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# **Design thinking as a ritualized change strategy in the governance of healthcare: an ethnographic case study**

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## Abstract

We aim to understand the potential of 'design thinking' for healthcare organizations that try to adapt to shifting principles and actor relations in the governance of healthcare. We asked the following research question: *how does design thinking contribute to the generation of alternative organizational strategies for the contemporary problems of healthcare organizations in the Netherlands?* To answer this question, we took a particular 'design-thinking experiment' as our case study and collected data through participatory observation and semi-structured interviews. Drawing on anthropological theory on ritualization, we argue that design thinking was important for the participating healthcare organizations in an unexpected way. Instead of generating new ideas, the design-thinking experiment functioned as a *catalyst* and *legitimator*. Our insights have consequences for how we conceptualize the productive potential of design-thinking experiments in the governance of healthcare and beyond.

**Keywords:** design thinking, ritualization, ethnography, alternative organizational strategies, the Dutch Healthcare Inspectorate.

## Introduction

*21 August 2017* – In the center of The Hague (the Netherlands), tucked away in a hallway corner on the 20<sup>th</sup> floor of the Ministry of Health, a head of department of the Dutch Healthcare Inspectorate meets with one of her inspectors, two designers, an artist, a professor of healthcare sociology, one of her PhD students and one of her bachelor students. They are gathered in the prelude to a ‘design-thinking experiment’ in which three healthcare organizations, amongst which the Inspectorate, are supported by creative designers in rethinking their role and position in the governance of healthcare. At stake today is an initial exploration of the Inspectorate’s organizational problem. *‘If only we could do away with those inspection reports’*, the head of department says half jokingly....

*21 October 2017* – After a day and a half of intensive design thinking sessions, the design group moves from the exploration phase into the design phase. They need to produce a creative, implementable solution to the Inspectorate’s organizational problem. However, the problem has been hard to define. Consequently, the design-thinker’s motto to change problems into opportunities is left wanting. *‘But what if you cease providing inspection reports?’*, the creative designer suggests in a probing manner. The different members of the Inspectorate look at each other and nod convinced. That is an excellent idea. Not long after, they turn into implementation mode; discussing where, when and how the omission of an inspection report might be arranged. (reconstructed from fieldnotes 2017)

Based on abovementioned observations, we could draw the cynical conclusion that design thinking does not offer anything *creative* or *new* to healthcare organizations aiming to rethink their roles and services in light of shifting principles and actor relations in the governance of healthcare. For us, however, these observations prompted two questions that warranted further exploration. How was an already brewing – but not yet accepted – idea turned into an alternative organizational strategy? Moreover, what exactly was the role of design thinking in that process?

Design thinking has been described in different ways, yet most authors agree that it tends to follow a particular script; starting with the end users in mind and moving from idea generation, to prototyping, to testing and implementation (Brown 2008; Martin 2009). With its emphasis on ideation, design thinking entails a human-centered, instead of analytical or technological, approach towards organizational change (Kimbell 2011). It moreover values collaboration between practitioners, designers, clients and researchers, emphasizes situated and creative thinking, stresses the importance of (re)conceptualizing wicked societal

problems into organizational opportunities, and promises the generation of innovative solutions (Buchanan 1992; Brown 2009).

Design thinking is widely covered in the literature on business management and strategic innovation (see for examples Martin 2009; Brown and Wyatt 2010; Mootee 2013). This body of literature describes how organizations can use design thinking to develop new products, services and strategies that cater to the needs of customers. In doing so, the literature attributes much potential to design thinking as a change strategy (Brown 2009).

This paper intends to contribute to the design thinking literature in two ways. Firstly, even though much potential is attributed to design thinking, empirical analysis on how design thinking contributes to organizational change remains scarce (Kimbell 2012). We therefore set out to analyze a design thinking experiment empirically whilst borrowing insights from the anthropological literature on strategy workshops (Johnson et al. 2010). Secondly, even though design thinking is extensively discussed in the business management literature, it has not yet been picked up by scholars studying innovation and change in healthcare governance (see for exceptions Roberts et al. 2016; Eines and Vatne 2018). Healthcare is an interesting setting to study design thinking initiatives because healthcare organizations are increasingly investing in it as a change strategy. Moreover, the healthcare sector is typically characterized by a multitude of interdependent actors that together shape the services provided to end users (in this case, patients). This means that healthcare organizations do not only need to relate to end users, but also to other actors involved in healthcare provision.

In the Netherlands, many conventional healthcare organizations (ranging from home care organizations to health insurers and healthcare inspectorates) are currently aiming to reconfigure their roles and services. Here, supply-driven, professionally-controlled, and medically-centered healthcare provision is steadily making way for more integrated and patient-centered approaches (Berwick 2016). This means that healthcare is increasingly approached as coproduced by a plurality of professional others; including insurers and inspectorates, as well as patients, their families, and the communities in which they are embedded (Doherty and Mendenhall 2006; Epstein and Street 2011). However, such collaboration and coproduction requires a blurring of organizational roles, boundaries and responsibilities that conventional healthcare organizations struggle to accomplish (Epstein and Street 2011). Some of these healthcare organizations have therefore started to adopt design thinking as their change strategy.

In this paper, we aim to better understand the potential of design-thinking strategies for healthcare organizations that try to reconfigure their roles and services in light of shifting

principles and actor relations in the governance of healthcare. In order to do so, we tried to capture our two initial questions (presented at the onset of this introduction) into the following research question: *How does design thinking contribute to the generation of alternative organizational strategies for the contemporary problems of healthcare organizations in the Netherlands?*

We take a particular design-thinking experiment as our case study. In this experiment, representatives of three Dutch healthcare organizations (a healthcare inspectorate, an insurer, and a home care organization) were supported by six designers, four scientists, three students, and a plethora of practitioners (such as medical doctors and nurses). At stake was how these organizations tried to reconfigure their roles and services in relation to a specific group of 'hard-to-reach' or 'vulnerable' end users (as framed in design-thinking terminology). We (the authors) acted as 'observing participants' by collecting detailed field-notes and photographic materials as the experiment unfolded. We furthermore conducted interviews with all organizational representatives involved during and after the experiment took place.

