High Performance Teams

National Disability Services

# Slide 1

## Belinda

Okay, thank you for joining us today everybody. I’d like to welcome Yumi Stamet, who is on the line and will be facilitating the webinar today. Yumi is NDS’s National Workforce Advisor. She works collaboratively with disability service providers and other stakeholders to address workforce issues, and mainly in response to the roll-out of the NDIS. Her current work focus is workforce innovation, and you’ll be hearing quite a bit about that today in terms of high performance working.

High performance working is a way of engaging the creativity of the workforce to provide tailored service while the management of the organisation shifts from a supervisory role to a supportive role, so it’s quite a different way of managing your team potential.

## Yumi Stamet

Thank you, Belinda, and thank you all for joining us on this webinar. This is a webinar about high performance teams, and I wanted to take you today through a couple of things. I would like to take you through some background of why we’re looking at high performance teams and what it actually means. I’ll give you a few examples as well, and then open up to questions and answers.

But yeah, today I’ve been asked to tell you a bit more about the different models that NDS has been supporting organisations to explore and implement in their organisations, and that have been models that have proven to make organisations more responsive to client needs, more flexible, being able to cope with rapid change, be more productive, innovative, and not in the least able to offer high-quality work to their workforce, which in this new environment of the NDIS is their real competitive advantage.

So let’s start with that why: Why are we looking at this, and why does it make sense to look at high performance teams?

# Slide 2

To explain it I’d like to take you to this slide, which shows a quite simple depiction of the situation before the NDIS. So in that one, government funding went to disability service providers with block funding to fund providers to deliver programs and supports to people with disabilities as agreed to between government and the service providers, with the service users really just receiving what was on offer through these programs and supports. Within this framework, government held senior management responsible for the allocation of this funding, and due to the growing accountability requirements organisational structures and systems and layers developed within an organisation to manage all this responsibility and accountability down through the rest of the organisation, and that’s why many organisations in our current systems look a bit like pyramids, with the smaller top, senior management, so middle management layer and back office layers and frontline, and decision-making power clearly running from the top of the organisation downwards to the frontline.

Now, under NDIS it’s actually service users that are receiving the funding, and through that have the choice, control, and also the purchasing power, and organisations will be competing on delivering the level of quality that the service users, so your participants, actually are looking for. And what a lot of the organisations are starting to realise in this NDIS space is that, yeah, this level of quality that service users are looking for is actually unique to each and every person, because it is about their lives, about their goals, how they want to live their lives, and, yeah, it’s quite clear that that is unique for each and every person.

So what you deliver in services, you could deliver the exact same service, for example, to me as to Belinda, but we are two different people who have different outlooks on life, different things that we want out of life. So I might like the way you provide the service, but Belinda might actually not, because she has a different way of how she would like to be supported. So it’s really a challenge in this space where now participants have the choice and control and that purchasing power, and they interact directly with frontline, not senior management, making frontline the ones with the real detailed knowledge of what services need to look like, and what they need to achieve to deliver quality.

So this realisation that the key relationships now exist between frontline and service users, and that this is where the determination of the quality of service is actually happening has made organisations think of how can they do things differently, because the service user will now hold frontline responsible and accountable for quality of service, and it will need to be tailored to each individual’s unique needs and wishes, so this has a big impact on all levels of the organisation.

And that realisation, that there is this big change and shift happening, has inspired new models of service delivery, and these models of service delivery have really looked at how can you almost tip that pyramid around and flip the decision-making power from what we had previously, from senior manager to frontline, to really putting the power back to service users.

So to show you what that looks like, it’s really tipping that pyramid around, and that’s really being able to acknowledge the relationship between individual service users and the frontline, and that it is there that you need to be flexible and responsive to what service users want and need.

So for the front line, this means that they need to be really responsive, flexible, but also still effective and efficient in supporting the unique individual service user needs, and to be able to do that they need to be able and empowered to work and decide directly with participants how they deliver the service, and giving them a lot more autonomy in how they do their job and how they work with participants and their families and carers to find the best way of supporting each and every individual.

