Dr Alyson Walker, a Consultant Paediatric Cardiac Specialist, shared an inspiring journey of embedding design thinking into clinical settings. Her award-winning co-design project transformed Scotland's largest children's operating theatre at the Royal Hospital for Children. This innovative work not only improved healthcare spaces but also empowered patients, families, and staff. Her impactful work has even earned her a lifetime achievement award.

In her presentation, Alyson described the challenges, insights, and practical steps involved in creating inclusive and welcoming spaces in hospital environments, through a co-design process. Here are the key themes from her talk:

It is not just about clinical outcomes

Alyson emphasised that while clinical outcomes are vital, the overall experience of patients and families is equally important. Despite the kindness of staff, the operating theatre can still feel cold and frightening. Her work asked the question:
Can clinical outcomes and user experience be improved together?

Tackling Unclear Problems with Design Thinking

Faced with a vague problem, Alyson turned to the **Double Diamond** design process to guide her approach. She emphasised the value of spending extra time exploring the problem space, which allowed her to embrace uncertainty and take an iterative approach. She described how she used 'discontent constructively,' explaining that the design process is well-suited for turning frustration into positive change. By following this method, she avoided the common pitfall of "solutioneering" — rushing to solutions too quickly. Instead, the design approach encouraged her to embrace the messiness of the process, giving her the permission to revisit and refine ideas as often as needed.

Discovery Through Observation

Observation became a powerful and cost-effective tool for understanding user needs. Alyson's team gained valuable insights by following the journeys of parents and children, inviting service designers to participate and share their feedback, and using patients as "secret shoppers." They also used role-play with staff to explore different perspectives and experiences. Involving medical students brought fresh perspectives, and creative methods like using paper and sticky notes for interviews kept things visual and engaging. Alyson highlighted the importance of **benchmarking** — looking at best practices, identifying what went wrong, and understanding what worked well. Reflecting on these insights early in the design process can provide valuable insights for designing better solutions.

Learning from Mistakes and Embracing Small Steps

In busy clinical environments, being opportunistic is key. Surveys turned out to be a quick and effective way to gather staff feedback since they're familiar and easy for everyone to use. Alyson reminded us that mistakes can be great learning moments. For example, when they accidentally cut the hole in the survey box too big, it was a small error — but it taught them an important lesson about paying attention to the details and finding better ways to do things next time.

Synthesising Insights and Breaking Down Complexity

After gathering data, Alyson's team faced the challenge of drawing insights from a broad range of information. She emphasised the value of breaking it down into manageable steps:

"How do you eat an elephant? One bite at a time." She used brainstorming and brainwriting in her design process.

Designing the Physical Environment

During COVID-19, the team focused on tangible changes like improving waiting areas, theatre ambience, and the often intimidating reception desk. By sharing patient and family quotes with management, Alyson influenced decisions that improved empathy and engagement in clinical spaces.

Moving from Problems to Solutions with HMW Questions

Using **How Might We** (HMW) questions helped her team reframe problems into actionable ideas. By involving a wide range of stakeholders - combining lived experience, lived expertise, and professional expertise strengthened the co-design process. There will always be challenges during the co-design process. Speaking to families who are already distressed, managing people eager to jump to solutions (solutioneering), and working with staff who have limited time can all present difficulties.

Prototyping for Fast Learning

Prototyping played a key role in testing ideas quickly and learning through failure. Examples included:

- Building a life-size cardboard model of the anaesthetic room to test space usage.
- Role-play exercises with staff to trial new processes.
- Virus-counting games during COVID-19 to create engaging yet safe environments.

This hands-on approach encouraged collaboration, minimised risks, and ensured designs met real needs.

Delivering Real Change

By designing spaces that encourage positive behaviours, Alyson's team successfully created environments that improved staff wellbeing and enhanced patient experiences. The new spaces felt more playful, welcoming, and engaging, reflecting a significant culture shift also evident through staff feedback.

Embracing Creativity and the Power of Storytelling.

Alyson encouraged healthcare professionals to reconnect with creativity in their work. Sharing stories from patients, families and staff helped influence decisions and build meaningful connections.

Designing for Inclusion

Inclusive design played a key role in her project. Inspired by K-POP graffiti, Alyson's team created vibrant illustrations that reflected diverse patient demographics. Sign language, other languages, and cultural symbols ensured everyone felt represented.

Final Tip: Get Involved and Have Fun

Alyson's closing advice was: **"Get out there, jump in, and have fun. Find what matters to you, and let that passion guide your design journey."**