Drawing on the anthropological theory on ritualization – which we will further introduce in the next section – we argue that the design-thinking experiment was relevant for these healthcare organizations in an unexpected way. Instead of using design-thinking strategies to develop new ideas, concepts, and solutions in order to keep up with and adapt to changing actor relations and principles in the governance of healthcare, the experiment showcased an empathetic rehearsal of already-existing, yet not formally adopted ideas and solutions brewing amongst organizational representatives. Design thinking was thus not a site where alternative organizational roles and services were created, but rather a site where alternative roles and services were perpetuated. In that sense, the design-thinking experiment's contribution was twofold. On the one hand, it functioned as a *catalyst*: an affective and protective time-space where alternative organizational configurations could be articulated, rehearsed, and adapted. On the other hand, it functioned as a *legitimator*: the fact that these alternative configurations were cultivated in an experimental setup helped to legitimize their organizational existence.

These insights have consequences for how we conceptualize the emergent potential of design-thinking experiments in the sense that ideas are not created in them but catalyzed and legitimized by them. Before further discussing our case and presenting our conclusions, we introduce the theoretical lens through which we examined the design-thinking experiment.

## Design thinking and ritualization

Design thinking is a concept that has been widely adopted in management literature since the turn of the century (Kimbell 2011). Here, it is described as a future-oriented, exploratory, and human-centered approach towards problem solving (Brown 2008; Kimbell 2011). Design thinking typically starts with end users in mind and moves from idea generation, to prototyping, to testing and implementation (Brown 2008; Martin 2009). Meanwhile, it highlights a depoliticized, fragmented and episodic way of working that has a clear beginning and end and is detached from everyday organizational routines. Although design thinking highlights multidisciplinary collaboration and values different levels of expertise, it also places strong emphasis on the creative and mediating role of the participating designers (Julier 2008). They have a key role as the cultural intermediaries in multidisciplinary teams and as the interpreters of what end users need. With their '*creative ways of solving problems, designers can turn their hands on anything*' (Kimbell 2011: 287).

Abovementioned literature generally discusses design thinking in two complementary ways. Firstly, it describes design thinking ideal typically, paying attention to the specific characteristics that make design thinking a strategy for organizational change. Secondly, it attributes much potential to these characteristics described; with the promise of a solved problem for those that stick to the script and are willing to engage with a creative designer.

Johnson and colleagues (2010) have studied strategy workshops empirically in order to better understand whether and how such workshops are able to produce organizational change. In resonance with the literature on design thinking (Kimbell 2011), Johnson and colleagues (2010) highlight the episodic, scripted nature of strategy workshops and propose that such workshops could very well be approached as more or less *ritualized*. Johnson and colleagues (2010) subsequently stress that this approach allows for the use of analytical categories from the anthropological literature. Such categories, in turn, makes it possible to structurally observe, analyze, describe, and compare such workshops and how alternative organizational strategies emerge through the practices of those involved (Bourque and Johnson 2008; Vaara and Whittington 2012). Due to the similarities between Johnson and colleagues' (2010) description of strategy workshops and the characteristics attributed to design thinking in the literature, we adopt the same categories in our empirical analysis of the design-thinking experiment.

Johnson and colleagues (2010) propose the use of five analytical categories in their empirical analysis of strategy workshops. The first three of these categories are aimed at describing the strategy workshop itself. These are: removal, liturgy and ritual specialist. *Removal* is the extent to which the strategy workshop is detached from everyday organizational

routines. Removal can be achieved spatially, but also by doing something different, or levelling or inverting social status. Furthermore, removal has clear beginnings and endings contributing to the episodic nature of the strategy workshops. *Liturgy*, in turn, refers to the script that participants follow in this alternative time-space. This script can be more or less formal yet needs to underwrite the alternative rules of conduct. The *ritual specialist*, lastly, is there to impart the liturgy to participants and to make sure participants stick to the script.

Through the characteristics mentioned above, Johnson and colleagues (2010) argue that strategy workshops have the potential to create a social limbo that encourages behavior different from the everyday (Johnson et al. 2006). In order to capture such behavioral changes, the last two analytical categories are concerned with describing the group that partakes in a strategy workshop. Johnson and colleagues (2010) refer to these categories as *communitas* and *antistructure*. *Communitas* refers to the group's potentiality; such as their emotional energy, confidence, enthusiasm and willingness to embrace the situation and take action. *Antistructure*, in turn, refers to the actual suspension of participants' normal social status. Even though such suspension might be part of the liturgy, the extent to which social hierarchies dissolve or inverse differs between participant groups.

Johnson and colleagues (2010) use these five categories to analyze under which conditions strategy workshops can create the *communitas* and *antistructure* amongst participants that is necessary to embrace alternative strategies. However, in their discussion, they also underwrite that the extraordinary circumstances under which such alternative strategies are developed – in workshops that are far removed from everyday organizational routines – actually make it hard to implement such strategies under normal organizational circumstances; that is, translate them into everyday organizational procedures and routines (Schmidt 2008; 2010). As such, their analysis is mainly concerned with the extent to which participants experience the strategy workshops as valuable and legitimate. The alternative strategies that emerge in such workshops and through the practices of those involved, are not scrutinized (Kimbell 2012; Vaara and Whittington 2012).

However, we are interested in how alternative organizational strategies emerge in design-thinking experiments. To better understand this process, we use Johnson and colleagues (2010) characteristics to analyze a design-thinking experiment, whilst simultaneously shifting attention from the legitimation of the design-thinking experiment itself to the development and legitimization of the alternative organizational strategies emerging in the design-thinking experiment through the practices of participating designers, researchers, students, and organizational representatives (Kimbell 2012; Vaara and Whittington 2012). To do the latter, we will also attend to the articulation of problems and solutions, the

deliberation on such problems and solutions, and the work involved to embed designed solutions into organizational routines (Schmidt 2008; 2010; Vaara and Whittington 2012).

