



SUMMARY SOCIAL BUSINESS CASE – VEDER METHOD®

Introduction: The Veder Method is one of the innovative projects that participated in the Transitional Program for Long-term Care of the Ministry of Health and several other organizations. For the past three years the method has been implemented in four different regions across the Netherlands. Seventeen organizations in Amsterdam, Friesland, greater-Eindhoven and Noord-Holland-Noord, with a total of 150 wards, have been involved in the project. Besides this, the department psychiatry and nursing home medicine of the Free University medical center and the faculty Communication Research of the University of Amsterdam have collaborated in conducting scientific research.

This article is a brief summary of the social business case (sBC) that was written as part of the project. This article mainly describes the findings in Amsterdam since the project has its roots in this city and the results can be measured best here.

What is a social business case?

Besides a complete description of the project and the innovative elements of it, the sBC also provides an overall picture of the economic and social costs and proceeds of the innovation. Hence, the sBC contributes to spreading the body of knowledge of Theatre Veder and generating systematic finances for the project. Especially the latter is of great importance since innovative projects do not fit well in the existing financing structure in health care.



Elements of the sBC

The sBC consists of a number of ingredients. We explain them concisely.

Client perspective: Starting point is the perspective of the client and the surplus value they experience from the innovation. To establish the surplus value, interviews with employees and clients are held.

Business Model: Based on the Business Canvas Model (Alexander Osterwalder, Business Model Generation, 2009) the innovation's what, who and how are described in a simple and efficient manner. The sBC includes descriptions of: client segments, value propositions, channels, client relations, income streams, key resources, core activities, cost structures and collaboration partners.

Organizational case: All economic costs and yields of the current and future exploitation are mapped through a sound calculating model.

Societal gains analysis: The social yields are calculated and taken into account as proceeds of the project. The yields are mapped and calculated in collaboration with stakeholders and future sponsors.

The project and the Veder Method abridged

The goal of the Veder Method is to improve communication in daily care for people with dementia, to increase their well-being.

In the last years Theatre Veder developed a unique method that aims to establish true and reciprocal contact between people with dementia and their caregivers. This first group is also referred to as elderly that “shrink into themselves”: people who find it more and more difficult to communicate with their surroundings and risk loneliness and depression to a great extent. For every individual, memories are part of his or her identity. The deterioration of one’s memory takes away the familiar ‘this is who I am’ feeling. Using theatrical stimuli, singing, poetry and objects from the old days, Theatre Veder goes back to the period when the older person was young. This way we appeal to the long-term memory. Recognition creates self-confidence and the safety of the own identity. From a feeling of mutual consent opportunities for bettering communication in the present arise and reciprocal contact can be made. This has great added-value for caretakers.

“It returns a bit of respect to my father”

(daughter of one of the participating older people)

FIGURE 1: CIRCLE THAT SUMMARIZES THE VEDER METHOD



When there is contact, the older person feels respected. This gives caregivers satisfaction and enjoyment. Because of this some kind of reciprocity arises, which in turn leads to connection and contact. And then the circle is round again.

The three-year path of interventions in which the Veder Method is implemented and continued within care organizations is called the Veder Formula. Through training and coaching on the

job the Veder Method is transferred by trainers of Theatre Veder to employees of the organization.

Part 1 of the sBC: Client stories

Starting point of every sBC is the client. This first part of the sBC describes the added value of the innovation from the point of view of the client and caregiver. This starting point is taken deliberately, as they are what it is all about. The circle presented earlier was developed based on client stories as well.

Part 2 of the sBC: Business model

In the business model of the Veder Method the products and services are drawn up short and sweet, as well as who the customers are and how the organization is organized.

The Veder Formula delivers nine products, namely

1. *Living room theatre*
2. *Theatre performances*
3. *Training (basic training and manual training)*
4. *Coaching on the job*
5. *Refresher courses*
6. *Work conferences and additional activities*
7. *Symposia*
8. *Family nights*
9. *Information sessions*

Jegney Elshot, unit manager nursing home Wittenberg (Amsta, Amsterdam):

“Since our employees apply the Veder Method, our residents are more calm and the employees make contact with them more easily. They also sympathize better with the condition of the residents. And they enjoy their jobs more. Isn’t that marvelous?!”

(interview newspaper De Telegraaf, November 2009)

The following qualitative yields are described in the business case, some of them are more thoroughly discussed and turned into financial yields.

