

ZOOM

THE TUBBE MODEL: AN INSPIRATION FOR OUR CARE HOMES

TUBBE

What kind of life should we offer to vulnerable people in Belgium? This has been a topical question for a long time, but the Covid-19 health crisis has pushed it to the top of the agenda. Inspirational models are therefore welcome. And they are not lacking.

In this ZOOM, we should like to

present one of them: the Tubbe organizational model, used in the Tubberödshus care home on the Swedish island of Tjörn and, since 2020, in some eighty care homes in Belgium.

Tubbe aims to make care homes attractive places, where it is pleasant to both live and work, and where care is based on relationships and the active

participation of everyone. Tubbe does not rely on ready-made formulae, but rather on personalised support that is developed progressively on the ground and adapted in function of each organization.

“Adopting Tubbe is to introduce joy and pride into the care of the elderly.”
Lilian Bohlin, Director of the Tubberödshus in Sweden

TUBBE AT A GLANCE

Co-decisions and care based on relationships

The Tubbe model is based on a fundamental principle, namely that the residents of care homes are involved in decisions relating to their everyday lives and the place where they live. Likewise, participation of the home's personnel is crucial, whilst managers change from a function of managing to coaching. This co-constructive approach creates a dynamic of relationship-based care: residents create bonds with the personnel and with other residents, as well as with the place where they live.

Tailor made

Each particular care home that opts for the Tubbe model progressively defines, together with all of those concerned – residents and families, the personnel, management and board of governors – the manner in which the model should be applied in that care home. This does not mean that it starts from zero, but rather from what is already experienced between the residents

and staff and changes are implemented little by little according to the home's own rhythm.

A new organizational model

Tubbe implies the development of a new, horizontal organization, which results in an inversion of traditional models of care homes.

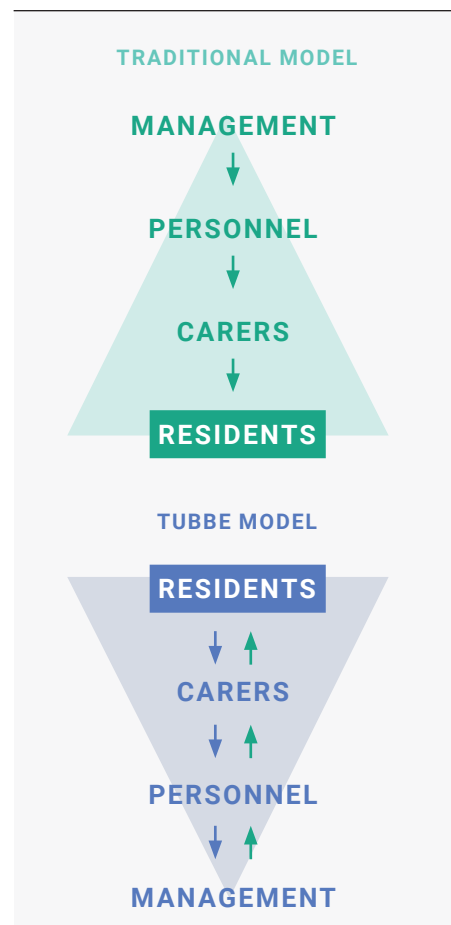
The Tubbe model is not the only one of its type. Other methods exist in Belgium that involve the participation of residents in (semi-) residential services and attentive care, which are also based on relationships. All of these initiatives are complementary and mutually reinforcing.

The inverted pyramid

If we compare the Tubbe organization model with traditional models, we get an inverted pyramid. Nevertheless, however revolutionary this change of paradigm appears to be, this inversion is in fact produced progressively.

The role of the staff is crucial: it is

impossible to speak about inversion without their effective participation.