In order to understand how the design-thinking experiment contributes to the generation of alternative organizational strategies, above-mentioned theoretical reflections have thus sensitized us towards: a) mapping how the design-thinking experiment was organized; b) tracing how participants reconfigured organizational problems into alternative organizational strategies over the course of the experiment's unfolding; and c) gathering participants' reflections on how the experimental set up contributed to the generation of these alternative strategies. In the next section, we discuss how we gathered such data.

## Methodology

Our empirical analysis builds on a combination of participatory observations and semi-structured interviews. Below we discuss how we conducted and combined both methods.

Participatory observation is an important research methodology in anthropology and sociology (Clark et al. 2009). It means that researchers actively participate in the environment under study. They do so to gain an intimate familiarity with, in this case, the design-thinking experiment and its participants. Participatory observation enables researchers to focus on concrete actions of the participants, whilst simultaneously capturing the content of conversations and use of language (Mortelmans 2013).

In our case, we introduced ourselves as researchers and we informed the key participants about our research project. Thereafter, the first three authors (MF; TKV; MS) each joined one of the participating healthcare organizations and rotated halfway through. During the sessions, we actively supported the participating organizations in the design-thinking process; thinking with them about how to frame problems and find fitting solutions, or facilitating deliberation through notetaking and summarizing. At the same time, we made detailed fieldnotes about the experimental setup and the content and form of the discussions. Important here was to capture who said what in response to who or to which element in the design-thinking experiments' setup. Because the articulation of ideas occurred primarily via keywords on post-its and posters, these fieldnotes were complemented with photos of the produced texts. Each author used their fieldnotes and photos to write out detailed observation reports. The last author (AB) observed the overall process and supported the two designers that organized and facilitated the workshop, sometimes joining discussions within the smaller groups.

In addition to participatory observation, semi-structured interviews were conducted with key participants of the experiment (N=14); two participants did not respond to our request for an interview. The topic lists were structured around three themes: (a) the organization's reasons for participating; (b) the design-thinking experiment and how it was experienced (setup and process); (c) changes in the organization after the experiment (articulation and implementation of the organizational problem/solution); d) reflections on how the experimental setup contributed to such changes. The interviews were transcribed verbatim.

During the analysis, all the authors revisited the observation reports (consisting of photographs and fieldnotes) and transcribed interviews. We iteratively went back-and-forth between analytical themes and our theoretical framework (Timmermans and Tavory 2012). Our analysis focused on: a) mapping how the experiment was organized; b) tracing how alternative organizational strategies emerged; and c) reflecting on how the experimental setup contributed to such changes (see also table 1). Preliminary findings of the field reports were first discussed amongst the first three authors and after that discussed with the last author.

**Table 1:** Overview of the study design

Analytical steps	Methods used	Data gathered
Mapping the design-thinking experiment	Field observations	- Researcher diaries (n=3) - Researcher maps (n=3) - Photo's (n=55)
Tracing the generation of alternative organizational strategies	Field observations	- Researcher diaries (n=3) - Researcher maps (n=3) - Photo's (n=55)
	Interviews	- Facilitators (N=2) - Designers (N=4) - Organizational participants (N=7) - Student (N=1)
Participant reflections on how the experimental set-up contributed to such changes	Interviews	- Organizational participants (N=7 – the same as above)

We ensured the quality of the study by taking the following steps. Firstly, we decided to combine different sources of data (observation reports and interviews) to enhance the internal validity of the study. Here, the interviews helped us to validate and enrich insights from the observation reports. Secondly, we worked with a team of four researchers that rotated between organizations halfway during the design-thinking experiment, together reflecting on the research steps and analyzing each other's material. Lastly, we member-checked the final version of this paper before submission. It was during this member check that we heard that the participating inspectorate had been nominated for an innovation prize for an experiment with mystery guests. In this experiment, an idea that had been

discussed during the design-thinking sessions had been embedded (see further results section).

Below, we have structured our results section into three parts. We first focus on the experiment's preparation phase. Thereafter, we describe the design-thinking experiment. Lastly, we pay attention to the aftermath. In our analysis, we revisit the analytical categories proposed by Johnsons and colleagues (2010), whilst simultaneously highlighting how alternative strategies emerged (Schmidt 2010). In order to understand this process in detail, we have chosen to zoom in on one of the participating organizations specifically: the Dutch Healthcare Inspectorate (henceforth the Inspectorate). It is here that an alternative organizational strategy emerged and became embedded into broader organizational processes. This makes the Inspectorate an empirical example of how design thinking may contribute to the generation of alternative organizational strategies in the governance of healthcare.

## Design thinking as an instrument for organizational change

Our case study did not have an official title. Most called it *'the experiment'*, although some referred to it as *'the design-thinking sessions'* and again others referred to it as a *'summer school'* (fieldnotes 2017). Funded by the European Union and financially supported by EIT health, the program was aimed at stimulating innovation amongst *'healthcare students from all walks of life'*; from bachelor students to healthcare professionals, managers and policymakers (EIT Health 2018).

### Preparation phase

The first time representatives of the Inspectorate met with the designers, researchers, and students was during a meeting in preparation of the design-thinking sessions on the 21<sup>st</sup> of August 2017 (see epigraph). The goal was to formulate a problem that the group could focus on during the design-thinking experiment itself.

The representatives of the Inspectorate wanted to focus on the role that their inspection reports play in improving the quality of healthcare. They explained that their mission, as an inspectorate, is to assert that vulnerable citizens receive healthcare and support that is suitable, effective, and integrated (fieldnotes 2017). In order to do so, the Inspectorate operates closely with other inspectorates in the domain of healthcare and welfare (cf. Rutz et al. 2013). To gain insight into the healthcare and support provided to vulnerable groups, the Inspectorate furthermore focusses on thematic inspections on a municipal level. An example is the care and support provided to citizens with a minor mental dis-

ability. The Inspectorate is innovating in the methods through which they gain insights into the care and support provided to such vulnerable groups. Experiments with mystery guests are organized, focus groups are arranged and close collaboration with professionals and policymakers is sought (inspector, interview 2018). The Inspectorate however still uses traditional, summative inspection reports in order to articulate (potential) problems in the provision of integrated care and place issues on the agenda of professionals and policymakers. They produce these reports because: a) *'it is just the way they do things'* (inspector, interview 2018); and b) the other inspectorates operating in fields of healthcare and welfare expect them to do so. These summative inspection reports however present the Inspectorate with a complex problem.

