Policy:
HR 036 - Mandatory Training

Executive Director lead	Director of Human Resources
Policy Owner	Mandatory Training Lead
Policy Author	Mandatory Training Lead

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Summary of policy

Mandatory training is defined as those areas of practice identified either by statute or regulatory bodies, or identified by policy

The changes made to this version of the policy are summarised on page 3 (amendment log).

Target audience	All staff

Keywords	Mandatory Training, Mandatory and Statutory, Training needs Analysis, prospectus, compliance reports

Storage

This is Version 3 and is stored and available through the SHSC Intranet/Internet.
This version supersedes the previous Version 2, October 2016.
Any copies of the previous policy held separately should be destroyed and replaced with this version.

Contents

Version Control and Amendment Log

Version No.	Type of Change	Date	Description of change(s)
1	New draft policy created	July 2015	New policy commissioned by EDG on approval of a Case for Need.
	Ratification and issue	Sept 2015	Amendments made during consultation, prior to ratification.
2	Review / ratification / issue	Sept 2016	Early review undertaken to update the policy to in order to comply with new regulatory requirements.
	Review on expiry of policy	June 2019	Committee structure updated

3.0	Review / consultation / approval / ratification / issue	August 2019	Full review completed as per HR Policy Governance Process
			• Reviewed by HR colleagues and relevant influential managers.
			• Review undertaken by members of the Education and Training Steering Group.
			• Verified by the Joint Policy Group (Staff Side consultation).
			• Following consultation minor changes to the policy are:
			In section 5
			Training Data & Quality Co-ordinator is responsible for:
			   - Ensuring accurate and timely reports are produced for Workforce & Organisational Development Committee, HR and Workforce Group, Performance & Overview Group and the Performance Dashboard.
			   - Sending out a monthly information regarding non-attendance on training via the Trusts Mandatory Training compliance reports (previously sent out information weekly).
			In section 6.5 - Booking system for training (second paragraph)
			Period for cancelling training was reduced from 2 days to 1 day for DNA charge.
			In section 7 - Updated to reflect weekly Connect bulletin rather than all staff emails.

1.   Introduction

This policy provides a clear identifiable system that enables all staff to meet the wide range of training requirements defined by statute and policy for example:
- Care Quality Commission Essential Standards of Quality and Safety (2010)
- Health and Safety at Work Act (1974)
- Management of Violence and Aggression at Work (2008)

The Trust is committed to providing a safe working environment that enables all staff to deliver high quality services to our service users; and the Trust acknowledges that it has a duty to provide appropriate training to enable all employed and voluntary staff to understand their responsibilities in the workplace and the needs of their client group. Therefore, staff ranging from Board members to ward, community and specialist teams and all other departmental staff will receive relevant training, corresponding to the level of risk within their working environment.

2.   Scope

- This policy is trust-wide and involves all staff employed by the Trust.

- Training for staff not directly employed by the Trust is the responsibility of the provider organisation and standards should be clearly specified in the appropriate contractual agreements.

3.   Definitions

Mandatory training: Mandatory training is defined as those areas of practice identified either by statute or regulatory bodies, or identified by policy.

Mandatory training falls into two categories:
- Core Mandatory Training which covers areas that pose a significant risk to all staff at all levels of the Trust and will have therefore been ratified by the Executive Directors Group (EDG);
- Job Specific Mandatory Training which relates to identified risks associated with the nature and purpose of a particular staff group, directorate or specific job role. It covers those areas of practice that enable a member of staff to practice safely and effectively, ensuring they have the skills and knowledge required to be 'fit for purpose'.

Other training and development: It is acknowledged that there are many other forms of training which do not fall into the mandatory training category which are managed through separate processes, for example specialist skills development which supports changes in service delivery, and work related academic or vocational qualifications.

4. Purpose

The purpose of this policy is to provide a clear identifiable structure which will satisfy the Trust's statutory requirements and will enable the identification of those working environments considered to present a significant risk to the Trust. The implementation of the policy will enable future risks to be identified and approved through the policy process.

The policy structure includes:
- Training Needs Analysis (TNA)
- Annual Training Plan
- Annual Training Prospectus
- Methods of Training
- Booking System for Training
- Corporate Compliance reports

5. Duties

All staff are responsible for:
- Completing the relevant training programme as identified with their manager in line with the Trust's requirements;
- Taking joint responsibility with their line manager for meeting their own core mandatory and job role training requirements as previously identified with their line manager;
- Attending appropriate training programmes as and when required;
- Participating proactively in training events and programmes;
- Informing their line manager of any specific learning needs to enable them to complete their training programmes;
- Transferring learning, knowledge and understanding into practice;
- Identifying any reasonable adjustments needed.

