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Buurtzorg: better care for lower cost

Buurtzorg – Quick Scan

- New organization and care delivery model
- Started in 2007 with 1 team/4 nurses
- Delivering Community Care/working together GP's
- 2013: 6500 nurses in 630 independent teams.
- 35 staff at the back office and 15 coaches
- 60.000 patients a year



Results policy on homecare 2006

- Fragmentation of cure, care, prevention
- Standardization of care-activities
- Lower quality / higher costs: wrong incentives: delivering much care against low cost is profitable
- Big capacity problems due to demographic developments (shortage of 400.000 nurses within 10 years)
- Clients confronted with many caregivers
- Information on costs per client/outcomes: none!

Start Buurtzorg 2007

Starting an organization and care delivery model for community care with:

- **independent teams** of max 12 nurses
- Working in a neighborhood of 10.000 inh.
- who organize and are responsible for the **complete process**:
 - clients, nurses, planning, education and finance;
 - and all kind off coordination activities!!!!



(Self)-Organisation

- Optimal autonomy and no hierarchy
- Complexity reduction (also with the use of ICT)
- Max of 12 nurses a team, 40 à 50 clients
- Assessment and taking care of all types of clients: generalists!
- 70% registered nurses
- Their own education budget
- Informal networks in the neighborhood and close collaboration with GP's



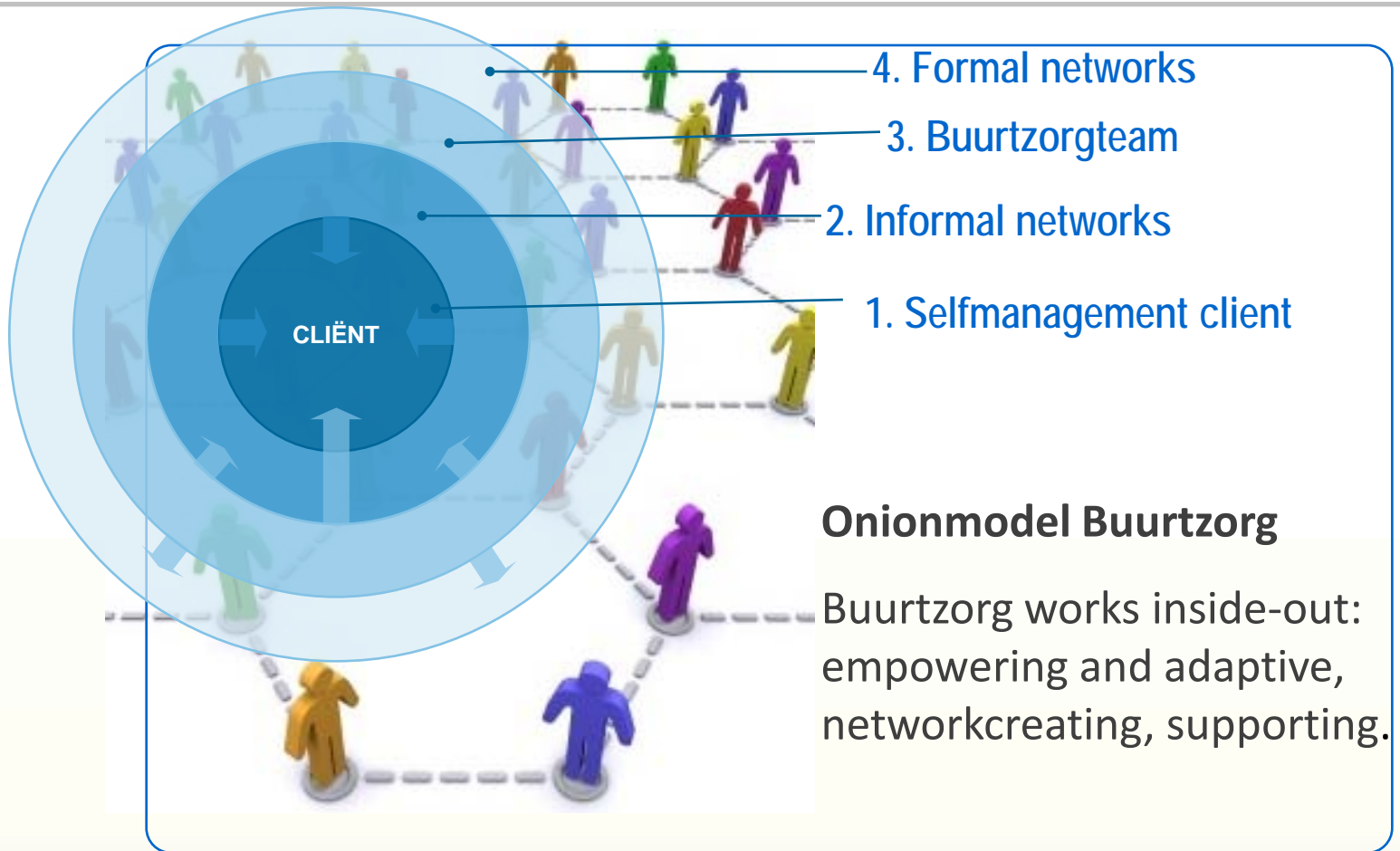
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Different types of clients

- Chronically ill and functionally disabled clients
- Elderly clients with multiple pathology
- Clients in a terminal phase
- Clients with symptoms of dementia
- Clients who are released from the hospital and are not yet fully recovered

Vision: support independence!