One of the Inspectorate's inspectors had studied the impact of the Inspectorate in her PhD thesis. Ironically, she noticed that by delivering summative inspection reports, the Inspectorate distanced itself from the very networks it had built up in order to gain insight into the care and support provided on a municipal level. Moreover, professionals and policymakers did not gain ownership over the problems identified by the inspectorate. Because of that, the recommendations presented in the inspection reports seemed to have little lasting effect on the practices of professionals and policymakers (Rutz et al. 2013; 2017). In response, the Inspectorate was looking into alternative strategies to create continuity in improving the quality and integration of healthcare and welfare services on a municipal level. As one inspector therefore asked during the explorative meeting with designers and researchers: *'how can we write reports that are not a collection of plusses and minuses, but instead, motivate local healthcare actors to act?'* (paraphrase from fieldnotes 2017) As presented in the epigraph, the Inspectorate's head of department took this one step further and advocated the idea to leave out an inspection report and have an impact in a different way (reconstructed from fieldnotes 2017).

## The design-thinking experiment

The two-day experiment itself was staged on the top floor of 'Spring House', a building painted bright red and situated close to the central train station in Amsterdam's bustling city center. Spring House contains a restaurant, flexible workspaces, and presents itself as *'the home for radical innovators'* and as *'a network, workspace and lab (...) functioning as a catalyst for positive change.'* (Spring House 2019) The heart of the experiment was a central meeting area. Around it were several 'satellite' rooms, separated from the 'center' by movable glass doors (see for a map appendix 1). This set-up facilitated participants to disband and work in smaller teams, as well as to come together and share ideas collectively. The area was furnished with tables and chairs, twisting stairs, many plants, sofas, and a balcony overlooking a busy Amsterdam waterway (fieldnotes 2017). Bare walls were plastered with banners carrying texts like: *'don't forget about the needs and desires of*

people.’ (fieldnotes 2017) The scene breathed creativity as well as purpose (a calling even): the need for organizations to better meet the needs of people. Moreover, the time-space in which the design-thinking sessions were organized was far *removed* from the everyday organizational routines of the participating organizations.

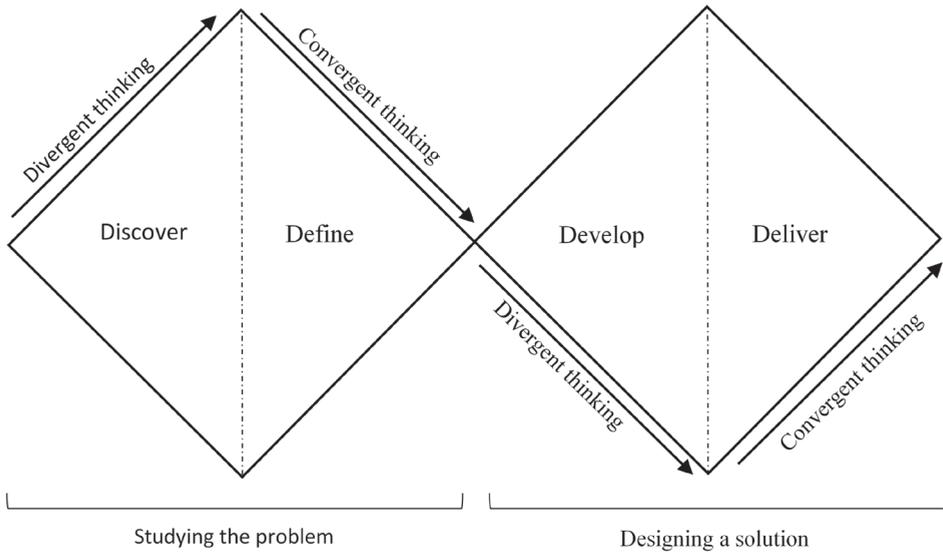
In coming up with an alternative organizational strategy, three representatives of the Inspectorate joined two other healthcare organizations (an insurer and an elderly home care organization). The three healthcare organizations were also supported by six designers, four scientists, three students, and a plethora of field experts and practitioners. Together, over the course of two days (29-30 September 2017), they followed the carefully planned and scripted design-thinking experiment.

Established hierarchies between the participants were immediately dismantled. At least, that was the idea. This meant that students and scientists, organizational participants and field experts were stimulated to feel the same opportunities to contribute to the experimental process. Such *antistructure* was stimulated in two ways. First of all, it was emphasized by the facilitators at the beginning of the experiment and thereafter repetitively articulated. As such, it was noted as an important ‘shared’ rule in the experimental time-space (resonating with the idea of *removal*) (fieldnotes 2017). Secondly, emphasis was placed on the fact that all participants, somehow knew one another personally. It was an experiment for *intimae* and supposed to be a safe, yet challenging environment.

The hierarchies between participants were as such ‘articulately’ dissolved. Meanwhile, the participating designers acted as *liturgy specialists* and as such controlled the experimental process and content. Two of the designers introduced themselves as the experiment’s facilitators. Three other designers, each navigated one of the teams through the different stages of the design-thinking process. Each of these designers had a portfolio that testified to their ability to: a) think creatively; b) reason from the perspective of end users; and c) make linkages between organizational problems, societal developments, and different forms of knowledge and people’s needs and desires (interview with the experiment’s facilitators 2018).

Besides emphasizing the importance of antistructure and introducing the designers that would join the teams, the facilitators firmly nested the experiment itself into a design-thinker’s ethos. Firstly, the facilitators used a potent mixture of everyday yet powerful and promising words, such as *radical change* and *revolution*; as well as design technical jargon, such as *divergence* and *convergence* (fieldnotes 2017). Secondly, the facilitators gave two tasks to the participants: a) to turn wicked problems into creative solutions; and b) to think from the perspective of end users. Thirdly, the experiment itself was divided into

four different stages, resonating with the double diamond model (British Design Council 2005, see figure 5). There was a research phase in which the organizational problem was to be further explored 'divergent thinking' and defined 'convergent thinking'. Thereafter, there was a design phase in which different solutions were to be proposed and developed 'divergent thinking', whereafter one of these solutions would be chosen and implemented 'convergent thinking'. Each of these stages was complemented with events that would stimulate participants in their divergent/convergent thinking.



