PURPOSE:
• To have the accountability, the authority and the responsibility for ensuring the TrendCare gold standards are met.
• TrendCare is the validated patient acuity tool used by CCDHB to enable staff and wards to reflect their nurse/midwife dependency and patient acuity.
• TrendCare accuracy is a requirement to underpin the staffing methodology standard within the CCDM programme. It is essential TrendCare has a high level of integrity and accuracy that demonstrates nursing/midwifery care delivered.

OBJECTIVES:
• Regular review of data integrity and accuracy.
• Have a formalised and agreed action plan which is reviewed at each meeting.
• Regular quality audits undertaken by the TrendCare Coordinator are reviewed.
• Escalate issues to the CCDM Council when needed.
• Oversight of Inter Rater Reliability testing.
• Annual review of business rules.

Benefits:
TrendCare is expected to deliver the following benefits:
• Projects and manages inpatient care requirements and proactively manages staffing to meet peaks and troughs in inpatient care demand.
• Measures trends and compares variances between the demand and supply of nursing/midwifery resources in order to maintain safe and cost effective patient care.
• Assists in allocating fair and equitable workloads across the organisation.
• Measures patient turnover (churn) and bed utilisation on each shift for every day of the week.
• Tracks, reports, analyses all productive and non-productive hours to identify service requirements and measure performance against budget.
• Reduces and expands roster profiles in accordance with increase and decreases in patient acuity and bed utilisation to maximise patient safety, minimise waste and reduce nursing/midwifery fatigue.
• Monitors and trends the staff skill mix in each department, to ensure care requirements are met and cost is retained within budget.
• Tracks, trends and manages all labour hours including agency, casual, overtime and absenteeism to retain costs within budget.
• Identifies reasons for late and cancelled discharges providing opportunities to improve efficiency.

DECISION MAKING PROCESS:
• Issues will be discussed and solutions agreed by consensus.
• If consensus cannot be reached the issue will be escalated to the CCDM Council.
• A quorum requires at least one Operations Manager, one Associate Director of Nursing or Midwifery (ADON/M), one CCDM/TC team member, one Charge Nurse/Midwife Manager (CN/MM), one Union representative and one representative from the appropriate service. E.G. if an ICT problem is being discussed then an ICT representative must be in attendance.
CHAIRPERSON AND MEMBERSHIP:

- **Chairperson:** Director of IOC
- **Membership:**
  - Director of IOC: Kaye Hudson (acting)
  - Operations Manager: Belinda Bennett; Tony Littlejohns
  - Nurse Manager IOC: Kapua Quinn
  - ADON SWC: Simone Curran-Baker
  - ADOM MCC: Fiona Houghton
  - ADOM: Carolyn Coles
  - DONM MHAIDS/Delegated person: Tony Heyward
  - CN/MM: Amy Nel; Cory Andrada
  - TrendCare Coordinator: Colin Milligan
  - CCDM Programme Manager: Emma Williams
  - Union representation –
    - NZNO – Jo Coffey (Organiser); Tina Giles (Delegate)
    - PSA – Alex ward (Organiser)
    - MERAS - vacant
  - **Ex officio:** Duty Nurse Manager; ICT; Business Project Managers; CCDM Project Support Coordinators

ACCOUNTABILITY:
The TrendCare Operational Group is accountable to the CCDM Council.
A TrendCare monthly report is to be sent to the CCDM Council for review.

**AGENDA:**
Agenda will be set by the chair of the Operational Group and circulated one week prior to the meeting.

**MINUTES:**
Minutes will be circulated one week prior to next meeting and stored: G:\CCDHB\_CLINICAL GOVERNANCE & MANAGEMENT\Our Patients Today\TrendCare\Operational Group Meeting\2017 \ Operational Group Terms of reference July 2017.doc

**MEETINGS HELD:**
TBC

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