

<b>Mandatory Training Policy</b>	<b>Corporate / Strategic Register No: 08092</b> <b>Status: Public</b>
Developed in response to:	NHSLA Risk Management Standards Best Practice
Contributes to CQC Regulation	17

<b>Consulted With</b>	<b>Post/Committee/Group</b>	<b>Date</b>
All members	Workforce Programme Board	May 2016
<b>Professionally Approved By</b>	Bernard Scully, Director of HR	June 2016

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Next Review Date	May 2019
Author/Contact for Information	Catherine Lee, Head of Training
Policy to be followed by (target staff)	All staff
Distribution Method	Trust Intranet & Website
Related Trust Policies (to be read in conjunction with)	08079 Induction Policy 3.0 09074 Non Medical Study Leave Professional Development Policy Maternity Mandatory Policy

#### Document Review History

Review No	Reviewed by	Review Date
1.1 changes to NHSLA implemented	Catherine Lee	Nov 08
1.2 changes due to HCC Dec 08 criteria amendment	Catherine Lee	Jan 09
1.3 changes due to CQC updates and NHSLA 3 and annual update to TNA	Catherine Lee	June 09
1.4 updated TNA and monitoring process	Catherine Lee	June 2010
2.0 typographical correction	Catherine Lee	May 2011
2.1 Updated policy and TNA as part of annual review following audit	Catherine Lee	November 2012
2.2 Policy update as part of formal review following consultation	Catherine Lee	February 2013
3.0 update to TNA	Catherine Lee	April 2013
3.1 update to TNA	Catherine Lee	August 2013
3.2 update to TNA	Catherine Lee	March 2015
4.0 Policy review and amendments to reflect changes to recording and reporting infrastructure	Catherine Lee	7 <sup>th</sup> June 2016

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## **Appendix 1 Equality Impact Assessment**

## 1.0 Purpose

- 1.1 The purpose of this policy is to define the requirements for mandatory training. The policy describes the responsibilities of everyone involved with mandatory training.
- 1.2 To fulfil the Trust's responsibility in ensuring that all members of the organisation are valued by attending mandatory training. Mandatory training provision should be undertaken within working hours, with protected time, cover arrangements, and appropriate funding.
- 1.3 The Trust is committed to reducing risk and mandatory training is an essential component in this. Trust managers have a duty to train staff to ensure they operate safely, and managers are liable for any failure to provide adequate on-the-job health and safety training.

## 2.0 Aims

- 2.1 The Trust is committed to the aim of ensuring all staff has the opportunity to undertake mandatory training programmes to ensure they work effectively in their roles. It recognises its legal and ethical responsibilities to create and maintain a working environment, which will ensure the welfare and health and safety of its employees, and the people who use our services, the carers, and the public.
- 2.2 Mandatory training can take place in numerous settings, and delivered by various modes. The main aim must always be to deliver training that is underpinned by reducing risk to staff and patients, and recorded appropriately in a central database. This will enable robust reporting for directorates.
- 2.3 Mandatory training is reviewed yearly as a minimum to ensure content keeps pace with the emerging organisational and statutory context. Content where applicable is aligned to the Core Skills Training Framework (CSTF) and is reviewed on an ongoing basis by the relevant training leads to ensure sessions remain relevant, contemporary, and represent best practice.

## 3.0 Scope

- 3.1 This policy applies to all staff at the Trust (permanent - full/part time, fixed term or Staff Bank, Locums contracted to work for a period of six months or longer)
- 3.2 The policy includes statements that relate to people who have disabilities or language difficulties and HR, Learning and Development, and Managers will address these needs as necessary, and wherever possible make reasonable adjustments to accommodate the need.
- 3.3 Mandatory Training is defined as:

**‘Any training element that has been agreed by the organisation as essential to the safe practice of an individual in the workplace ’.**

This covers a range of elements, which are core requirements; all of these elements apply to every member of staff.

3.4 The core range is based on Department of Health, NHS directives, guidelines and legislation and is aligned where appropriate to Core Skills Training Framework. As a minimum the core range will always include:

- Corporate induction( staff new to the organisation)
- Equality and Diversity
- Fire Safety
- Hand Hygiene
- Health and Safety
- Information Governance
- Moving and Handling
- Safeguarding Adults
- Safeguarding Children
- Waste Management

3.5 Every employee must undergo mandatory training; the extent and content will be based on the complexity and duties of their role.

#### **4.0 Roles and Responsibilities**

##### **4.1.1 Chief Executive**

The Chief Executive as accountable officer is responsible for ensuring processes are in place to enable all staff to undertake their required mandatory training.