For middle management and support functions, for example in the back office, it means that their focus shifts a lot more to supporting, coaching and advising the frontline to enable them to do this, and how to best do this, instead of – yeah, a lot of middle management and back office functions are looking at now is more like checking and controlling and even directing the work to make sure that what is happening is compliant to what has been agreed to with government, and what is in the policies, procedures and processes of the organisation. But now their job is a lot more to coach and to advise and to actually develop practices and processes that accommodate for flexibility and responsiveness.

For senior management, the task is more about creating a very strong vision to guide all this work so that people throughout the organisation know why they are working in this way, and know how to work in such a way that it is aligned to the organisational purpose and its values. It’s also about guiding the organisation through this change, because this is a big change for organisations and it touches every single element of it, and when the change is on its way, it’s also about really reinforcing that vision.

And also handling the organisation’s external environment, because for a lot of organisations that have started working in this way, they found that organisations like, for example, government, the agency, auditors, really struggled to understand what this is really about and that this is different from a traditional hierarchy, and that this also needs to be looked at from a different perspective to really understand where the benefits of all these are.

Now, because this is a webinar for national disability practitioners, I also wanted to focus a little bit more what happens at the practitioner’s side of things, so focus more on what happens at the frontline, and to do that I want to use this slide.

# Slide 3

So what these organisations that have tipped that pyramid around have realised is that the real added value of their organisation lies in that dynamic interaction between the frontline worker and the participant. So when the frontline worker can really, truly focus on the participants, their families, their carers, and their needs and goals and environment, that’s when they really start forming a partnership. And it’s about a dialogue, listening and talking to people and really experimenting about finding new ways to reach the goals and maximise the potential. And if that happens well, that’s when the real, yeah, almost magic in our sector happens, that really great outcomes come out of this.

And that really happens when we place this responsibility for quality of service at that frontline with not only the frontline worker, but also the participant. So making sure that they work together and co-design the actual services for the participant and the family and carer in such a way that it really fits how they want to live their lives.

However, what we’ve been seeing in the last couple of years in our organisations and in our sector is through the need to control risk, manage the accountability and compliance, we’ve put in place a lot of policies, processes, procedure, guidelines, systems, structures, hierarchies, all these things, and we’ve asked our frontline to start complying with that, to work in that way, but that has actually shifted away the focus from really looking at the participant and what their needs are and how they want to live their lives, to really looking at what the organisational needs are.

If that focus is on that, on complying with the processes and policies and systems, you actually leave the participant quite confused, because unfortunately in many of the organisations it’s not about the participant anymore. It’s about maybe safeguarding them, but it’s not really focusing on their unique needs, because a policy or a procedure or a process or a system can never really capture that uniqueness, that individual need for different levels of service, different way of approaches. Because what a policy, process, system, and even a hierarchy are meant to do is to standardise and generalise, and that fits very badly with the vision of having an individual, person-centred focus on the participant and their service needs.

So by asking our workers to comply and adhere to all this is actually turning their focus away from the participant. And still what I hear from a lot of organisations that they are, with this change to the NDIS, are trying to do is actually trying to optimise their policies, their procedures, their systems, their hierarchy, because they feel that if they could just get that right, they would be able to deliver quality of service. And so instead of putting the responsibility for quality of service at the frontline and the participant, it’s actually being placed within a system and the policies and procedures in that, which actually disempowers the participant and the frontline worker to actually work together and take that responsibility for making sure that the best possible service is being delivered through real co-design and working together.

So how then do you shift from, if you’re in this kind of organisation that has quite a lot of bureaucracy around it, that has maybe lost a little bit of focus on what the participants really need, and you’re asking yourselves, “How can I change that?” I’m not saying to do away with all your policies, procedures and systems and let the frontline just do whatever. But instead of having a heavy bureaucracy, see if you can really look at what you’re doing, and see which ones of your systems are really focused on a participant and really looking at their needs. In many cases in the organisations that I work with, that means that these policies, procedures and systems are simplified and actually being made smaller in such a way that the focus can return back to the participant, and that everything else in the organisation is actually there to support that focus and that shared responsibility for quality of service between the frontline and the participant.

