



CDHB TrendCare Steering Committee

Purpose

The TrendCare Steering Committee is a permanent structure that governs TrendCare and optimises the use of the Trendcare system in the operational and professional management of nursing, midwifery and allied health resources. This is achieved in partnership with the health unions.

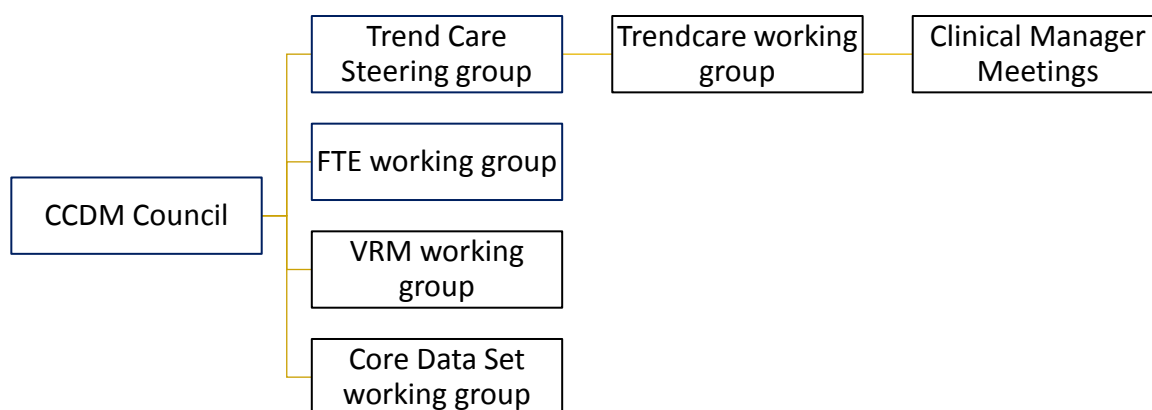
Key tasks/role

1. Timely overseeing implementation of TrendCare and subsequent system upgrades
2. Meet CCDM programme component requirements
3. Complete annual assessment against the CCDM programme standard 2.0 to inform the annual work plan
4. Review and authorise Operational Guidelines to guide local application of TrendCare system.
5. Ensure alignment with national guidelines from Safe Staffing Healthy Workplaces Unit
6. Monitor TrendCare compliance against TrendCare Gold Standards
7. Monitor TrendCare compliance against operational guidelines within DHB
8. Identify priority projects, resources and monitor progress timelines
9. Ensure partnership processes and practices are managed effectively
10. Develop expertise of TrendCare at all levels of the organisation
11. Provide leadership for upgrades
12. Approve annual plan of work to enable enhancement to TrendCare use and identified pieces of work by TrendCare Steering Committee





Reporting Structure



Membership

All members have both accountability and responsibility within the organisation, have a shared vision and are committed to CDHB objectives in relation to the use of an acuity and workforce management system. Members will have functioning roles within other groups that use acuity data to make decisions on system use and compliance.

Key Responsibilities

Name/title	Names	Role in steering Group
Director of Nursing	Mary Gordon	Chair/co-chair, set strategy, make decisions, remove barriers, ensure accountability
Director of Midwifery or delegate	Katherine Gee	Set strategy, make decisions, remove barriers, ensure accountability
Nursing Director CCDM	Janette Dallas	Set strategy, provide expert advice, report on acuity data, data accuracy and integrity
Union representation*	Sonya Kemp MERAS	Remove barriers, ensure accountability. Work in partnership, advise on MECA entitlements



	Gabrielle Nolan (NZNO) Lynley Mulrine (NZNO)	
Allied health leadership		Provide professional advice in line with workforce strategy/service goals
Information technology	Neil Keller / Rachel McGregor	Assign resources, remove barriers, prioritise TrendCare as per workplan include visualisation and interface systems
Decision Support	Scott Maxwell Greg Hamilton	Assign resources, remove barriers, prioritise TrendCare as per workplan
Nursing Directors *	Jo Townsend (Burwood) Patrick (Mental Health)	Provide professional advice in line with workforce strategy/service goals
Duty Nurse Manager*	Rachel Marshall	Provide and organisational view of safe staffing,
Clinical Team Co-ordinator representative*	Christchurch Nominated	Represent the views of CTC group and provide an organisational view of acuity.
Clinical manager representatives*	Jane Harnett	Represent the views of clinical nurse or midwife manager group
*Representative are to be elected by peers and tenure reviewed annually		

Other members may be required or co-opted to the TrendCare Steering Committee as and when required to provide expert advice.

Responsibilities

- Group members are expected to be familiar with TrendCare system functionality
- Promote the benefits of TrendCare within the organisation
- Members are expected to attend at least 80% of the meetings, and actively participate in discussions and decision making





- Declare any conflict of interest
- Abide by the decisions of the group
- Disseminate and discuss information with the people/groups that member is representing
- Read and provide feedback on all reports, documents received within the agreed timelines
- Ensure meeting actions are followed through and reported on within the agreed timelines
- Escalate concerns to Chair and group as appropriate

Meeting process

Meetings will be held on the monthly for a maximum of one hour.

Agenda items will be called for by the Chair or co-chairs 1 week prior to scheduled meeting

- Additional agenda items may be taken by the chair/co-chairs at the meeting or prior to meeting starting
- An agenda and documents will be circulated at least five working days before meetings
- Members are to inform the Chairperson if not attending a meeting at least 24 hours prior.
- Where members are unable to attend a meeting proxy will be accepted
- One topic will be discussed at a time
- The chair will summarise the main points
- Actions will be followed up on
- New assignments will be specific and clear
- Good timing will be maintained (start, finish and duration of discussions)
- Meeting minutes will be circulated five working days after the meeting
- Amendments to the meeting minutes must be provided within five working days
- Meeting minutes will be confirmed as final at the next meeting. Copies will be retained as part of the TrendCare Steering Committee documents
- Should a member write to the Chairperson and request to resign, consultation shall occur within the committee prior to the election of another member
- Meeting process will be periodically evaluated using both verbal and written feedback methods
- Quarterly, ask the following two questions or distribute the meeting evaluation form.
 - What went well at this meeting?
 - What needs to be changed?
- Meeting evaluation results will be fed back to the group at the next meeting

Decision making

- A quorum for a meeting is represented by a 50 percent attendance of the group plus the chair





- Should the quorum not be present, items passed will be held for ratification until the next meeting or ratified via email
- Where possible, decisions will be made by consensus
- If group consensus cannot be reached a summary of views will be documented, distributed and held within the group document file
- Where decisions are contentious and/or complex, a decision-making framework will be used, and separate detailed documentation made on the decision-making record

Standing Agenda Items

- Implementation in new areas +/- Upgrade progress report
- Communications
- Hospital Data Quality progress report
 - IRR
 - Actualisation etc
 - Data entry challenges
 - interface challenges with other systems
- Annual activity plan – tracking to schedule
- Hospital based data against TrendCare Gold Standards
 - Patient Acuity
 - Rostering
 - Staff allocation
 - Discharge Analysis
 - HR (staff) Management
 - System support and maintenance etc
- Complex issues (multi-department problems and / or solutions)

Functional relationships

Integrated Operations Centre, local data councils, CCDM working groups, information technology, human resources, project management office, pay roll, roster committee, quality and risk office and business support and the CCDM Council





CCDM

Care Capacity
Demand Management

Safe staffing, healthy workplaces



Associated Documents

- Agenda template
- Minutes template
- TrendCare Gold Standards
- CDHB TrendCare Procedure