4.1.2 The Chief Executive has final approval for the agreement of the core elements that are included as mandatory.

##### **4.2 Executive Team, Divisional Managers and Clinical Directors, Associate Chief Nurses, Matrons, Departmental Managers**

The Executive Team, Divisional Managers and Clinical Directors, Associate Chief Nurses, Matrons, Departmental Managers are all accountable for ensuring that all staff within their areas of responsibility are enabled to undertake the appropriate mandatory training as defined.

##### **4.3 Line Managers**

4.3.1 Line Managers are accountable for ensuring they have a local plan that identifies the training that their staff are required to attend, and a record of their attendance at said training.

4.3.2 Line Managers are required to review their local plan monthly as a minimum to ensure staff training needs are met, and keep the plan updated with corrective changes

##### **4.4 Learning and Development**

###### **4.4.1 Learning and Development will**

- map the mandatory training elements to each staff member using the infrastructure of the electronic staff record. This will enable all staff to have their own training needs analysis commensurate with their role and responsibilities.

- Publish regular and bespoke reports using the business intelligence facility within the electronic staff record. These reports are RAG rated and user friendly.
- regularly publish training dates as they are developed, maximising existing opportunities (for example audit days, team meetings)
- issue reminders of mandatory training bookings one week prior to the training date
- accept and enter cancellations one working day prior to the date of session delivery.
- administer the central training database, entering dates and attendance at training sessions.

#### 4.4.2 The Mandatory Training Manager will

- undertake an annual review (more frequently if there are changes to legislation and local or national drivers) of content of mandatory training and the associated TNA, ensuring input from all stakeholders.
- develop an annual training prospectus in consultation with the training element leads. The prospectus will reflect the TNA and demand and capacity, and will be placed on the intranet, setting out locations and dates of mandatory training.
- work with managers to support their local training plans
- circulate detailed attendance and compliance figures to all areas on a regular basis for discussion and action where indicated at the relevant monitoring forum.
- review the databases on a monthly basis, and escalate non-compliance issues to relevant senior management.

#### 4.4.3 The Head of Learning and Development will not agree to Continuous Professional Development (CPD) funding unless there is evidence that the individual has an up to date mandatory training attendance record.

### 4.5 **The Individual**

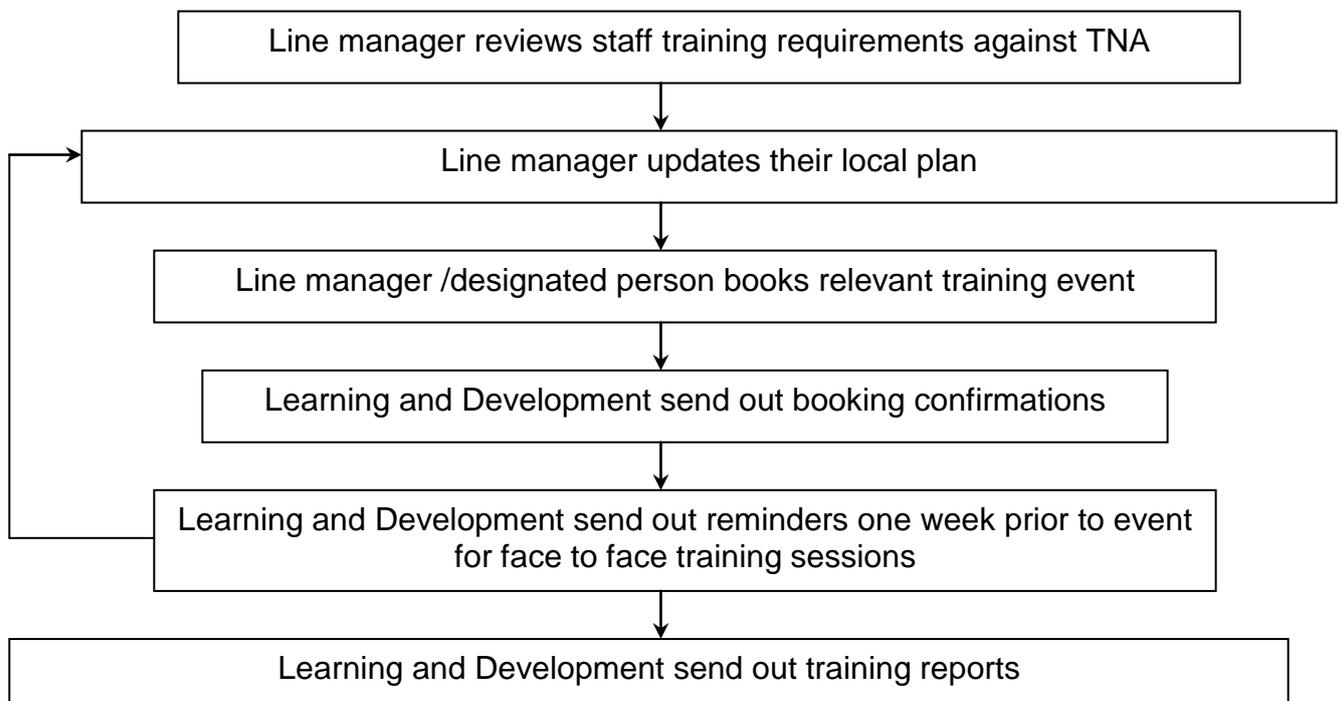
- 4.5.1 It is the individual's responsibility to complete the appropriate mandatory training, relevant to their role, and alert their manager where there are gaps. Individuals can identify gaps by accessing their electronic training account.
- 4.5.2 An individual has responsibility to attend all mandatory training that they are booked onto. Where written information is provided, it is the responsibility of the individual to read the material and clarify any points as necessary.
- 4.5.3 The individual must confirm to their manager that the training has taken place within two working days of the booked session. This reduces the risk of managers not being aware that an individual has been absent during work time for training, and the negative impact that has on roster management.
- 4.5.4 The individual must discuss their mandatory training compliance at their annual appraisal.