Now, to still give a bit of – it doesn’t mean again that that is the only step. Another important step in this is also to make sure that the frontline is not alone in this space. What is important in a lot of these organisations is that they see it as a very important thing within their business to share the knowledge and skills and experience that exists within a team, that to be able to draw on that, support workers and allied health professionals and other frontline workers can actually make better decisions as a team than as an individual.

The philosophy behind that is that collectively we all have much more knowledge, skills and experience to make better decisions than, for example, one single team leader, or one single manager, could ever have, however well-educated or however a lot of experience or years of experience they have. When a real team comes together to make these decisions, it actually is a much richer environment and feeding ground for more creative, innovative and better decision-making.

Another thing that’s important in this space to support this kind of working is the development of a framework, which is a framework that makes clear what is outside and what is – and therefore unacceptable to the organisation, to the way that you don’t want things to work. For example, that’s where abuse and neglect sits, but that’s for example also where things sit like not taking accountability and responsibility for your actions and for how you’re working. But if you create this framework in such a way that if you’re very clear on what’s outside of it, the inside of that framework actually creates a lot of freedom. It creates the freedom for the frontline to work with participants, their families and carers to really co-design and to really find new ways of working, and that is a much richer space than you could, for example, ever achieve with a policy or procedure, because this is a much more flexible space.

These frameworks are set up based on very clearly the purpose, the purpose of the organisation, but in a lot of organisations they also start looking at the teams, so setting out within the purpose of the organisation what the actual purpose of the team is, the values and the vision, so again that’s also the vision of the organisation and within that a vision of the teams, the value of the organisation, and within that the value of the teams, how they feel that they can best work together and achieve the best outcomes.

And the fourth element that’s really important is to have guiding principles, principles that help you to guide the work that you do, that you really almost clearly set out within that, “This is the way we work, and these are behaviours that we show and that we exhibit as a team or as an organisation,” and then we can also call each other upon. So if you feel that somebody is not showing the behaviours that you’ve agreed upon, that you can actually talk to them about it, and that creates a safe space to have a constructive feedback conversation with not only members of your team but within the whole organisation. So these are important principles to make this kind of way of working work.

I want to go over to the next bit, which is about the examples that I’d like to show you, because when I talk about this what a lot of people ask me is, “Well, okay, that’s all very nice, but is anybody actually working in this way?” And I can now say, “Yes, absolutely.” We’ve been working with disability service providers across the country in the last few years to work through what this kind of principles and modelling, what that would mean in organisations and supported these organisations to develop their own empowered model and make that transition from the traditional pyramid kind of organisation to an organisation that has really tipped that pyramid around. And this all started with a very inspiring example, not from Australia but from the Netherlands, the country that I actually came from before I started working here in Australia.

# Slide 4: Buurtzorg

This organisation is called Buurtzorg. So Buurtzorg stands for neighbourhood care – buurt is neighbourhood and zorg is care – and this organisation really works with self-managed, self-directed high performing teams. And on this slide you can see a few of these teams and pictures of them, and I think what’s really interesting about these pictures is that these are teams within the same organisation, but as you can see, they have a few distinctive things around them. So for example, the team on your left clearly has a bit of a uniform of white coats working there. The team in the middle clearly works without any uniform. They have their own outfits, the way they want to work. And then the team at the right has clearly chosen to work with T-shirts and polos and with a logo on it to identify as a team. Each and every one of these teams within Buurtzorg has the ability to really form their team practice themselves and also how they want to work, and how they want their team to look like is actually a part of that.

# Slide 5: Key characteristics

Now, to look at Buurtzorg, I want to take you through some key characteristics. So what Buurtzorg teams do, they provide really client-directed support, working together with the participants and their families and carers based on a neighbourhood. Their model is based on neighbourhood teams, which means that the people working in a team actually provide services to the people in a particular neighbourhood, and the team members of that team actually come from that neighbourhood. They live and work in the same neighbourhood, and therefore have really strong connections to their community and really strong knowledge of what is around and what is available and what is happening in that community, to better be able to make those connections for their participants to allow them to live within their community as independently as possible.

