centro vaccinale dovrà garantire il distanziamento e la regolare sanificazione delle superfici

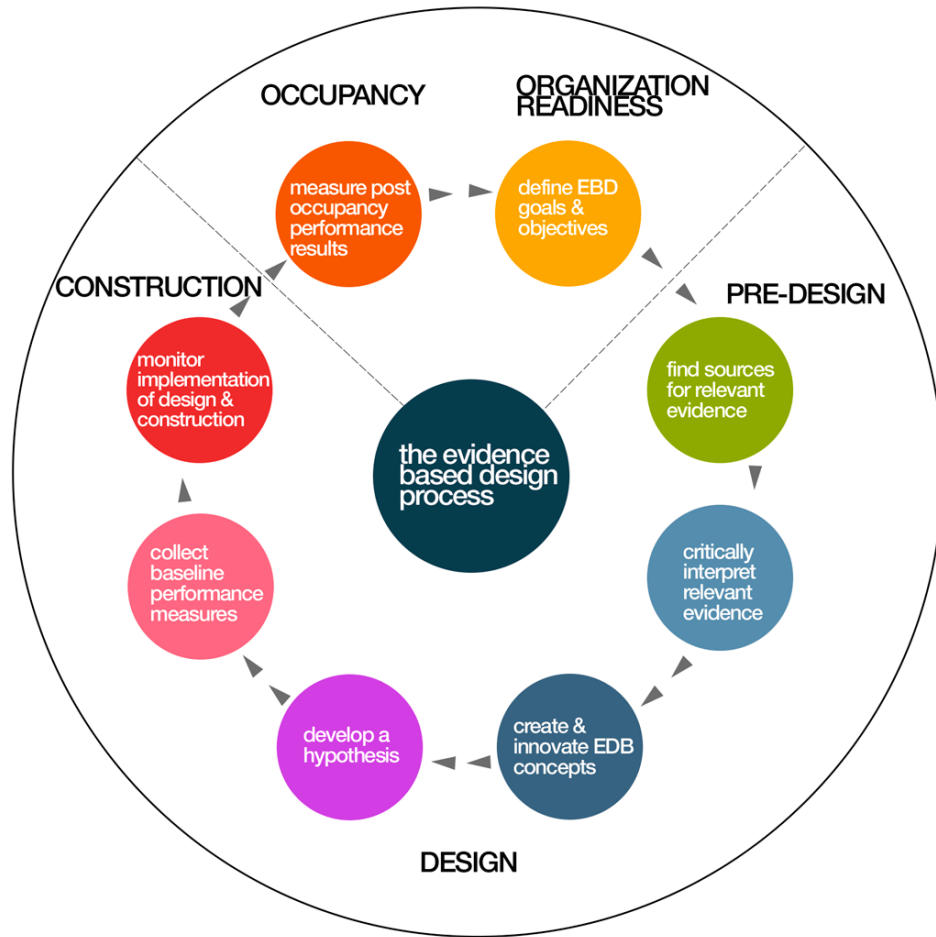
→ PERCORSO PAZIENTI → PERCORSO SANITARI → PERCORSO MATERIALE SANITARIO → PERCORSO EMERGENZA

Covid-19 Massive Vaccination Center Layouts. A modular and Scalable Model for Lombardy Region, Italy

Andrea Brambilla¹, Silvia Mangili¹, Marco Macchi², Paolo Trucco², Alessandro Perego², Stefano Capolongo¹

¹Politecnico di Milano, Department of Architecture, Built environment and Construction engineering (DABC), Design & Health Lab, Milano, Italy; ²Politecnico di Milano, Department of Management, Economics and Industrial Engineering (DIG), Milano, Italy

