Care Capacity Demand Management is about...

...matching your capacity to care with patient demand
CCDM is matching your staff, beds, resources, knowledge and skills to the patients coming through the door. It is a whole of hospital approach to managing the capacity to care on a permanent basis.

...right staff, right place, right care
Safety and quality for patients and staff is a priority. The goal is to achieve better quality patient care, better work environment and best use of health resources.

...every day and every shift
Patient needs and staffing change every day, every shift. Matching our capacity to care with patient demand needs constant readjustment.

...everybody working together
Your goals can only be achieved through the combined efforts of each individual. We all have a part to play in matching the capacity to care with patient demand.

...starting now and continuing on a permanent basis
CCDM is currently being rolled out at Canterbury DHB. If you want to know more talk to your CCDM Nursing Director Janette Dallas or your CCDM Coordinator, union delegate or clinical manager.
Questions and Answers

What does CCDM mean for me?
For most front line staff your role under CCDM is to accurately enter data into TrendCare every shift, which you will receive training for. Good data put in means good data comes out and this means we get a real picture of what the patient care demand is. You will also have the opportunity to join a local data council or working group – please talk to your manager if this interests you.

What's the difference between CCDM and TrendCare?
The CCDM programme is a set of tools and processes, such as variance management and FTE calculation, which help DHBs better match the capacity to care with patient demand. TrendCare, a computer programme, is the tool used for capturing data about staff capacity and patient care needs in each ward or area.

What’s the rationale/ evidence for the CCDM programme?
Initial recommendations for the programme came out of the Safe Staffing Healthy Workplaces Committee of Inquiry Report, 2006. This report identified strategies to address concerns that hospitals were inadequately staffed by nurses and midwives to meet the increasing complexity of patients. The evaluation was commissioned by the Safe Staffing Healthy Workplaces (SSHW) Governance Group.

Do any other countries use CCDM or something similar?
Other countries use TrendCare, so may use aspects of CCDM, and it has similarities with the Releasing Time 2 Care programme, which originated in the UK.

How do I give feedback about CCDM?
Via CCDM Coordinators, CCDM Ward Champions, your CNM and CMM or email ccdm@cdhb.health.nz.