A real key characteristic within Buurtzorg is that they trust their frontline to do their best work. They really believe that people are drawn to the sector because they want to make a positive impact into peoples’ lives, do the right thing by them, and support them to live the best life and achieve their goals. They really believe that of their staff and they trust them implicitly, until of course proven differently, but trust is the main basis of how they work. So if you look at how they, for example, work in their governance structure and their policies and procedures, it is based on trust, and trusting that people will and want to do the right thing, and how they can best support that and how they can ensure that things will go right, instead of focussing their policies and procedures on trying to cover off each and every risk and making sure that nothing will ever go wrong, because they believe that, you know, unfortunately things will go wrong. That’s the way it works. We all make mistakes each and every day, and that’s okay as long as we learn from it, and as long as we draw on each other’s knowledge to really work in the best way that we can.

Because that’s another element of these teams: They really operate based on a joint problem solving and decision-making framework. Tasks within a team are shared and rotated to make sure that everybody knows what these tasks actually mean for somebody to do it. For example, they do their own rostering. They do their own annual leave. They do their own recruitment, procurement, performance management. They manage their own budgets. They all do that themselves. They manage their own team meetings. And each and every one has a role and a task within that, and these roles are rotated so that everybody knows, well, for example, the rostering task, that it’s not always fun, that it can be difficult, and that yes, unfortunately even if you make the most beautiful roster ever, people still will sometimes have to call in sick, or whether they will be able to make it to a shift. So you know what that means if you have that task, that there are difficulties with this, and because everybody understand that they also try to work together to make that happen and make that all work as smoothly as possible.

It’s also within this organisation that they don’t look so much at your individual performance or your individual accountability, but they look at team accountability. So you set, for example, critical performance indicators, KPIs, for your team, and as a team you work towards that, and as a team you’re responsible for client satisfaction and for making sure that participants achieve the goals that they’ve set out. And that is really what you work together on, and that sets a real sense of achievement and a sense of purpose for these teams.

Within these teams they get support. They don’t have a team leader, but they do have coaches, so that’s a part of the tailored support from the back office. They get coaches that support these teams to work in this way, because you know, whenever you’ve worked with a group before, sometimes it works really really well and goes really really smoothly, but even with the best of teams sometimes you just hit a barrier. You can’t come to a decision, you might even have a little bit of conflict, or for example you encounter a situation with a participant that is really difficult and you don’t know how to solve that. Then you have coaches that will help you to do that decision-making process. These coaches are absolutely not hierarchically responsible for a team’s performance, but they are there to support the team to make the decisions and get over some of the barriers that they might face.

It’s what it says here on the slide, it’s a really small back office, so in the time that they started out as a really small organisation with just one team of four workers, they have now grown, and these I think are numbers from 2016, beginning of 2017, to an organisation of 10,000 workers, around 850 teams servicing about 70,000 clients. The back office of Buurtzorg that supports all this work is about 45 to 50 people, and that includes the coaches. This is enabled by first of all putting a lot of responsibility at the frontline, keeping their organisation really simple, trying to make their policies and procedures and things that they do as simple as possible, and also telling the teams to keep the things that they do and the solutions that they search for as simple as possible.

And to have a really strong IT system that supports them in doing this, that supports the organisation to manage the budgets, to track KPIs, to support the teams in doing their own rostering, doing their own procurement, doing their own recruitment. All these things are being supported through their IT system, and with support from a very small back office that really supports the teams in the way that they want to be supported. So it could actually mean that team A is provided with different supports from the back office than team B, simply because they are a different team with different individuals that have a different way of working and a different practice.

So that’s Buurtzorg. Happy to take any questions if you have any. But I want to go on to show you an example of an Australian organisation that has been inspired by Buurtzorg and several other organisations that we have been exploring and teasing out what the key principles of these organisations are to work in this way.

