Purpose
The variance response management working group is a subgroup and accountable to the CCDM council. The purpose of the variance response management working group is to:

1. Establish a roll out strategy for CCDM council endorsement.
2. Facilitate variance response management implementation as business as usual with the following groups:
   - Ward clinical staff
   - Charge Nurse/Midwife Managers
   - Integrated Operations Manager/Director
   - Directorates/services
   - CCDM council
3. Ensure activity unfolds in a logical, organised and efficient way.

Reporting Structure
Key Tasks/Role

- Undertake a stock take of the variance response management tools and processes currently utilised by the DHB.
- Establish the variance response strategy for CCDM Council endorsement.
- Document a work plan of roll out across the organisation, including communications.
- Develop and document the variance response management tools and processes and how these should be utilised for the following groups:
  - Wards
  - Integrated Operations Centre/ Duty Nurse Managers
  - Directorate/service
  - CCDM Council
- Assign roles, responsibilities and timelines for completing the work plan
- Ensure training and coaching occurs with the right people, as per the work plan.
- Monitor and evaluate the progress against work plan.
- Report monthly to the CCDM council on progress against work plan.
- Ensure the variance response tools and processes are implemented in partnership.
- Communicate with key people on progress.
- Receive information from and feedback to the pilot groups

Membership

<table>
<thead>
<tr>
<th>Name/Title</th>
<th>Role in Council</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing/midwifery leaders</td>
<td>Ensure group members have required knowledge. Provides professional advice in line with workforce strategy/service goals and work in partnership. Provide organisational perspective to establish variance response management tools and processes for the hospital.</td>
</tr>
<tr>
<td>Health union representatives</td>
<td>May co-chair the meeting, ensure group members have required knowledge. NZNO, PSA, MERAS Organisers/Representatives and professional advisers, represent members, work in partnership.</td>
</tr>
<tr>
<td>NZNO/PSA/MERAS</td>
<td></td>
</tr>
<tr>
<td>Integrated Operations Centre</td>
<td>May chair the meeting, ensure group members have required knowledge. Provides operational information. Provide hospital wide perspective to establish variance response management tools and processes for the hospital, work in partnership.</td>
</tr>
<tr>
<td>Director/Charge Nurse Manager</td>
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</tr>
<tr>
<td>Role</td>
<td>Responsibilities</td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Duty Nurse Manager</td>
<td>Provides operational information. Provide hospital wide perspective to establish variance response management tools and processes for the hospital, work in partnership.</td>
</tr>
<tr>
<td>Operations Manager (Each directorate)</td>
<td>Provide a directorate perspective to establish variance response management tools and processes for effective ward level response, work in partnership.</td>
</tr>
<tr>
<td>Charge Nurse Manager (Each directorate)</td>
<td>Provide a ward/unit perspective to establish variance response management tools and processes for effective ward level response, work in partnership.</td>
</tr>
<tr>
<td>TrendCare Coordinator</td>
<td>Provide acuity data, check data accuracy and integrity, explain plausible reasons for variance, and work in partnership.</td>
</tr>
<tr>
<td>CCDM Programme Manager (Chair)/CCDM Project Support Coordinator (VRM)</td>
<td>May chair the meeting, ensure group members have required knowledge. Facilitate stock take, develop work plan for roll out, prepare layout options, coordinate activity and coach teams to implement. Work in partnership.</td>
</tr>
<tr>
<td>IT Representative Ex officio</td>
<td>Provide expertise on DHB IT systems capability and tools in relation to the variance response management tools and processes that will require electronic application.</td>
</tr>
<tr>
<td>Allied health leaders</td>
<td>Ensure group members have required knowledge. Provides professional advice in line with workforce strategy/service goals and work in partnership.</td>
</tr>
<tr>
<td>Administration support</td>
<td>Schedules meetings, records actions and decisions</td>
</tr>
<tr>
<td>SSHW Unit Programme Consultant</td>
<td>Provide expertise on CCDM variance response management tools and processes. Provide training and coaching as needed. Facilitate implementation into practice as business as usual. Facilitate stock take, develop work plan for roll out, prepare layout options, coordinate pilot and coach teams to implement. Work in partnership.</td>
</tr>
</tbody>
</table>

Other members may be co-opted to the Working Group as and when required to provide expert advice.
Once the CCDM variance response management tools and processes have been established the work stream will be reviewed by the CCDM Council.

**Responsibilities**

- Group members are expected to have good knowledge of the variance response management tools and processes, descriptions, rationale and utilisation.
- Group members are expected to attend and participate in all meetings.
- Abide by the decisions of the Working Group and CCDM Council.
- Ensure confidentiality of information provided to the Working Group and CCDM Council.
- Disseminate and discuss information with the people/groups as required to implement and embed Variance Response Management.
- Ensure meeting actions are followed through and reported on within the agreed timeframes.

**Meeting process**

Meetings will be held on the 4th Wednesday of each month for a maximum of one hour. Meeting time will be from 1130 – 1230 hours.

- Agenda items will be called for by the CCDM Coordinator 3-5 working days prior to the scheduled meeting.
- Additional agenda items may be taken by the Chair at the meeting or prior to commencing.
- An agenda and papers will be circulated by the CCDM Coordinator before the meeting.
- Members are to inform the CCDM Coordinator if not attending a meeting at least 48 hours prior.
- Where members are unable to attend a meeting a proxy will not be accepted.
- The meeting record will be circulated 3-5 working days after the meeting.
- The meeting record will be confirmed as ‘final’ at the next meeting. Copies will be retained as part of the core data set working group documents.

**Decision Making**

- A quorum for a meeting is represented by a 50 percent attendance of the group plus the chair.
- The quorum must include Union and DHB representation.
- Should the quorum not be present, items passed will be held for ratification until the next meeting.
- 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.

Functional Relationships

Examples include (but are not limited to):
CCDM Council
Local Data Councils
CCDM Working Parties
Information Technology, Human Resources, Project Management Office

Associated Documents

Variance response management Working Group Meeting Agenda-under development
Variance response management Working Group Meeting Record- under development
Variance response management DHB Stock take Template-under development
Decision Making Flow Chart
Decision Making Record
CCDM Programme Standards and specifications
CCDHB CCDM Partnership Charter and Framework