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## CONFERENCE ABSTRACT

### **From policy to practice: Insights from 15 Dutch integrated neighbourhood teams.**

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#### ***Introduction***

Since the decentralisation of care in 2015, Dutch municipalities are responsible for the Social Support Act and the Youth Act. The motivation behind the decentralisation is to improve the quality of the care, promote an integrated approach, and keep healthcare available and affordable. Each municipality is obliged to provide safe, efficient care that is attuned to the clients' needs. Details and rules about the quality, nature and delivery of care and support are not included in both acts. Therefore, each municipality formulates their own vision and policy on care and support.

In this paper we (1) gain insight to what extent the vision and policy differs between municipalities and (2) how these policy principles influence the daily practice of providing care and support by the integrated neighbourhood teams.

#### ***Theory/Methods***

A comprehensive policy analysis of policy documents concerning care and support of 15-20 Dutch municipalities. The municipalities vary in size, inhabitants and location in order to represent an array of municipalities through the Netherlands. The analytical framework is based on the classification of integrated neighbourhood teams (Arum & Enden, 2018) and on underlying values of integrated care (Zonneveld, Driessen, Stüssgen, & Minkman, 2018).

Results are discussed with local policy makers and integrated care teams (team leaders and professionals) in interviews and focus groups in order to gain insight in how policy influences, and is translated to, the daily practice of the teams.

#### ***Results***

The analysis resulted in a wide array of policy principles but also shows much overlap. The policy principles of most municipalities, although formulated differently, relate to the following values/principles: preventative, empowering (self-reliance), coordinated, comprehensive. Values such as coproduction, efficiency and trust are less represented in the analyzed policy principles (Values Framework, 2018) but do play an important role in the daily practice of the integrated neighborhood teams.

#### ***Discussion/Conclusion/Lessons learned***

The study shows that most policy principles are formulated on a high level of abstraction, which results in a broad variety of ways how these principles are operationalized into practice. We discuss how the integrated teams operate as street level bureaucrats in order to liaison between their daily practice and the formulated policy in order to bring these principles into practice and ensure a high standard of care for the inhabitants.

### ***Limitations***

For this research a wide array of sources is used, depending on the available information for each municipality. We are aware of the limitations for comparison this entails. Additionally the results of the policy analysis are discussed with a small sample of professionals. Finally the end user is not included in this study, we can therefore not make any statements concerning the quality of care for the end user.

### ***Suggestions for future research***

To gain further insight in how policy effects the quality of care it would be valuable to extend this study to focus on the (experienced) quality of care and support for the end user.