NEW CHALLENGES EXPERIENCED / EVIDENCE - BASED DESIGN



Ulm Hospital, Germany

NEW CHALLENGES CO-DESIGN



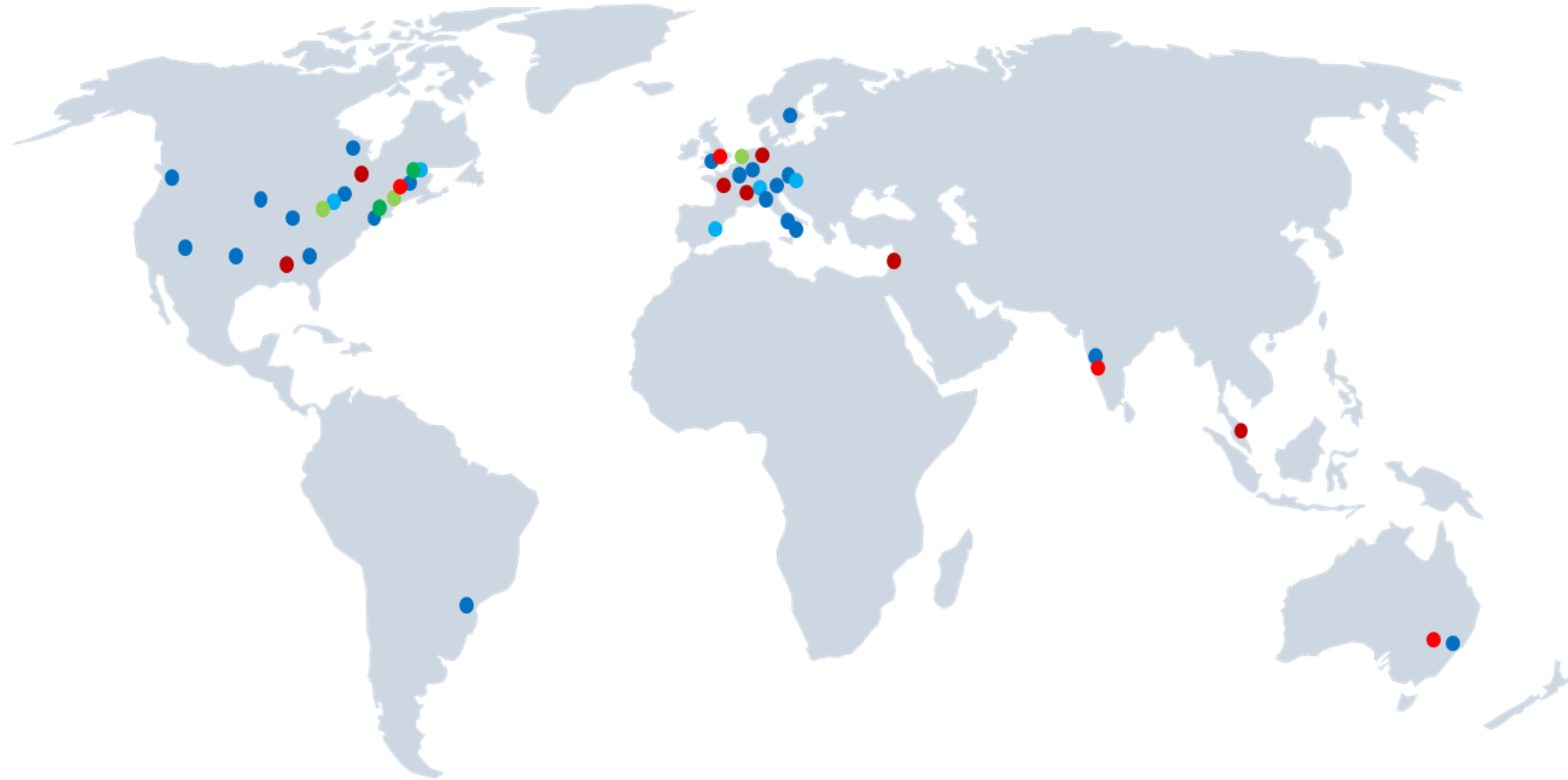
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NEW CHALLENGES FOR DESIGN & HEALTH LAB: WHO EXPERT MEETING



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INGEGNERIA DELLE COSTRUZIONI
E AMBIENTE COSTRUITO

WORLD HEALTH ORGANIZATION
REGIONAL OFFICE FOR EUROPE



WELTGESUNDHEITSORGANISATION
REGIONALBÜRO FÜR EUROPA

ORGANISATION MONDIALE DE LA SANTÉ
BUREAU RÉGIONAL DE L'EUROPE

ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ
ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

Expert meeting
Rethinking the future of Hospitals in the European Region
Brussels, Belgium
14-15 December 2021