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Quality system

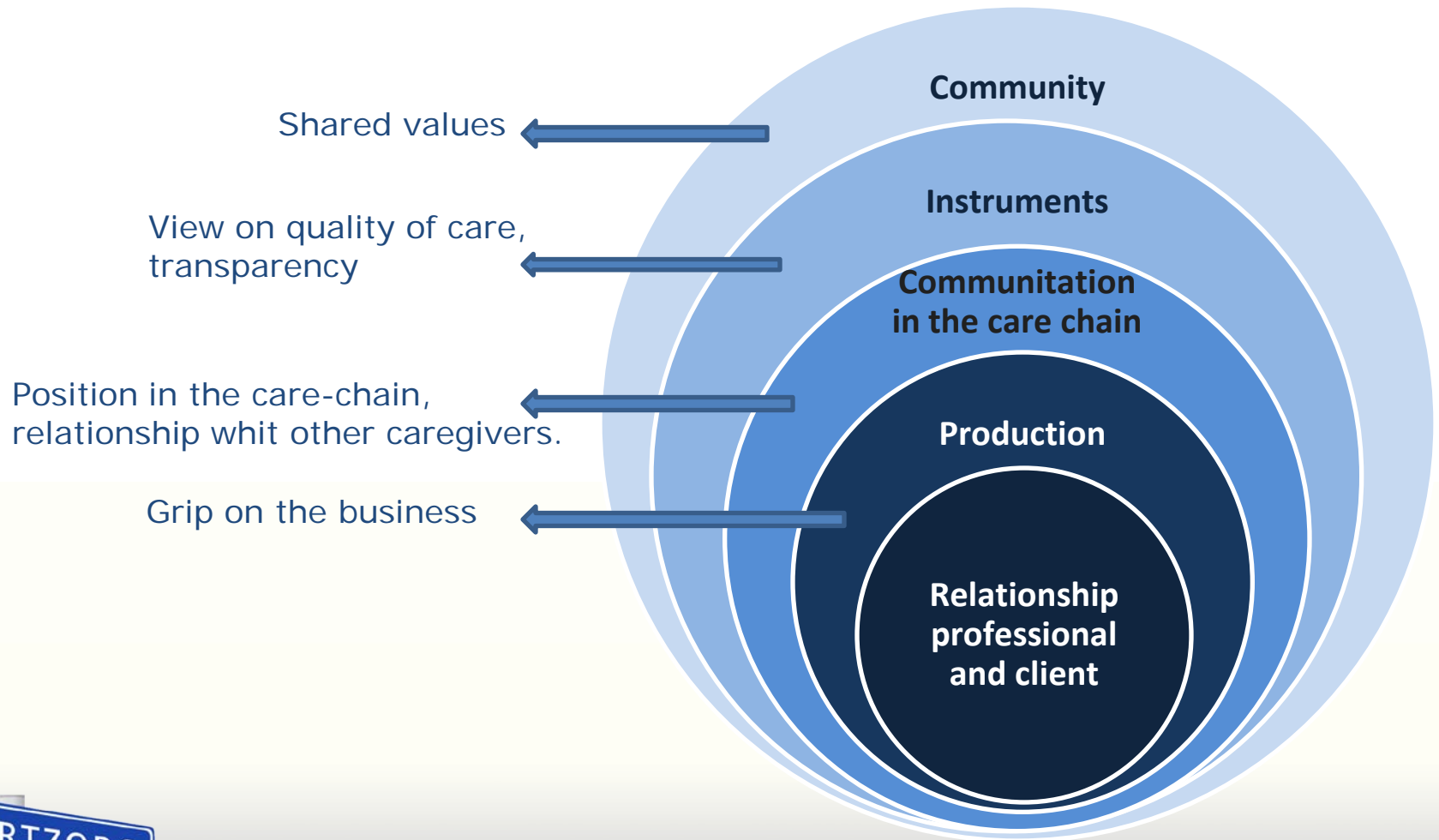
- Monitoring outcome instead of production: the Omaha system: Big Data on problems, interventions and outcome
- Roles and activities instead of processes
- High education level: 70% is RN (average 10%)
- Buurtzorg academy: the new bachelor nurse
- And of course: clientsatisfaction!