Managers are responsible for:
- Providing delegated responsibility and accountability to meet the operational requirements of the training policy;
- Ensuring staff are booking on their required training places;
- Ensuring all reasonable adjustments are put into place before the member of staff commences training;
- Providing training records from locally delivered, or commissioned, mandatory training to ETD administration for input onto the centralised OLM system;
- Where there is a significant volume of locally delivered, or commissioned, mandatory training, providing local resources to input into OLM;
- Informing ETD administration of any specific learning needs of their staff;
- Releasing staff to attend training programmes by identifying protected 'study' time into their rotas/work schemes to enable staff to complete their training within the agreed Trust timescales;
- Monitoring compliance and following up non-attendance;
- Taking action under the Trust's disciplinary policy for persistent non-attendance on required mandatory training.

Education Training Steering Group is responsible for:
- Reviewing Training requirements;
- Agreeing changes to subject levels and frequency in conjunction with Mandatory Training Lead and Subject leads;
- Monitoring Training Compliance in line with Trust targets and trajectory.

Head of Education, Training and Development is responsible for:
- The integration and management of the annual Trust training process with Directorate service plans and regional workforce plans;
- Providing a structure and guidance for training delivery;
- Auditing Trust compliance with training requirements and providing regular reports to Board identifying emerging risks, key issues, and recommendations.

Mandatory Training Lead is responsible for:
- Producing the annual training prospectus;
- Ensuring the delivery of Core Mandatory Training for all staff;
- Monitoring the evaluation of training programmes delivered by ETD;
- Ensuring that the OLM, Annual Training Plan and Training Prospectus remain up to date with Training Competency requirements and course details;
- Monitoring compliance by providing support and guidance at Trust, staff group, directorate, department and individual level on training issues, and updating the Trust as necessary.

Training Data & Quality Co-ordinator is responsible for:
- Ensuring accurate and timely reports are produced for Workforce & Organisational Development Committee, HR and Workforce Group, Performance & Overview Group and the Performance Dashboard.
- Sending out a monthly information regarding non-attendance on training via the trusts Mandatory Training compliance reports

Trust Board is responsible for:
- **The Trust Board** is collectively accountable for ensuring that all statutory requirements relating to training are in place and upheld by staff. This includes the quality, content and frequency of training provided and the maintenance of adequate staff training records.

Executive Directors Group (EDG) is accountable and responsible for:
- The Executive Directors Group (EDG) is accountable and responsible for ensuring provision of accessible resources to support the development, implementation and monitoring of mandatory training. This includes human, physical and financial resources.

6.   Process

6.1   Training Needs Analysis

A Training Needs Analysis (TNA) is a breakdown of the core essential and job role training required by each group of staff; together with the level and frequency required.

The process to define, review and amend the SHSC Training Needs Analysis is managed by the Mandatory Training Lead in consultation with the Mandatory Training Steering Group on an annual basis. The Mandatory Training Lead will meet with Clinical and Corporate Directorates each year to determine training priorities based on service plans, learning from incidents, national priorities for staff development, current compliance with core mandatory and job role training, and any policy changes. These priorities will be collated to form the overall organisational priorities and recorded in the annual training plan.

Amendments to the SHSC Training Needs Analysis can come from any working environment in the Trust, but must be supported by a Service Director or Trust Executive. The justification for inclusion, expected outcomes, and the risks of non-compliance together with any relevant statute, guidelines or standards must be provided. Directorates will be responsible for identifying if a change to the TNA is needed for an individual or group of staff employed in their area and must inform the Mandatory Training Lead accordingly. Amendments to the TNA will be managed by the Mandatory Training Lead through the Education Training Steering Group who will liaise with the Clinical Lead of Medical Education to ensure a match to Deanery requirements. Recommendations will form part of the quarterly education report to EDG who will agree action and timescales for inclusion, changes, or additions to the TNA and assess whether these changes pose any significant risks to the Trust.