/5

23/11/21
Original: English



Stefano Capolongo

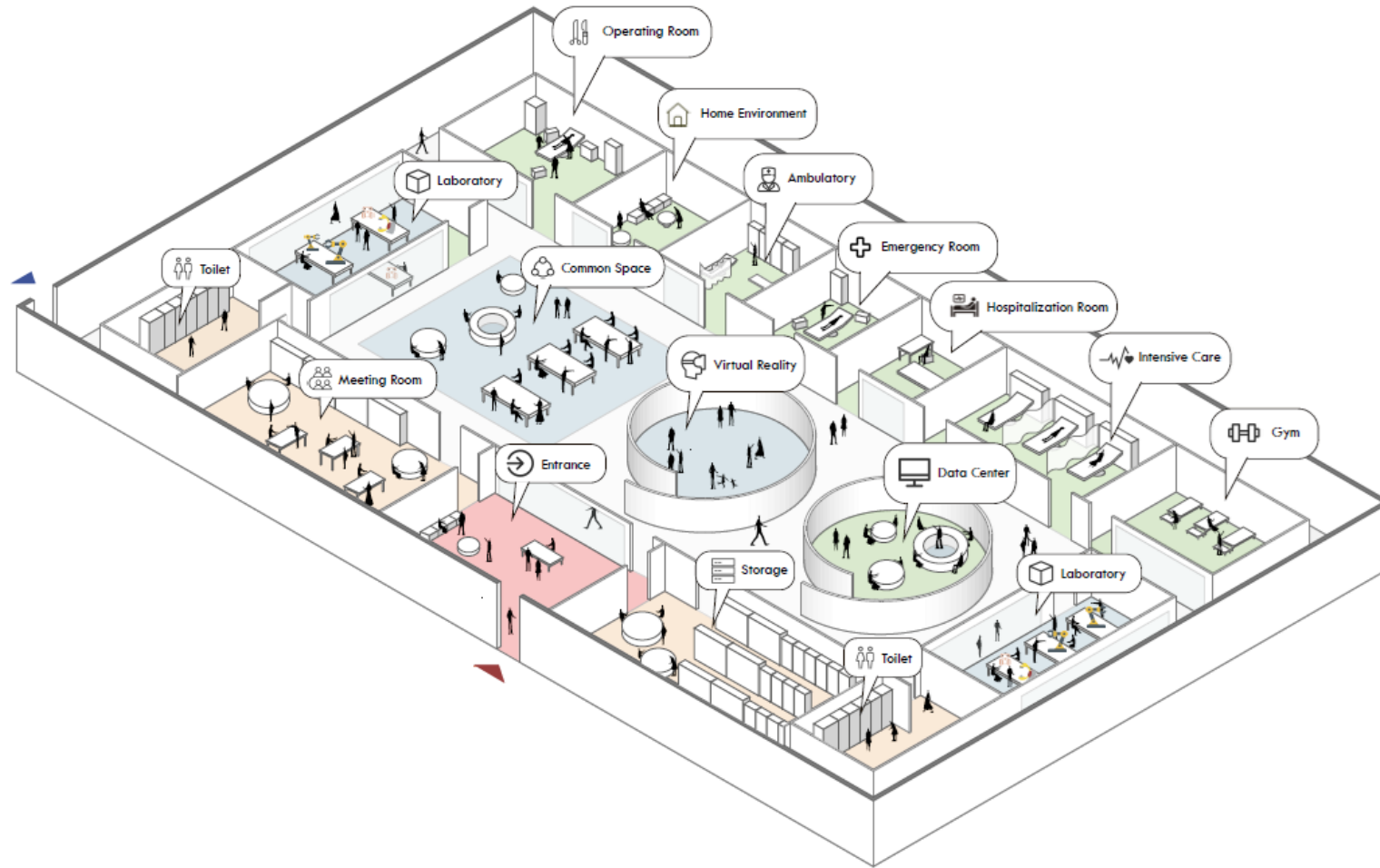
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NEW CHALLENGES FOR DESIGN & HEALTH LAB: NEXT GENERATION HEALTHCARE LAB @ MIND



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NEW CHALLENGES FOR DESIGN & HEALTH LAB: JRP HEALTHCARE INFRASTRUCTURE



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Joint Research Platform Healthcare Infrastructures