**Figure 5:** Double diamond and its stages (British Design Council 2005)

During the design-thinking experiment, representatives of the Inspectorate were off to a rough start. They needed to deal with two initial problems. Firstly, as outlined above, the designers placed strong emphasis on reasoning from the perspective of end users (read patients). The Inspectorate was however not directly providing services to such end users, even though they used care receivers as informants to gain insight into the care and support provided to them. Instead, with their audits and inspection reports, the Inspectorate targeted professionals and policymakers (fieldnotes 2017). Secondly, representatives of the Inspectorate needed to convince other participants (especially the other healthcare organizations) that they were different from the inspectorates that these others had in mind. Instead of judges of the quality and safety of healthcare, they wanted to facilitate the improvements and integration of these healthcare services (fieldnotes 2017). Interestingly, both problems strengthened the participating inspectors' convictions that they needed to present themselves differently. Their main challenge was framed as follows: *'How do we make sure that professionals use our findings to improve the quality and safety of care?'* (fieldnotes 2017)

As part of the schedule of the day, the liturgy contained several distinct elements. For example, a researcher presented a collection of colourful and inspiring trends and innovations. Experts were invited to join the design-thinking groups from a certain moment onwards, and a market was organized in order for organizational representatives to present their preliminary solutions to invited guests (amongst which several healthcare professionals, policymakers, researchers, and marketing experts).

One such element stood out according to the organizational representatives of the Inspectorate (interview 2018). Early on, during the exploration phase of the organizational problems, a professional tango dancer asked a representative of each organization about their organization and the problem they were facing (see figure 6). After that, he started dancing, being led by, as he explained himself: *'whatever he sensed was the right move to make.'* (paraphrase from fieldnotes 2017) The dance was interrupted several times to reflect on how the dance represented the problems of the organization. The dance was supposed to give participants a mirror image of their own organizations through a medium other than words (fieldnotes 2017). As such, the dance helped either in narrowing down or opening up how participants thought about their organizational problems. The dancer danced the Inspectorate as a group that wanted to collaborate but was avoided by others. In this light, the dance could be interpreted as an embodied translation of the problem that the organizations had already articulated.



**Figure 6:** The dance (photo: Stuart Acker Holt)

Nevertheless, something important happened during the dance. In the words of an inspector: *'The most important lesson we learned is that we actually did not realize that we are so threatening to others... that nobody really wants to work with us...'* (interview 2018) The dancer thus confronted these organizational representatives with an image of their organization that they did not feel comfortable with. Strangely enough, this interpretation reinforced the Inspectorate representatives' convictions that their organization was on the right track (they thought of their organization as being different from the one performed in the dance as they believed they were not threatening at all, but helpful). The dance urged organizational representatives to explicate to others what their 'true' organizational nature was: *'the dance is not who we are actually.'* (interview 2018)

Following the dance, the facilitators allowed organizational representatives to articulate a desired future and ideas about how to get there. It created a time-space for organizational representatives to contemplate. In the words of an inspector: *'Now we had the chance to really share ideas with one another... Normally and under pressure of time, we do not really develop our ideas further.'* (interview 2018) In the sessions that followed, the Inspectorate explored different solutions to their challenge. Solutions that resonated within the design-thinking group were: *'let local parties chose the themes of inspection'*; *'let municipalities inspect one another'*; and *'let professionals write the recommendations.'* (documented materials during the sessions 2017) A solution supported by most representatives of the Inspectorate was: *'never again produce an inspection report.'* (documented materials during the sessions, 2017) In an effort to combine the latter with some of the other solutions presented, the inspectors framed the following solution as the outcome of their design-thinking challenge: *'To not produce an inspection report and let professionals themselves write recommendations.'* (documented materials during the sessions 2017) They had thus stayed very close to the suggestions already articulated in the preparatory meeting (see epigraph).

In the time-space outside the confines of their organizational routines, pieces were falling in place for the organizational representatives. In case of the Inspectorate: a) leaving out a report would make the Inspectorate seem less scary (in response to the dance); and b) letting professionals formulate their own points for improvement would create ownership amongst professionals for the problems that needed to be solved (in response to their challenge to create more impact and continuity). Moreover, c) one of the inspectors was involved in an experiment using mystery guests with a minor mental disability in order to better understand how they received and perceived social services. That experimental setting was considered to be a great opportunity to test the leaving out of an inspection report (fieldnotes 2017).

## Aftermath

The first Monday after the design-thinking sessions ended, one of the participating inspectors contacted the council of collaborating inspectorates.

*'I told them that we wanted to mobilize professionals and policymakers to make changes and that the delivery of a report was in our way... That we wanted to leave out the delivery of an inspection report... They told me this was possible under the condition that its results would be evaluated...'* (interview 2018)

This response of the council allowed the inspectors to embed the omission of an inspection report in the experiment with mystery guests that was already being implemented. Concretely, it would mean that alternatives to the inspection report were going to be sought in that experiment with mystery guests.

*'We organized a meeting with professionals and managers and instead of writing a report ourselves, they now needed to tell us what they thought was of importance... What went well and what should be improved... We asked them what they need in order to change things.'* (inspector, interview 2018)

Even though the results of the experiment still need to be evaluated, it is already interesting to observe here that it took a design-thinking session to change ideas about alternative courses of action already-existing amongst the Inspectorate's representatives (omitting the inspection report) into an alternative organizational strategy that gained enough legitimacy to be implemented on an experimental basis (being embedded in another experiment).

In November 2018, the experiment with mystery guests received the Dutch innovation price. In the words of the jury: *'it takes courage to use this target group as a mystery guest and to appeal to the intrinsic motivation of municipalities instead of the raised finger as a supervisor.'* (Ministry of Social Affairs 2018), the latter hinting at the omission of a summative inspection report.