CLIENTS

- *The client feels seen, taken seriously and respected*
- *Improvement of quality of life (attention, felt communality, happiness)*
- *Decrease of anxiety and depression*
- *Increase in social relations (more open to contact with others, less shutting off from surroundings)*
- *Positive effect on behavioral problems of the elderly people, more specifically on the level of inactivity and anti-social behavior*
- *Appealing to the long-term and short-term memory*
- *Improvement of cognitive adaption of residents (contact, autonomy and desired independence in relation to the caregiver)*

CARE AND NURSING HOMES

- *Increase of quality of offered services by employees*
- *Decrease of stress and burn-out among employees*
- *Reduced absenteeism and additional costs*
- *Decline of turnover, less recruitment and selection costs*
- *Enlargement of skills of volunteers/better usable*
- *Makes volunteering more attractive*
- *Positive feedback of family members*
- *Better reputation/image of the organization*
- *Linkages between the different units because of applying the Veder Method jointly*
- *Working better targeted/more efficient (with the same time investment better quality of care)*

EMPLOYEES

- *Employees feel they are engaged in true care giving*
- *Increase in (reciprocal) contact with residents*
- *Increase in job satisfaction*
- *Decrease in stress levels*
- *Expanding skills and abilities (development)*
- *Collaboration with others, within as well as outside the organization*

CARE ADMINISTRATION OFFICE

- *Improvement of quality of care*
- *Decrease in use of medication and sedatives*
- *Compensation of care is used more in the primary process. Less money is spent on absenteeism and recruitment and selection costs*
- *Through the alliance of three competing organizations in a region, they share best practices in numerous areas*

FIGURE 2

As mentioned earlier these products are applied in different ways at different times during a period of three years. In the end, the method is transferred to employees and volunteers.

The two most important target groups Veder aims at are:

1. The growing group of *elderly with memory deficits*. A lot of elderly with memory deficits develop different behavioral problems such as verbal aggression, restlessness and anti-social behavior.

Research shows that this percentage can vary from fifty to ninety percent. 66 percent of elderly instituted in long-term care suffer from depressions. The method is developed for elderly in the starting up to the advanced phase of dementia, with whom some sort of (verbal) contact can be made. Age is no criterion.

2. *Caregivers* surrounding the growing group of elderly with memory deficits who live in care- and nursing homes, or who live at home but visit daycare facilities for elderly and elderly in geriatric psychiatry. This target group consists of professional caregivers, nurses, activity attendants, volunteers and related caretakers.

Part 3 of the sBC: Organizational case

De costs and yields of the project are described in the organizational case. For the project expendable development costs are made. These are investments in project management and project bureau, costs for developing training materials, and research and communication costs. For three years, these costs have been covered by the Transition Program Long-term Care.

In the organizational case it is calculated that implementation of the method costs approximately

€50.000,- a year per organization (with ten participating units) for the duration of three years. Afterwards only a minor yearly investment is necessary.

Social yields

Every yield that is created by the Veder Method, but not transformed into financial yields in favor of the project are part of the social business case. This is the value that favors the society, i.e. societal gain. What makes this sBC special is that these gains are calculated and taken into account in the whole picture. Below we point out the proceeds of the project.

The social yields are logically reasoned and based on assumptions and, where possible, research. From this, we can say that integrated emotion-oriented care, such as the Veder Method, leads to less behavioral problems, has a preventive effect on problems like bedsores and weight loss and decreases use of medication. It is calculated in the social business how high these yields are. It turns out that an organization can realize savings of €130.000,- a year.

A scientific study by VU medical center and UvA among caregivers who apply the Veder Method, shows a positive effect on work experience and job satisfaction. The employees benefit from the project in different ways. In health care, the experienced work pressure is rather high. Resulting from this is an absenteeism rate that frequently is 7% or higher. Also staff turnover is substantial. The project contributes to lower levels of both absenteeism and staff turnover. These yields accumulate to over €292.000,- per organization.

Lastly, we also take into account the yields with respect to volunteers. If every location has a volunteer that is trained in applying the Veder Method, and this volunteer is scheduled to work four hours a week, caregivers can use these four hours (partly) for other care tasks. Yearly, this results in proceeds of approximately €18.000,- per organization.

IN THE TABLE BELOW, THE YIELDS PER ORGANIZATION ARE SUMMARIZED

Societal gain	Yield
Less behavioral problems	€130.000
Less absenteeism and turnover	€292.000
Volunteers	€18.000
Total	€440.000

Conclusion

Above we conclude that the costs for implementing the Veder Method are €50.000,- a year, during a period of three years. After the first three years a minor investment of approximately €2.500,- is necessary for continuation and refresher courses. Our advice is to incorporate the costs of the first three years in the education budget of the organization, combined with external finances. The yields for the organization after implementing the Veder Method are €440.000,- a year. We assume that this yield is reached within three years. For the first year we presume a yield of 33%, for the second year 66% and for the third year 100%.

With this an important comment has to be made. In this social business case only a few social yields are calculated. Further research will show what the total yields will be. In all probability, these will be higher than assumed in this business case.

Final conclusion

The final conclusion of the social business case is very clear. The societal gains counterbalance the costs as of year 1 of the project.

IN THE TABLE BELOW, COSTS AND YIELDS FOR A FIVE YEAR PERIOD ARE SHOWN

Year	Additional costs	Yields
1	€50.000	€145.200
2	€50.000	€290.400
3	€50.000	€440.000
4	€2.500	€440.000
5	€2.500	€440.000