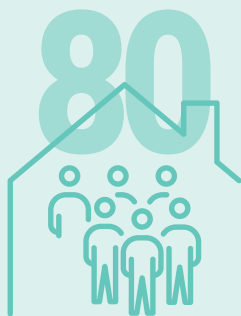


FACTS AND ANALYSIS

SIX BASIC PRINCIPLES

The Tubbe model is neither a catalogue of rules nor a list of micromanagement directives. However, for any care home that seeks to follow the Tubbe method, there are six indispensable principles.

1. Promote the autonomy and self-esteem of every resident. Identify and promote residents' capacities and talents. Maximise the potential they have to complete tasks that concern them and to take decisions regarding their personal lives.
2. Systematically involve residents and employees in decisions relating to the organization of everyday life in the care home. Stay attentive to residents' questions, wishes and needs.
3. Offer shared experiences and responsibilities that enable the personnel and residents to participate jointly in the same activities (cooking, maintenance, leisure activities...).
4. Foster links with the family and the local community.
5. Create adherence to and involvement in change and a shared vision between the personnel and the residents, thanks to a step-by-step approach and open communication.
6. Maximise the personnel's autonomy and decision-making capacity thanks to a leader-coach attitude.



In Belgium (in 2020), some 80 care homes benefitted from coaching with a view to evolving towards the Tubbe approach.



Around 20 coaches have already been trained to support care homes.

“The greatest change is that now we have to ask ourselves about the role that residents can and would like to play in achieving their wishes.”

CO-DECISIONS?

“We often find that residents thrive when they are more involved in the home's day-to-day life.” (Director of a care home)

What, in practice, does it mean to involve residents? Here are a few examples:

- menus are drawn up in consultation with the residents;
- residents' own favorite recipes are shared and prepared in the kitchen;
- residents choose their own time

schedule: for breakfast, watching television, going to bed etc.;

- residents participate in decisions about interior decoration, the terrace, the garden, etc.;
- residents sit on the management board and are involved in meetings about hiring and evaluating people;
- residents take part in working groups about activities, purchases, the budget etc.

The wishes of those residents who do not wish to take part in decisions - or are not capable of so doing - are of course respected.

WHAT ABOUT DEMENTIA?

“With people with dementia, the approach is different, but the principle remains the same. As long as we give them the opportunity, they can decide a lot of things for themselves.” (Director of a care home)

This is particularly the case when the care home involves the family and when special importance is attached, as in the Tubbe spirit, to little things, to relationships and human warmth. And when personnel are given the time to listen.