# Slide 6: Aces – Client centred

This organisation I want to talk to you about is Aces, which is a New South Wales provider of day services. When they started on this journey, they asked themselves a key question. For them it was a real question that they struggled with, of how to get from this traditional service provider to one that really puts the client at the centre of their business. They struggled with that and they had a lot of conversation about it, until I believe it was actually one of their support workers said, well, we already do that. We already put the client at the centre. As long we remember just one thing, and that’s what we have here on the slide is the kind of type of structure and organisation that they had, and what they then came to realise that if they really wanted to put the client at the centre of their business, what needed to happen was actually to have the client as the team leader of their own team.

# Slide 7

Now, to show you how that works, we have this kind of diagram where you have the client working with several support workers from this organisation, but also working with, of course, their informal supports, so that could be Mum and Dad or siblings or neighbours, aunties and uncles, and also in a lot of these – for a lot of the clients of Aces, they also used other services besides their Aces services. So what they started to conceptualise was, well, this is actually what a team looks like around the person, and how can we best support that for then the client to be the leader of that team?

So what they started to trial, which was quite a bit of a safe to fail trial is to see how can we support this kind of working, and they did that by setting up private profile pages for each and every client – they trialled this with six clients – so each and every client got a private Facebook page, and then the client had the discretion to invite their team onto that page. So they would, for example, invite the support workers from Aces that they worked with regularly, their informal supports, so their families, their carers, their friends, and other services, and this could be other disability support services, but also for example let’s say their GP or an OT that they worked with really really well.

And so they created their own team on this page, and then started to really show what was happening, what kind of services they were receiving each and every day, what their life was looking like, and commenting on that, on what was working well that day and what wasn’t working well, and to then work on that page as a kind of co-design platform with the support workers from Aces but also the other services, their Mums, their Dads, their informal supports, to see how can we make that better? How can we make sure that this particular person has more of the things that they do want in their life and less of the things that they don’t want? To focus on how can we get more of what is working and how can we get less of what is not working? And so this started to work for these participants really really well.

For the organisation it actually meant that their structure completely changed. So around these different clients – and this is going to look a little bit messy – but it meant for the organisation that their workers could be on several client teams, so as a support worker you could be part of team Mary, team John and team Dave. And what was really interesting for these workers is that they felt they could finally work really closely together with the people that they’d been supporting for so long, that they knew so well, but even getting to know them even better because they could get information about what was really working for them and what not, and what was happening in the rest of their lives as well.

And because they were part of different client teams, they also could learn from the experiences of different teams. They might even have different roles within the different teams, and could take the experience and knowledge and skills that they got from one team to bring in to other teams as well and to see, well, what worked here with Mary might actually be a really good solution for Dave as well. We just have to tweak it a little bit, and putting on the Facebook page, you know, here’s an idea, would that potentially work, and if so, how can we make that work?

So from the traditional pyramid kind of structure the organisation within the trial started to look a little bit like this, and even though it might look quite messy, it actually really worked. Participants really liked it. Families and carers came back saying that they finally felt that they were being heard and that the organisation was actively supporting their loved ones to have a better life. Workers really liked it because they had a lot more autonomy and a lot more freedom to really make a positive impact into somebody’s life. And the organisation also saw that this was really bringing out a better result for them as an organisation as well.

So they decided after this trial to go with this model, and are now working on letting go of Facebook because it’s nice for a trial but you cannot keep relying on that also because of potential privacy issues, and really working out to building their own IT system to support all this.

And talking to them, what has been really important in making this all work is first off, real focus on empowerment: empowerment of the participant, empowerment of the families, but also empowerment of the workers.

Technology was an important thing to enable all this. And leadership: It might look messy and you don’t see any management layers in this kind of structure, but it requires an enormous amount of leadership from all levels of the organisation, so definitely from workers stepping up and taking leadership and using their knowledge and skills and experience to create better lives for people. It took leadership from clients and families. But it also took leadership from the back office to really support this kind of structure, but also from senior management in enabling and supporting and coaching people to work in this way, to understand this new way of working.