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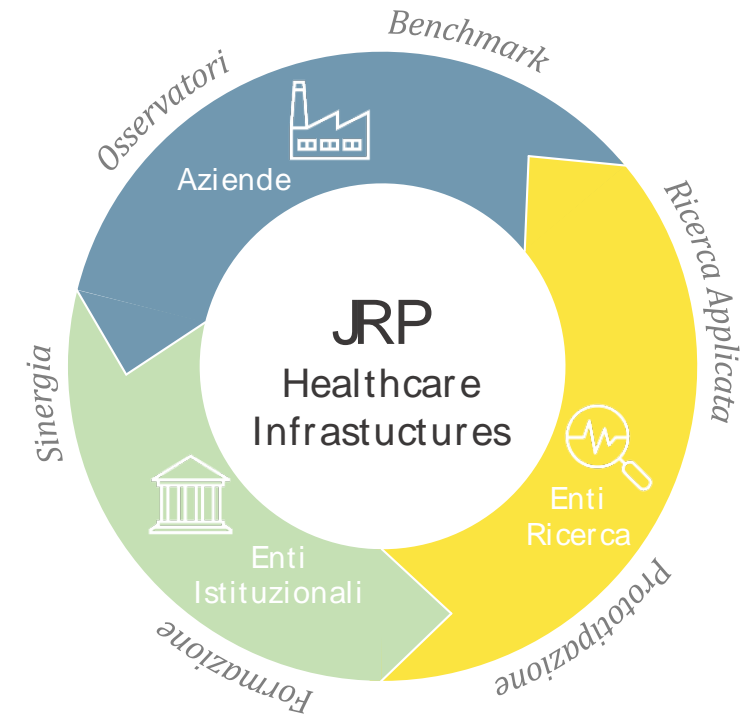
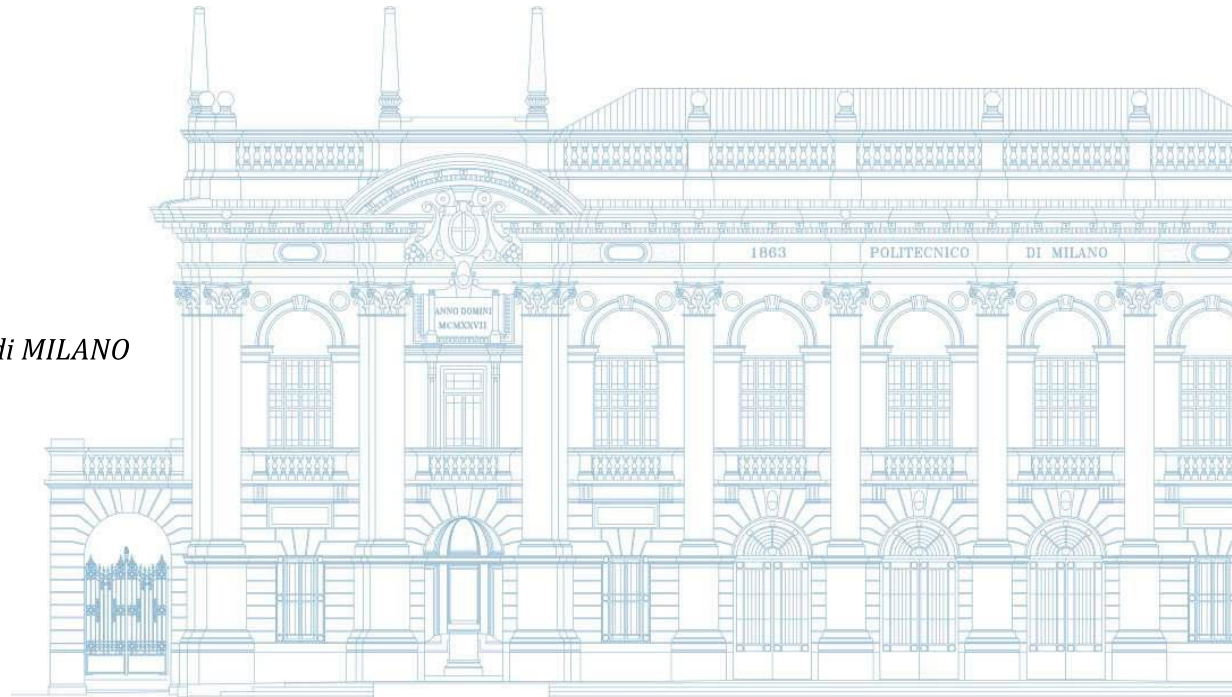


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IX CBDEH

**CONGRESSO BRASILEIRO PARA O DESENVOLVIMENTO
DO EDIFÍCIO HOSPITALAR**

CONEXÃO E DIVERSIDADE NOS ESPAÇOS DE SAÚDE

Centro de Convenções de Pernambuco - Auditório
Eixo 2 - Pandemias e epidemias: desafios e oportunidades.
Conferência 2 on Thursday 20th October 2022, 18:15 - 19:15

Título do trabalho:

HEALING ARCHITECTURE: the experience based approach for re-thinking the Next Generation Hospital

Stefano Capolongo

Head of the Department in Architecture, Built environment and Construction engineering [DABC] of Politecnico di Milano

Coordinator of the “European Chapter” of the International Academy for Design and Health [IADH]

President of the Italian Center for Hospital Building and Design [CNETO]

President of the “Urban Public Health” of the European Public Health Association [EUPHA]

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