A POSITIVE EVALUATION

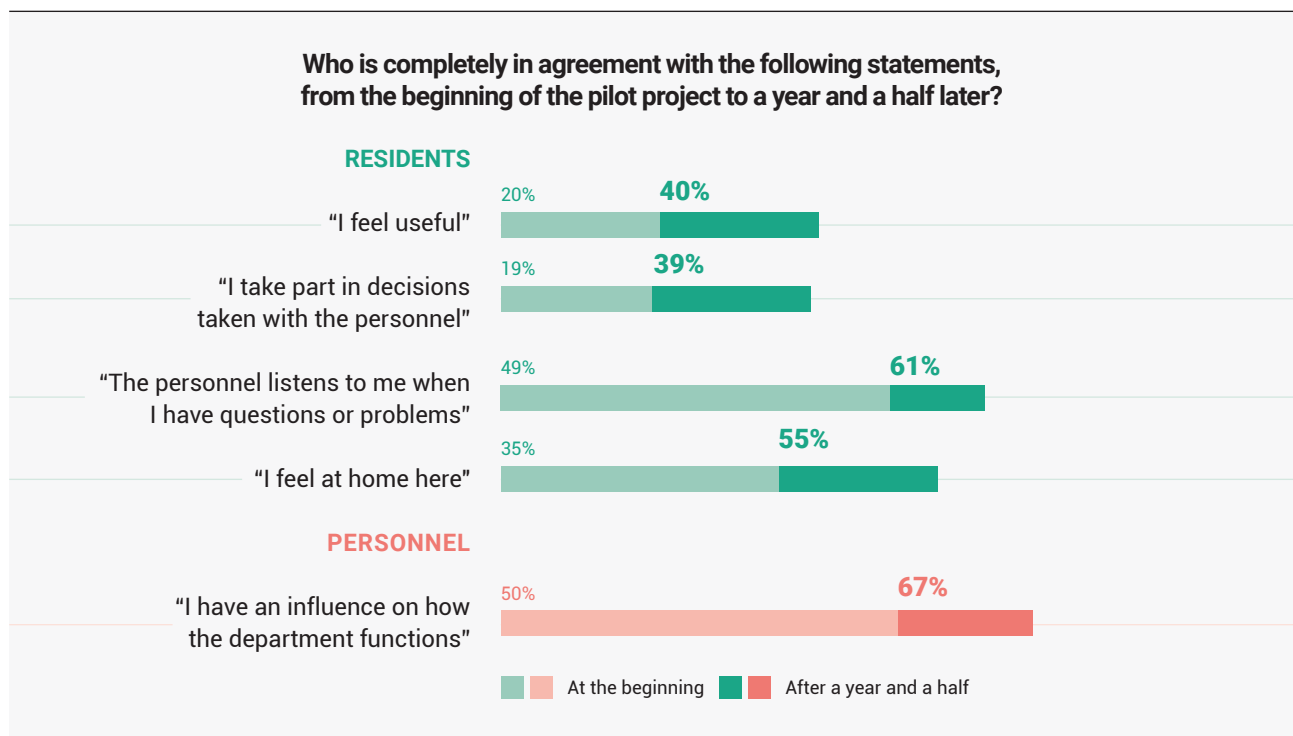
In 2017, six care homes launched a pilot project aimed at testing the Tubbe model. An initial evaluation was completed in autumn 2019 to see if the Tubbe model would enable better quality care to be implemented. The report provided an intermediate overview of a long-term process.

- All of those involved evaluated the experience positively.

- Residents felt more fulfilled, said that they were participating more and having closer relationships with the personnel and other residents.
- Many of the personnel confirmed this positive feeling, especially where Tubbe was already integrated in the DNA of the organization: their work was no longer focused on jobs but on human beings. More than half of the personnel recognized that, in their department, care had improved consi-

derably. However, not everyone identified with this change of profile. At the beginning, and when there were difficulties, the personnel's workload became heavier.

The organizational model is modified when the personnel is really mandated to work with the residents in a 'community living life to the full'. Over time, the investment in time from the beginning ends up by being worthwhile.



WHERE TO BEGIN?

Tubbe is not a process to apply wholesale from one day to the next. On the contrary, everything should happen very progressively. Some organizations choose to implement the Tubbe model across all of their services, whilst others prefer to try it out in one or more departments: in the care homes, service flats, assisted living residences or the day care centre. It is important that there is a will to change, that there are

catalysts for change and that the process is managed internally.

The Board of Governors is obviously part of the Tubbe method. The model and vision of the method become common – to be shared by all members of staff – and are developed locally. In Belgium, if residents are to be really involved, then day-to-day conversations and exchanges of ideas would seem to be more

