



Healthcare Facility Planning and Hospital Design Briefing Course

12 – 16 April 2027

Paris - Right Bank business hotel



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Ref: 1598_25569 **Date:** 12 – 16 April 2027 **Location:** Paris - Right Bank business hotel **Fees:** 23500 SAR

Introduction:

Healthcare facility planning and hospital design briefing, covering clinical briefs, functional programmes, adjacencies and capacity sizing, is a 5-day course for health-system planners, capital project owners and service leads, ending with a Hospital Design Brief Package. Many new hospitals open with wrong room counts, awkward patient routes and costly redesign because the brief given to architects was vague. Nominees already plan services or manage building projects, and teaching is by case study on service data, area schedules and architect drawings. CoreConcept Training Center delivers this healthcare facility planning course.

Course Objectives:

- Translate service strategy and demand data into a clinical brief that states services, volumes, models of care and design principles for architects
- Build a functional programme and schedule of accommodation that lists every room type, quantity and net area by department
- Test departmental adjacencies and patient, staff and supply flows to produce a stacking and zoning diagram that supports safe operation
- Size inpatient beds, theatres, emergency and outpatient rooms from demand, length of stay and utilisation assumptions
- Review architects' schematic drawings against the brief, record deviations and agree design change decisions at stage gates
- Assemble a Hospital Design Brief Package with a capacity model, area schedule, adjacency plan and review checklist for a case organisation

Target Audience:

- Health-system planners responsible for service strategies and facility master plans
 - Capital project owners accountable for briefing designers and approving each design stage
 - Service line managers who must state clinical requirements for new or redeveloped departments
 - Facilities and estates planners who convert clinical needs into space and area schedules
 - Project sponsors' technical advisers who review architect and engineer submissions on behalf of the owner
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Course Outline:

Day 1: Planning Context, Demand Drivers and the Clinical Brief

- Facility Master Plan Stages from Strategic Need to Handover
- Population Demand Projection by Age Band and Service Line
- Models of Care Statement and Service Delivery Principles Sheet
- Clinical Brief Template with Services, Volumes and Operating Hours
- Existing Estate Condition and Suitability Audit Scorecard

Day 2: Functional Programme and Schedule of Accommodation

- Functional Design Brief Structure for Each Clinical Department
- Room Type Library and Room Data Sheet Fields
- Net Area Allowances and Net-to-Gross Circulation Factors
- Schedule of Accommodation Build from Activity Assumptions
- Single Room Ratio and Flexible Ward Unit Planning Rules

Day 3: Capacity Sizing for Beds, Theatres and Outpatient Rooms

- Bed Requirement Calculation from Admissions, Length of Stay and Occupancy
- Theatre Session Planning with Turnover Time and Case Mix
- Emergency Department Bay Sizing Using Arrival Profiles and Dwell Time
- Outpatient Consulting Room Demand Using Appointment Templates
- Queueing Check on Peak Load and Surge Capacity Allowance

Day 4: Adjacencies, Patient Flows and Design Review with Architects

- Adjacency Matrix with Essential, Desirable and Avoid Ratings
- Patient, Staff, Visitor and Supply Flow Separation Diagram
- Block and Stacking Plan Comparison Against Weighted Criteria
- Schematic Design Review Checklist Against the Brief
- Design Change Request Log and Stage-Gate Sign-Off Record

Day 5: Case Study: Hospital Design Brief Package for a Case Organisation

- Case Organisation Service Data and Demand Scenario Review
 - Case Bed and Theatre Capacity Model Build
 - Case Schedule of Accommodation and Adjacency Plan Draft
 - Mock Schematic Review Meeting with Architect Role Briefing
 - Hospital Design Brief Package Completion and Peer Review
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Skills You Will Gain:

- Clinical Brief Writing
- Demand Projection
- Functional Programme Development
- Schedule of Accommodation Building
- Bed and Theatre Capacity Sizing
- Adjacency and Flow Planning
- Schematic Design Review
- Design Change Control

Why Attend This Course:

- Deliver a Hospital Design Brief Package to the project sponsor, design team lead and clinical steering group for adoption
- Decide how many beds, theatres and rooms a design must provide and which departments must sit together
- Avoid redesign cost, undersized departments and unsafe patient routes that follow from a vague brief
- Coach clinical colleagues on stating requirements and reading architects' drawings in a consistent way

Conclusion:

Back at work, the participant gives the project sponsor, the design team lead and the clinical steering group a Hospital Design Brief Package that sets service volumes, room counts, areas, adjacencies and review criteria. The sponsor uses it to release the design commission, while clinical leads use it to confirm each department's requirements. After the first schematic design submission, the project team should compare drawings against the brief, log every deviation and revisit capacity assumptions where demand data has changed.

Frequently Asked Questions FAQ:

What should participants know before a healthcare facility planning and hospital design briefing course?

Participants should already plan health services or manage building projects and understand how departments operate. Bringing service activity data, an existing area schedule or a set of drawings from their own organisation makes the case work more useful.

How does a healthcare facility planning and hospital design briefing course differ from a smart hospital or equipment management course?

It concentrates on writing the brief and sizing the building: clinical brief, functional programme, adjacencies, capacity and design review. Smart hospital courses address transformation and technology, and equipment courses address maintenance and replacement of devices.

Why does hospital design start with a clinical brief?

Architects cannot infer service volumes, models of care or operating rules from a site plan. A clinical brief states them, so room counts, areas and adjacencies come from agreed demand rather than assumption.

What do participants take back from the healthcare facility planning and hospital design briefing course?

Participants take back a Hospital Design Brief Package for a case organisation, plus a clinical brief template, a room data sheet, a capacity model layout, an adjacency matrix and a design review checklist adaptable to their own projects.
