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Using modeling as a co-design approach in the planning process of new care environments

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Current research shows a relationship between healthcare architecture and patient-related Outcomes. The planning and designing of new healthcare environments is a complex process; the needs of the various end-users of the environment must be considered, including the patients, the patients' significant others, and the staff. The aim of this study was to explore the experiences of healthcare professionals participating in group modelling utilizing system dynamics in the pre-design phase of new healthcare environments. We engaged healthcare professionals in a series of workshops using system dynamics to discuss the planning of healthcare environments in the beginning of a construction, and then interviewed them about their experience. An explorative and qualitative design was used to describe participants' experiences of participating in the group modelling projects. Participants (n=20) were recruited from a larger intervention study using group modeling and system dynamics in planning and designing projects. The interviews were analysed by qualitative content analysis. Two themes were formed, representing the experiences in the group modeling process: 'Partaking in the G-M created knowledge and empowerment' and 'Partaking in the G-M was different from what was expected and required time and skills'. The method can support participants in design teams to focus more on their healthcare organization, their care activities and their aims rather than focusing on detailed layout solutions. This clarification is important when decisions about the design are discussed and prepared and will most likely lead to greater readiness for future building process.