## Design thinking as a change strategy

Based on our reconstruction, we draw the preliminary conclusion that, at least ideas wise, not much *revolutionary* (to use a word from the design-thinking ethos) happened during the design-thinking experiment. The Inspectorate had used the experiment to solidify insights that had been floating amongst its representatives and had been previously articulated in a PhD thesis. In a similar vein, the home care organization saw it as another step

in revising – and making more concrete – its organizational strategy (director of the home care organization, interview 2018). The insurer used it to convince more regional offices to embrace its revived community-based strategy (head of department, interview 2018).

How can we explain that every organizational representative that had participated in the design-thinking experiment had framed it as *'a source of change'* (director of the home care organization, interview 2018)? Moreover, how could it be possible that recommendations at the end of an inspector's six-year PhD thesis only took two design-thinking sessions in order to turn from theoretical suggestions into an implementable solution? To better understand the impact of the design-thinking sessions, we discussed the results of our assessment with the organizational representatives that had participated. In the next paragraphs, we present some of their responses and identify two ways in which the experiment contributed to the emergence and materialization of solutions.

### **Design thinking as a catalyst**

In Spring House, far away from their daily tasks and routines, participants had a chance to really talk to one another: *'we could collect, connect, and substantiate ideas that had never been properly tended to.'* (inspector, interview 2018) Such productivity ascribed to the experiment is by Johnson and colleagues (2010) typically related to the idea of *removal*.

The experiment fostered such removal spatially by being staged far away from the participants' organizations. However, the design-thinking sessions were more than a gathering of organizational representatives outside the confines of their organization. Participants were exposed to a plethora of events in this faraway space, such as the dance. Moreover, they were exposed to a liturgy that was new to them; a blend of revolutionary language and design methodologies. Indeed, as another inspector reflects on these different events: *'it was one surprise after another, truly I still do not fully comprehend what we have experienced.'* (interview 2018) Some of these experiences were dissonant, frustrating, and incomprehensible for the participating inspectors: *'That continuous emphasis on end users, I did not fully understand it and it did not seem to fit our cause.'* (interview 2018) Others were more compatible: *'we invited some local general practitioners, we immediately understood one another and said: "let's do this."'* (director of the home care organization, interview 2018)

Above-mentioned *removal* and *liturgy* boosted the *communitas* amongst the experiment's participants. For the participating inspectors, such *communitas* developed in three iterative ways. Firstly, they experienced that 'organizational others' had talked about and danced their inspectorate incorrectly. This triggered the participating inspectors to actively (re) present their organization and explain to others who they (the Inspectorate) really were and what their contemporary organizational problem actually was (fieldnotes 2017).

Secondly, in response to the experienced dissonance, participating inspectors teamed up. They formed a bond, sticking together even when the experimental setup asked them to disband; invoking small rebellious acts during the experiment's unfolding (fieldnotes 2017; cf. Wallenburg et al. 2019). They needed one another to make sense of – and control – what was happening around them and the problem(s) and solutions they had been articulating (inspector, interview 2018). Thirdly, the sheer magnitude of experiences that participating inspectors were exposed to forced them to differentiate between what was and what was not helpful to solve *their* contemporary organizational problem. At some point during the first day, the inspectors, for instance, rebelled against one of the designers that wanted to push them to focus on end users (people with an intellectual disability) in their solution to be designed. As inspectorate, they instead wanted to focus on the professionals and municipalities that were providing services to people with a minor mental disability (fieldnotes 2017).

These observations resonate with the argument that interaction is an important medium through which new organizational frames emerge and substantiate (Schmidt 2010). Indeed, the facilitators of the design-thinking experiment heavily invested in the fostering of interactions both amongst organizational representatives and amongst organizational representatives and organizational others. But we also noticed that the participating inspectors responded to this interactive experimental setup by: a) staying together and increasing ownership over the problem to be articulated and solution to be designed; b) differentiating between what fitted and did not fit *their* problem; and c) drawing on their own knowledge and experience in order to find a solution to the problem defined. In our case, this meant connecting the project of one of the inspectors (the experiment with mystery guests) to the research findings of another inspector (in which the effects of summative inspection reports were problematized).

*Removal, liturgy, and communitas* thus indeed provided opportunity and necessity for organizational representatives to rearticulate and substantiate ideas they had previously been playing with within their organizations (Johnson et al. 2010). At the same time, during the experiment's unfolding, organizational representatives also carefully excluded dissonant perspectives and information from their organizational problem to be articulated and alternative organizational strategy to be designed. The experiment and its design-thinking methodology thus typically functioned as a catalyst. Instead of building upon the designer's creativity as a source of inspiration and change (cf. Julier 2008; Kimbell 2011), the experiment boosted what had been already been brewing amongst organizational representatives and allowed for the participating inspectors to craft their ideas into an implementable solution (Vaara and Whittington 2012).

## Design thinking as legitimator

Another way in which the design-thinking experiment had impact has not been described in so many words by organizational representatives. Nevertheless, we could observe it almost continuously, yet in different forms. During the design-thinking sessions, there was this air of complexity and incomprehensibility floating about. Liturgy and liturgy specialists played a key role here (fieldnotes 2017); below we explain how.

As previously described, design thinking was introduced as a specific methodology, referring to various authors and models, giving it an analytical, even absolute, appearance. This design-thinking methodology was furthermore presented and implemented by several designers. The facilitators took great care in introducing themselves and the other designers and their portfolios (field observations 2018). In addition, university representatives were participating and the experiment itself was funded by the European Union (fieldnotes 2017). Ample time and space was taken in making all these things explicit.

