

Community Care: Understanding the system in The Netherlands

This country profile assesses community care in the Netherlands including key initiatives, best practices and challenges. This profile understands community care as all care outside of hospitals, including in-centres, primary and residential care.

MedTech Europe's Community Care group calls for better patient outcomes and more attention to the community setting. For more information visit <https://hospitalathome.nl/>

Health spending

10,7%
Of country's
GDP

4th
Highest in
the EU

Health system

80%
Government-financed
healthcare

12.3%
Out-of-pocket
payments

Annual budget

Annual €5,288
Per capita health care
spending in 2018

The right care in the right place

Since a 2018 KPMG study on the benefits of outpatient care in the Netherlands, the Minister of Health launched a set of initiatives to promote care as close to the patient as possible. This shift towards 'home care' aims at decreasing care costs, moving the point of care delivery closer to people's home and replacing care delivery with other forms such as e-health.

'Samen Beslissen'

Taking decisions together – is the norm the government wants to set among the patient, carer and care provider.

Tools such as online patient portals enables patients access to medical data, thus helping patients and healthcare professionals decide together on the best treatments available.

46% of care

In hospital could be provided at home, with 70% of patients able to receive parts of their treatment in the comfort of their homes, especially for chronic conditions and wound care.

1.8bn savings

For the Dutch healthcare system by moving traditional care to outpatient care by 2020.



Focus on Community Care

Understanding the system in the Netherlands

Country-wide initiatives

The Netherlands is attempting to have the 'right care at the right place' through achieving a 'Triple Aim' care outside of the hospital. The 'Triple Aim' includes improving the health of the population and quality of care, combined with controlling costs. Among the pilot projects set in 2013, an innovative approach to wound care was launched by a health insurer in various parts of the country.

New approach to wound care

In the case of a complex wound, a wound coordinator draws up a treatment plan and a digital record of progress is kept.



Special nurses training

Additional training is provided to special wound nurses, bringing together the hospital, the GP and the patient's home settings.



Increased welfare outcomes

The pilot project has increased welfare for the patient and their informal caregiver, reducing the cost of materials.



Remaining gaps

Key challenges in improving healthcare systems and community care services

Hospital care and specialist care require referral from a doctor and patients have a free choice of hospital. This means patients cannot go directly to a specialist for treatment.

Most specialists work within a hospital setting as 'contractors' instead of employees, with waiting lists being a concern for patients.

Staff shortage in healthcare is a growing concern in the Netherlands. Nationwide hospital strikes illustrate the demand to increase resources, wages and reduce workload.

More than half of the doctors think pressure is too high, with 64% doctors stating that most of the essential work is not done. To address this issue, trainings have been expanded and awareness campaigns have been launched, but more needs to be done in the long-term.

From a nursing care perspective, the financing system needs to be changed to widen the scope of care with adequate resources e.g. for dialysis one nurse is assigned to one patient.

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For more information on the pilot project for innovative wound care visit <https://hospitalathome.nl/>