# Slide 8: What it comes down to

So what I want to end with is this slide. So what it really comes down to if we want to customise the individual service user needs, we need to trust the frontline to do their job and let them do it, and that is based on trust, engagement and commitment, team performance accountability, utilisation of the collective body of knowledge, experience and skills, and building strong community engagement and relationships, and to see that the rest of the organisation is really there to support that dynamic interaction between the frontline and participants and their families and carers.

# Slide 9: Any questions?

That’s it from me. Are there any questions?

## Female Speaker

I was just stating that there are a couple of questions that have come through if you don’t mind responding.

## Yumi Stamet

Sure.

## Female Speaker

One is about rostering.

## Yumi Stamet

Yeah?

## Female Speaker

So I recall you mentioning earlier that the way that you do rostering has changed. Would you mind talking through that again?

## Yumi Stamet

Yeah, so what happens within these teams is that they roster themselves. I’ve seen different variations of that. It’s not to say that each and every team does that. What organisations I work with, for a lot of organisations it’s a development, but a lot of them do see the teams as rostering themselves in the future.

And this can be, for example in Buurtzorg, this is a rotating task, so one person within the team is tasked with rostering. They roster their team members, and after a couple of months or six months or whatever they choose to be the cycle, somebody else takes over and, if they’ve never done it before, learns how to do it with the support of the person who’s done it before, and then does it themselves to better understand what is actually involved in rostering. It creates more ownership of the roster itself. They feel that they’ve made it themselves. They made rostering in such a way with all their knowledge of what participants need, what also their own team members, what they prefer and where their strengths are, so really making sure that matching of participant needs and workers is actually happening with all the knowledge of the team itself.

Other teams have, for example, looked at self-rostering, so that each team member rosters themselves and making sure that that is all connecting and works. Others have still got rostering as a task for one person that is set up, and just one person, so that’s the team rosterer. That can still happen as well. So there are different ways of how this is happening.

But the real advantage of this is that the team understands that making sure that the roster works, that each and every participant gets the services that they need on any given day and time, that is their responsibility and that if somebody unfortunately has to call in sick or has to take care of one of their family members, then the team understands that it’s up to them to fill that gap and to make it work and to make sure that no participant is left without services. That really creates that ownership and a lot more willingness to be flexible and to make sure that it’s all happening.

## Isabelle

Thanks, Yumi. This is Isabelle here. We’ve just got another question from Sally. She’s just asked, “What about minimum start of two hours? Does that get lost in client direction, or is this stipulated and accepted?”

## Yumi Stamet

Yeah, minimum start of two hours, I’m thinking that Sally here refers to the Award, and you have to work inside the Modern Award criteria and standards, so that has to be incorporated and the teams have to understand that. Clients as well, of course. But that’s also what you can negotiate and explain to participants a lot better if it’s actually the support worker that can help them explain why this is so and why it needs to happen, and teams need to take that into account. A lot of rostering systems actually allow for that or set a standard for that, and these teams understand that, that that is what the minimum shift is so that’s what they need to work with.

## Female Speaker

Thanks, Yumi. How do you get your staff on board with this initiative? So what if some of them are a little concerned at first? How do you motivate them and manage their expectations?

## Yumi Stamet

Well, so far, first of all what we’ve seen is that staff usually tend to get this really really well. In many instances they have actually felt that they’ve been held back by the organisation, by the policies and procedures that they have to comply with, and they really understand that this is a way of working that will provide a lot better services to the participants that they work with. And in many cases that’s their main motivation. They want to provide a better service. They want to have a positive impact into somebody’s life, and they can see that by working in this way they can be a lot more flexible and responsive working in this way.

So, so far in my experience staff really get this, definitely frontline staff. There are, of course, also always questions about how do you manage risk, how do you manage poor performance, but those are things that you can work out with the teams of how you actually do that, and support the teams to do that. So for example, looking at poor performance, that is really a responsibility and accountability of the team to, if they see that one of their team members is, let’s call it slacking or is not up to their game as they usually are, then it’s actually up to the team to have the conversation with that team member and say, “Hey, what’s going on? We’re not seeing the quality of work that you normally show. Is something wrong? Is there something we can do? Is there something we can help you with?” And it actually opens up the conversation to see that maybe, you know, there’s something happening in this person’s private life that’s really impacting their work. You might, as a team, have to gather around and support this person a little bit more in this difficult period. Or that somebody is actually not really sure how to do something, a particular practice or particular thing that they need to do, and it’s actually an opportunity for you as a team to upskill and to learn somebody a new skill.