Supporting the independent teams

- 35 people in 1 back office; 15 coaches, managers 0!
- Taking care of inevitable bureaucracy, so the nurses won't be bothered with it!
 - The care is charged.
 - The employees are paid
 - Making financial statements

ICT makes it possible! - Buurtzorgweb



Buurtzorgweb – some aspects

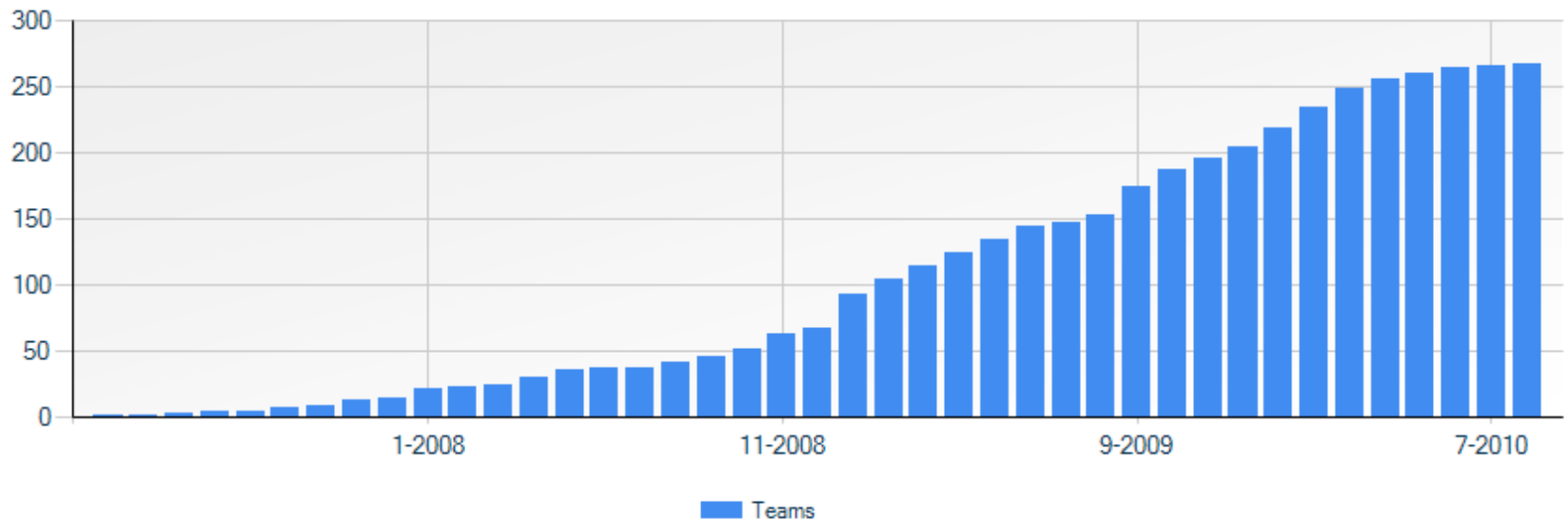
- Community
- Clients and employees data
- Hour registration.
- Sharing documents
- All the necessary administration for accountability to cost providers, inspection etc.
- Planning



Community

- Shared values. Nurses work all over the country but feel like 'one'
- Nurses can ask for good examples from colleagues all over the country.
- Man. Dir. can easily check the ideas of the teams
- The back office has an easy way of communication with all the nurses
- Contact between nurses and informal care and other caregivers from the neighborhood

Buurtzorg is Dutch most fast growing organization



Started in 2007

2013: 6500 nurses in 630 teams



Buurtzorg in the whole country



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Satisfied employees

- Thousands of nurses quit their job at traditional organization and went to work for Buurtzorg
- They appreciate:
 - Working in small teams
 - Working autonomous
 - Independency
 - Strong teamspirit
 - User-friendly ICT
- Price for best employer of the year 2011/2012





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Satisfied clients

- Good quality of care.
- "Compared to 307 other organizations for community care they give the highest score to Buurtzorg. (NIVEL 2009)"
- from 2010: highest clientsatisfaction rates: 9,0
- Supported by patient- and elderly organizations

Radio Steunkous



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Rollatorrace

[http://www.yout
ube.com/watch?
v=Q-fPDrN5pBU](http://www.youtube.com/watch?v=Q-fPDrN5pBU)

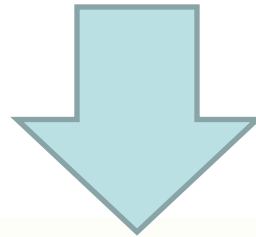


Cost effectiveness for the organization

- Overhead costs: 8% (average 25%) → more money for the care and innovation
- Profit rate: 8% (Buurtzorg is NON profit)
- Sickness rate: 3% (average 7%)

Cost Benefits for the Care!

- The home care would be $\frac{1}{2}$ the costs (Buurtzorgs model leads to more prevention, a shorter period of care and less spending on overhead)
- More satisfied employees and clients



- The government and all political parties are stimulating other care organizations to work like Buurtzorg.
- Other sectors are interested in the organization model





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A black and white photograph of a park bench. The bench is made of wooden slats and has a blue sign with white text that reads "BUURTZORG". The bench is situated in a park-like setting with trees and grass in the background. Another bench is visible in the distance to the left.

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Thank you for your attention