Not only did this add up to a somewhat exclusive, fun, and bustling environment to be part of (derived from our own experiences noted down in our fieldnotes 2017), it also affected the ideas of the participating organizational representatives. On the one hand, in the words of the director of the home care organization: *'The sessions strengthened our conviction that we were on the right track.'* (interview 2017) On the other hand, it could also be used by organizational representatives to convince their organizational peers upon their return that they brought back something valuable. *'Because the university had been present, suddenly that and that person became impressed with what we were doing.'* (insurer, interview 2018)

Running their ideas through the design-thinking experiment helped organizational representatives to legitimate their ideas in the eyes of organizational peers. Participants went home with an alternative organizational strategy that was substantiated in an experiment that was funded by the European Union and facilitated by renowned designers in collaboration with a well-known university. In case of the Inspectorate, the solution that the participating inspectors had been piecing together had gained enough status to become embedded into an already-initiated experiment with mystery guests in monitoring the care and services provided to people with a minor mental disability.

## Conclusion

We aimed to better understand the potential of design-thinking experiments for healthcare organizations trying to reconfigure their roles and services in response to shifting principles

and actor relations in the governance of care. We formulated the following research question: *How does design thinking contribute to the generation of alternative organizational strategies for the contemporary problems of healthcare organizations in the Netherlands?*

To answer our research question, we examined how, over the course of a design-thinking experiment's unfolding, participants worked towards alternative organizational strategies. In doing so, we took Johnson and colleagues' (2010) line of analysis one step further. They used the anthropological literature on *ritualization* in order to study which characteristics make a strategy workshop – in our case the design-thinking experiment – a legitimate activity as experienced by participants. Instead, we studied how within the design-thinking experiment, as a more or less ritualized episode, alternative organizational strategies emerged through the practices of those involved (Vaara and Whittington 2012).

We observed that *removal* provided a time-space for participants to rearticulate and substantiate ideas they had already been playing with within their organizations. Meanwhile, their exposure to an extra-ordinary *liturgy* forced these participants to stick together and to take ownership over the problem to be articulated and solution to be designed and implemented. In this light, participants carefully excluded dissonant perspectives and perpetuated ideas that had already been brewing amongst themselves and within their organizations. On the one hand, the experiment successfully provoked participants to do so. On the other hand, dissonant contributions of organizational others never became part of the solutions to be implemented. As such, the design-thinking experiment typically contributed to the generation of alternative organizational strategies by functioning as a *catalyst*.

However, being a catalyst was not all there was to the experiment. Running their ideas through the design-thinking experiment also helped participants to legitimate their ideas in the eyes of organizational peers upon their return. In fact, after the EU-funded and university-supported design-thinking experiment, the previously precluded idea of omitting an inspection report had suddenly gained enough status within the Inspectorate to become provisionally embedded into an already-initiated, high-profile experiment with mystery guests. As such, the design-thinking experiment also contributed by functioning as a *legitimator*.

In the design-thinking literature, design thinking is described as a depoliticized way of working that is detached from everyday organizational routines (Kimbell 2011). We however argue that design-thinking experiments are very political processes. We observed a politics of including and excluding insights from organizational others during the experiments unfolding. In this process, the way in which organizational representatives perceived their

own organization's role served as a main frame of reference and was – to a large extent – reproduced (e.g. Felder et al. 2018a). Moreover, we observed a politics of repositioning. Organizations wanted to demonstrate to organizational others who they really were and what they could and could not do for organizational others (e.g. Felder et al. 2018b).

Such observed politics is however not necessarily unproductive (Zuiderent-Jerak 2015). The ritualized design-thinking experiment catalyzed the imaginaries of participating organizational representatives into legitimate alternative organizational strategies. It endorsed the participating organizational representatives to craft ideas together and embed them into broader organizational developments (Vaara and Whittington 2012). In our case, the precluded idea of omitting an inspection report materialized as part of the inspectorate's high-profile and award-winning experiment with mystery guests in monitoring care and support provided to people with a minor mental disability.

In this article, we have specifically foregrounded the Inspectorate. In doing so, we backgrounded the ways in which the design-thinking experiment contributed to the development of alternative organizational strategies for the participating home care organization and insurer. Even though representatives of these organizations also described the experiment as a source of change, we also noticed that both organizations had a history in organizing design thinking sessions. Somehow, design thinking had become embedded in their organizational routines. But in doing so, it also lost some of its episodic and removed characteristics. Instead, it seemed to have become a parallel, but mainstream time-space in which organizations discussed – but also parked – organizational challenges and solutions. This observation implies that design thinking can have very different significance for the organizations that try to harness it to reconfigure their roles and services. More research is necessary in order to better understand whether and how such routinized experimental time-spaces resonate with and contribute to everyday organizational changes.