So it’s really up to the team in that, and yeah, teams usually tend to get that. It’s potentially more of an issue with other elements of the organisation, so for example team leaders and back office. Yeah, for them it’s a real shift as well, and sometimes they start worrying about, you know, “What about my job?” if there’s no team leaders anymore, for example. But what we see is that most organisations go about this gradually, and you see that this shift to a different way of working, people find their place, or they actually feel that this is no longer the place for them to work because this is not how they would like to work in this space. So yeah, there are different ways of how staff react, but in general definitely frontline staff get this.

## Female Speaker

Thanks, Yumi. So just another one: Are the skills competencies of individual workers considered initially, and then how are they monitored and by whom?

## Yumi Stamet

So the skills competencies of each team member is something that’s really important to have a good handle on as a team, to know your team members really really well. That’s one of the key benefits that I hear back from teams that started to work in this way, that they finally have an opportunity to get to know each other a lot better, to appreciate each other’s skills, and get to know what they were, and also felt more that they were able to support, really provide that peer support to each other, so that’s a really important element.

It’s really seeing what each and every unique individual within the team is also bringing to that team, and that is their skills, their knowledge, their experience. And that can be really broad. It can be their experience in their work or in previous support roles, but it can also be their life experience that can really be brought to the table. By working in this way it actually starts to flourish and come out, what people can really add to the team, and people step up and show what they can really do. So that’s a really important thing.

And then to develop that within the team as well, to see, well, this person has a really great skill. Let’s learn from that and see how we can all learn to do this better. And it’s also within the team looking at, for example, within Buurtzorg teams they also do their own training and development, so they really look at, “What as a team do we need in our training requirements,” and then they actually have, I think about three percent of their team budget is set aside for training, and they decide how that budget is being spent.

## Female Speaker

Thank you, Yumi. We do have one last question here for the moment, and that is, “If clients choose their team, what happens with those staff members who may not necessarily wish to work with that client? Do they just say they’re not available? What happens when it’s the clients choosing their own team in that way?”

## Yumi Stamet

Well, it depends on how it works within teams. Sometimes it is indeed that the client chooses their team, for example, teams are being formed based on the right relationships, or relationships that were existing before they started working in this way, so there are different ways on how clients and team members become a unit.

But setting that aside, if it’s really the participant who’s choosing the team and, for example, we all know we have some participants that are wonderful and lovely, and others can be a bit hard to work with, take a little bit more energy, be more challenging as a participant to work with, and the teams have to be quite careful in making sure that there’s the right balance in there. So making sure that everybody has – you know, you have a responsibility to service that person, but it doesn’t always have to be the same person. If they actually start to indicate that it’s really tough on them, or that they really struggle to continually have this participant each and every week, as the person that they need support.

So it’s also how can you spread the load within the team and making sure also that this one participant is not becoming dependent on this one person but actually is being supported by the entire team, because if there’s only key dependency on one person that can be a very fragile relationship. For example, when a worker leaves or when they get sick, you need to be able to make sure that the whole team is able to support that person, so you need to share that load in that case.

But yeah, it is your responsibility as a team to provide the services to the clients that you have. Within Buurtzorg it is actually up to the team to decide if they will take on a participant, so they can actually say no at intake and say, “We are not the right team for you to support you in this,’ and that can be based on all kinds of different elements, for example, skills or actually what the participants want or how they want to be supported. Buurtzorg works from a very strong philosophy of working towards peoples’ independence. They see it as their ultimate goal to come in and actually eventually go out and be out of a person’s life. So if that’s not what people want, if they want to have a really dependent relationship on a team, they might actually say, “Well, this is not the way we work and so we are not the right provider for you.”

## Female Speaker

Thanks again, everybody, have a wonderful afternoon.

## Yumi Stamet

Thank you

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