

Workforce (Wednesday 4 July, 15.30 – 16.45)

Will a Dutch (Buurtzorg) model of provision address challenges in English district nursing?

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Background

District nursing as a home visiting nursing service is facing increasing demands and difficulties in recruiting and retaining staff in many areas of the United Kingdom. The Dutch social enterprise company, Buurtzorg, offers one model that emphasises patient centred care and also has self-managing teams of nurses . The nurse teams have no managers but access to a coach. Buurtzorg is reported to achieve high levels of patient and staff satisfaction, including high levels of retention . The Buurtzorg model of district nursing has attracted the interest of policy makers in many countries. It is being introduced in a number including the United States, Norway , China and three countries of the United Kingdom. This presentation reports on the evaluation of the introduction of an adapted Buurtzorg model in one team in the National Health Service in England.

Methods

This mixed methods case study included semi structured interviews (patients , nurses , general practitioners, managers), observation of nursing practice , documentary analysis and analysis of anonymised patient records. Data collection was January– August 2017.

Results

The evaluation reported positive experiences and outcomes from patients, specialist nurses, general practitioners in comparison with currently organised district nursing. The nursing practice included provision of personal care and meal preparation for short periods which is usually undertaken by social care in England. The nurses reported great satisfaction but also challenges. Not all nurses offered posts took them and nurses starting also left the team. The infrastructure systems and many parts of the organisation struggled with the concept of a self-organising team with no managers.

Implications

The evaluation demonstrated that this model that shows promise. It raised questions as to whether some of the innovation and efficiencies in this team's nursing practice were transferable more widely to the district nursing service. It also

raised questions about the acceptability of self-governing teams with large health care organisations. Further investigation is required in answering questions of cost effectiveness over a longer period.