## 5.0 Equality and Diversity

- 5.1 This policy embraces Diversity, Dignity and Inclusion in line with emerging Human Rights guidance. We recognise, acknowledge and value difference across all people and their backgrounds. We will treat everyone with courtesy and consideration and ensure that no one is belittled, excluded or disadvantaged in anyway.
- 5.2 All staff, enabling, or providing training will ensure therefore that they have considered the needs of the individual undertaking the training. Where notified, and appropriate, ensure that as far as possible, reasonable adjustments can be made to ensure a fair and equitable provision.

## 6.0 Process

- 6.1 The process for checking attendance, completion and follow up of mandatory training is set out in the flow chart below:



## 7.0 Audit and Monitoring

- 7.1 Content and delivery of Mandatory Training
- 7.1.1 All staff are required to complete and return an evaluation form at the end of face to face training sessions These are collated and circulated to all speakers within one working week of the induction date.
- 7.1.2 Any constructive criticism is followed up by the Learning and Development team and a supported discussion takes place with the relevant facilitator.

## **7.2 Reporting and Policy Requirements**

- 7.2.1 Compliance with the policy requirements is managed through the mapping of the training elements to each staff member, and reported in the same way.
- 7.2.2 The reports are monitored through the divisional governance structure, executive performance meetings, and via the workforce reports submitted by the Director of HR to the Patient Safety and Quality Committee. (as designated sub-committee of Trust Board)
- 7.2.3 Where deficiencies are identified and risks documented in the Trust Risk Assurance framework, appropriate targeted actions are taken to mitigate said risks
- 7.2.4 Key findings and learning points will be disseminated as appropriate to all staff via the electronic communications and to Clinical Directors, Heads of Nursing, Heads of Department, and Matrons for dissemination within their areas of responsibility.

## **8.0 Communication and Implementation**

- 8.1 This policy will be available on the Trust Intranet and website. The policy will be promoted via the staff newsletter 'focus' and sent via email to all managers for dissemination to their staff.
- 8.2 An update on the policy and key requirements will be distributed to all managers.

## **9.0 Review**

- 9.1 This policy will be reviewed annually unless earlier review is required as a result of internal or external developments

## **10. References**

Skills for Health (2016); The UK Core Skills Training Framework

## Appendix 1 Equality Impact Assessment

Title of document being impact-assessed: Mandatory Training Policy

Date of assessment: 7<sup>th</sup> April 2016

Lead person on the assessment: Cathy Lee

Equality or human rights concern.	Does this item have any differential impact on the equality groups listed? Brief description of impact.	How is this impact being addressed?
<b>Gender.</b>	The impact of the Mandatory Training Policy is gender neutral	All trainers assess their delivery of training for gender impact and consult about reasonable changes if required
<b>Race and ethnicity.</b>	The impact of the Mandatory Training Policy is neutral	If training sessions include race and ethnicity elements they will be discussed with the E&D group for guidance to ensure any unintentional differential impact is addressed
<b>Disability.</b>	The impact of the Mandatory Training Policy may have an impact on access to training events if individuals have a disability	Training adjustments are made to address any disability to ensure equality of access –for example relocation of training, training provision in different mediums
<b>Religion, faith and belief.</b>	The impact of the Mandatory Training Policy policy is neutral	If training sessions include elements they will be discussed with the E&D group for guidance to ensure any unintentional differential impact is addressed
<b>Sexual orientation.</b>	The impact of the Mandatory Training Policy policy is neutral	
<b>Age.</b>	The impact of the Mandatory Training Policy policy is neutral	
<b>Transgender people.</b>	The impact of the Mandatory Training Policy policy is neutral	No data is held on this group
<b>Social class.</b>	The impact of the Mandatory Training Policy policy is neutral	No data is held on this group
<b>Carers.</b>	The impact of the Mandatory Training Policy policy is neutral	No data is held on this group