## References

- Berwick, D. M. (2016). Era 3 for medicine and health care. *Jama* 315(13), 1329-1330.
- Bourque, N., and Johnson, G. (2008). Strategy workshops and “away days” as ritual. In G. P. Hodgkinson and W. H. Starbuck (eds), *The Oxford Handbook of Organizational Decision Making* (pp. 552-564). Oxford: Oxford University Press.
- British Design Council (2005). *The Double Diamond: A universally accepted depiction of the design process*. Retrieved from: [www.designcouncil.org.uk](http://www.designcouncil.org.uk). Last accessed, 10 April 2020.
- Brown, T. (2008). Design thinking. *Harvard Business Review*, 86(6), 84.
- Brown, T. (2009). *Change by design: How design thinking creates new alternatives for business and society*. New York: Harper Collins Publishers.
- Brown, T., and Wyatt, J. (2010). Design thinking for social innovation. *Development Outreach*, 12(1), 29- 43.
- Buchanan, R. (1992). Wicked problems in design thinking. *Design Issues*, 8(2), 5-21.
- Clark, A., Holland, C., Katz, J., et al. (2009). Learning to see: Lessons from a participatory observation research project in public spaces. *International Journal of Social Research Methodology*, 12(4), 345-360.
- Doherty, W. J., and Mendenhall, T. J. (2006). Citizen health care: A model for engaging patients, families, and communities as co-producers of health. *Families, Systems, & Health*, 24(3), 251.
- Eines, T. F., and Vatne, S. (2018). Nurses and nurse assistants’ experiences with using a design thinking approach to innovation in a nursing home. *Journal of Nursing Management*, 26(4), 425-431.
- EIT Health (2018). *Homepage*. Retrieved from: [www.eithealth.eu](http://www.eithealth.eu). Last accessed, 9 March 2019.
- Epstein, R. M., and Street, R. L. (2011). The values and value of patient-centered care. *Annals of Family Medicine*, 9(2), 100-103.
- Felder, M., Van de Bovenkamp, H. M., and De Bont, A. A. (2018a). Politics of policy learning: Evaluating an experiment on free pricing arrangements in Dutch dental care. *Evaluation*, 24(1), 6-25.
- Felder, M., Van de Bovenkamp, H. M., Maaijen, M. M. H., et al. (2018b). Together alone: Organizing integrated, patient-centered primary care in the layered institutional context of Dutch healthcare governance. *Journal of Professions and Organization*, 5(2), 88-105.
- Johnson, G., Prashantham, S., and Floyd, S. W. (2006). Toward a mid-range theory of strategy workshops. *Advanced Institute of Management Research Paper*, 035.
- Johnson, G., Prashantham, S., Floyd, S. W., et al. (2010). The ritualization of strategy workshops. *Organization Studies*, 31(12), 1589-1618.
- Julier, G. (2008). *The Culture of Design* (2nd edition). London: Sage.
- Kimbell, L. (2011). Rethinking design thinking: Part I. *Design and Culture*, 3(3), 285-306.
- Kimbell, L. (2012). Rethinking design thinking: Part II. *Design and Culture*, 4(2), 129-148.
- Martin, R. L. (2009). *The design of business: Why design thinking is the next competitive advantage*. Boston: Harvard Business Press.
- Ministry of Social Affairs (2018). *Inspecties winnen innovatieprijs Handhaving en Toezicht 2018*. Retrieved from: [www.inspectieszw.nl](http://www.inspectieszw.nl). Last accessed, 9 April 2020.
- Mootee, I. (2013). *Design thinking for strategic innovation: What they can't teach you at business or design school*. Hoboken: John Wiley & Sons.
- Mortelmans, D. (2013). *Handboek kwalitatieve onderzoeksmethoden*. Leuven: Acco.

- Roberts, J. P., Fisher, T. R., Trowbridge, M. J., and Bent, C. (2016). A design thinking framework for healthcare management and innovation. *Healthcare*, 4(1), 11-14.
- Rutz, S. I., Adams, S. A., Buitendijk, S. E., et al. (2013). Hiding complexity, uncertainty and ambiguity: How inspectorates simplify issues to create enforceable action. *Health, Risk & Society*, 15(4), 363-379.
- Rutz, S. I., Mathew, D., Robben, P. B. M., et al. (2017). Enhancing responsiveness and consistency: Comparing the collective use of discretion and discretionary room at inspectorates in England and the Netherlands. *Regulation & Governance*, 11(1), 81-94.
- Schmidt, V. A. (2008). Discursive institutionalism: The explanatory power of ideas and discourse. *Annual Review of Political Science*, 11, 303-326.
- Schmidt, V. A. (2010). Taking ideas and discourse seriously: Explaining change through discursive institutionalism as the fourth 'new institutionalism'. *European Political Science Review*, 2(1), 1-25.
- Spring House (2019). *Welcome to Spring House: Home for innovators!* Retrieved from: [www.springhouse.nl](http://www.springhouse.nl). Last accessed, 10 April 2020.
- Timmermans, S., and Tavory, I. (2012). Theory construction in qualitative research: From grounded theory to abductive analysis. *Sociological Theory*, 30(3), 167-186.
- Toezicht Sociaal Domein (2018). *Homepage*. Retrieved from: [www.toezichtsociaaldomein.nl](http://www.toezichtsociaaldomein.nl). Last accessed, 5 March 2020.
- Vaara, E., and Whittington, R. (2012). Strategy-as-practice: Taking social practices seriously. *The Academy of Management Annals*, 6(1), 285-336.
- Wallenburg, I., Weggelaar, A. M., and Bal, R. (2019). Walking the tightrope: How rebels 'do' quality of care in healthcare organizations. *Journal of Health Organization and Management*, 33(7-8), 869-883.

## Appendix

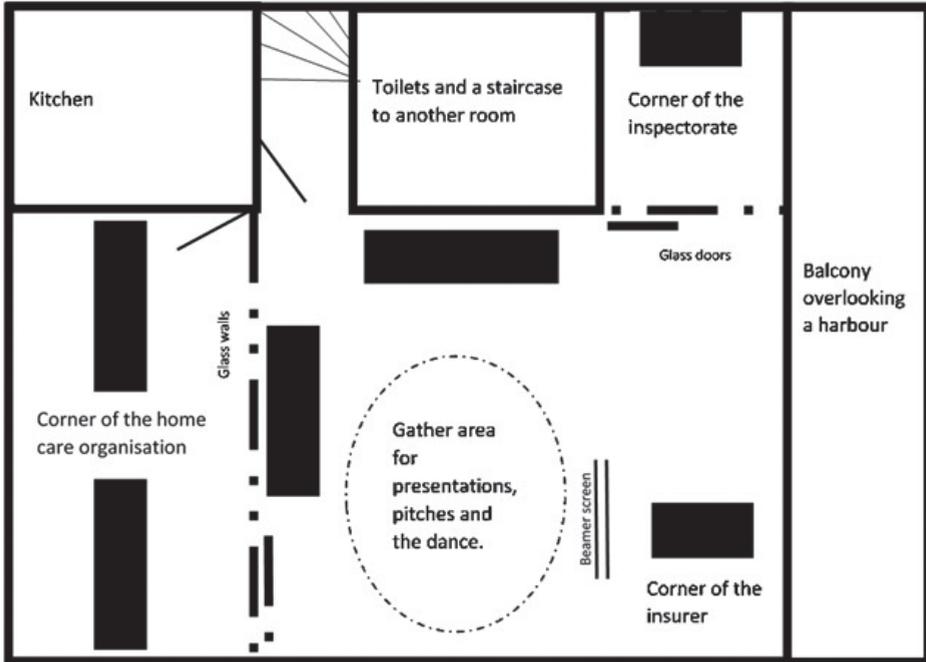


Figure 7: Map of the design-thinking experimental set-up (derived from fieldnotes 2017)