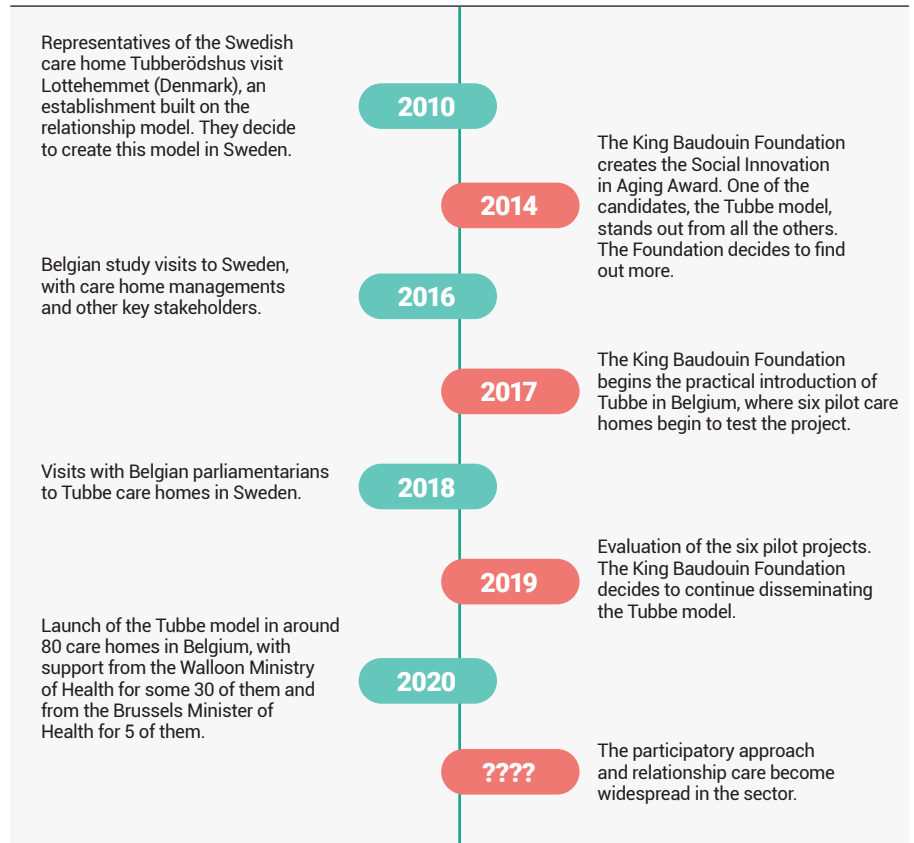
important than formal meetings. As far as the management is concerned, this too evolves, moving from a pyramid form of management to coaching: teams are encouraged to find solutions to problems themselves. At the beginning, having recourse to a coach and/or consultant facilitates ethical reflection and support for change. Such a third party checks that the personnel abandons their 'old' automatic reflexes.

KBF INVOLVEMENT

FROM SCANDINAVIA TO BELGIUM

The Tubbe Model was inspired by the former nurse and Danish Minister for Senior Citizens Thyra Frank. She developed an innovative type of residence for senior citizens based on the idea that "As long as one lives, one must live life to the full. Every person is unique and should remain so until death."

In care for the elderly, Tubbe is one of the approaches likely to bring a breath of fresh air to our care homes. The King Baudouin Foundation is supporting the dissemination of the Tubbe model because it is based on important principles: a shared vision, a real-life project – even at the end of life, a participatory approach and care that is firmly relationship-based.



FOR FURTHER INFORMATION

- [The publication *Des maisons où il fait bon vivre et travailler. Le modèle Tubbe: une inspiration scandinave dans les maisons de repos et de soins \(The homes where it feels good to live and work. The Tubbe model: a Scandinavian inspiration in care homes\).* King Baudouin Foundation, 2019](#)
- [In 2019, at the request of the King Baudouin Foundation, the Haute Ecole Robert Schuman and the Thomas More Hogeschool studied the impact of Tubbe in the six Belgian pilot projects: *Vers un nouveau modèle de cogestion basé sur le relationnel en maison de repos et de soins – Rapport d'évaluation – Projets pilotes du modèle Tubbe. \(Towards a new model of joint management based on relationships in care homes – Evaluation report – Pilot projects on the Tubbe model.\)*](#)

You can download these two publications free of charge from www.kbs-frb.be

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In Belgium and in Europe, the Foundation is an actor for change and innovation, working for the common good and social cohesion. It aims to maximise its impact through capacity building among organizations and individuals. It encourages effective philanthropy among private individuals and businesses.

The King Baudouin Foundation is a public utility foundation, created in 1976 to mark the 25th anniversary of King Baudouin's reign.

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