The challenge of delivering quality health and social care services to a rapidly ageing population is one that the UK shares with many countries across Europe. That is why a coalition of partners in West Suffolk are looking at how a highly successful Dutch model could transform the English system.

Buurtzorg grew from a need to tackle ongoing concerns in the provision of care, such as: the fragmentation of prevention, treatment, and care; the impact of demographic change; a shortage of care providers; lowering quality and increasing costs of care; and, a lack information about the quality of outcomes in relation to the cost of care per client. All challenges similar to those facing the health and social care system in the UK.

It was established in 2006 with a team of four nurses working closely with GPs to deliver community care services, including both personal and health care. By 2016 it had grown to over 10,000 nurses working in 850 teams, working with over 70,000 clients.

Buurtzorg has shown that a single visit by a highly-trained, generalist nurse given sufficient time to care is more effective than care divided into separate processes, delivered by individuals paid at a relative rate to the task.

“It empowers nurses to take a holistic, person centred approach”

The benefit to the client is that the team identifies solutions quicker, are able to improve independence and streamline care more effectively. The personalised attention and team approach allows individuals to stay in their homes and communities for as long as possible and avoid unnecessary hospital admission.

Working at a neighbourhood level is also key in allowing the nurses to work closely with GPs and other professionals, and draw on local support from friends, families and volunteers.

The model also introduces a new way of working. Buurtzorg nurses work in self-managing teams of up to twelve professionals who provide care for around 50 clients in a specific locality. The self-managed teams, with minimal bureaucracy, handle every aspect of care and business. Technology also plays a key role in supporting the devolved structure.

“It is built on a foundation of small, self-managed teams linked to neighbourhoods and their communities”

All this has resulted in significantly lower overheads (8% compared to 25%), alongside better overall outcomes for not only clients, but employees too.

The benefit to staff is the professional freedom and responsibility that comes with supervising and supporting each other in self-managed teams. Coaches not managers support the team and the nurses decide how the care will be provided to their clients. This encourages flexibility and improves staff satisfaction.

FOLLOW OUR JOURNEY

We are establishing one test and learn team in West Suffolk, to learn, over the course of the 12 month test period, how to successfully transplant the Buurtzorg model established in the Netherlands into the English system.

We will be blogging about our experiences and journey on www.eelga.gov.uk.