6.2   Annual Training Plan

The Annual Training Plan will identify the core essential and job role training requirements for each group of staff, as well as the training required to meet the needs of clients/service users with reference to the SHSC Training Needs Analysis. The annual training plan will outline the process for accessing support for specialist skills development. The Annual Training Plan will identify the target number of staff required to complete their required core mandatory and job role training. Quarterly reports will be submitted to the Executive Directors' Group showing the Trust's progress towards agreed targets. The Workforce and Organisational Development Committee (WODC) meets quarterly and will be made aware of any areas of concern. Each directorate will receive reports regarding their progress to the target number of staff on a monthly basis.

6.3   Annual Training Prospectus

The Trust training prospectus will be produced annually by the ETD Department to reflect the SHSC Training Needs Analysis. The prospectus will include the core essential and job role training programmes that will be available for staff employed by Sheffield Health and Social Care NHS Foundation Trust (SHSC). The prospectus will list the aims, objectives and learning outcomes for each training   programme to enable legislative compliance and

accepted best practice, thus ensuring each training programme meets the identified training needs. Training providers will be required to provide the same information in the prospectus. The prospectus will provide information about how to book a place on the relevant training programmes

6.4 Methods and Levels of Training

The essential requirements for core essential and job role training will initially be provided through the Trust's Induction Programme on joining the Trust or appointment to a different job role in the Trust.

The Trust's Induction Programme Policy details how induction is arranged delivered and recorded. A wide range of learning methods and approaches are used to support learning such as:
- Face to Face teaching and lecture sessions (F2F)
- Simulation
- E-learning
- E-assessments
- 1 -1 sessions
- On the job training and assessment
- Skills workshops
- Open learning materials (CD, DVD)
- Workbooks

Learning methods may be carried out by a single or blended approach according to learning resources and technology available. Trainers and training providers will need to develop training programmes that are relevant for different levels of delivery depending on the risk associated with the job role and staff group. The levels are:
- Level 1 Essential awareness training of the topic
- Level 2 Essential awareness plus sufficient training to enable supervision of others within same staff group
- Level 3 Essential awareness plus sufficient training to provide specialist practice or enable management of services, staff and other resources across groups/disciplines relevant to levels of accountability and responsibility
- Level 4 Essential awareness plus development/accreditation to act as topic expert or to fulfil senior management accountability/responsibility

These levels enable staff to receive the relevant level of training to meet the needs of their job role in a timely and efficient manner. Advanced training should only be provided where it is identified as a specific part of an individual's job role.

6.5 Booking system for training

Line Managers and supervisors follow the process in the Trust Training Prospectus to ensure their staff are booked onto training programmes. This will be done on an annual basis in conjunction with the annual Performance Development Review process for each individual member of staff. Individual names are required for all bookings.   Multiple booking templates are available for teams to co-ordinate team training requirements however anonymous block bookings for teams/departments are not acceptable. The Trust records training on the Oracle Learning Management System (OLM). OLM is a module within the Electronic Staff Record (ESR) system.

The core mandatory and job role training requirements and attendance records for each member of staff is programmed onto OLM. The Human Resources Recruitment department provide a record of new starters once the start dates are confirmed and attendance at the Induction Programme for new starters will be entered onto OLM by the ETD Administration Team. Directorate administration staff will need to enter on to OLM any local level specific training that has been carried out and completed by their staff in their Directorate area, in order to maintain the Trust's central training record (OLM). Local and external trainers keep a register of attendance at each training programme that they deliver. They are responsible for ensuring these registers are forwarded to the ETD Administration Team or local Directorate Administrators, for data inputting on the OLM system.

Managers or supervisors are responsible for and monitor staff non-attendance on their identified mandatory training programmes.   Managers are informed by the ETD administration team of staff who do not attend (DNA) their booked training programmes. Directorates are charged £50 per member of staff who do not attend their booked training or their place is cancelled within 1 working day of the course commencing, and their manager does not send another member of staff to fill that place. Managers and Service Directors are informed by ETD administration at the end of each calendar month if staff do not attend their booked training. Persistent non-attendance requires action by the responsible manager under the Trust's Disciplinary Policy. Staff who do not attend their identified core mandatory and job role training programmes cannot access specialist skills development or other training and education courses outside the organisation. See the Study Leave Policy.

6.6   Corporate compliance reports

There will be one standardised reporting schedule for all essential and role specific training. This schedule will be managed by the Workforce Information & Planning Manager and will form the basis of all reporting.

The Training Data and Quality Co-ordinator will produce the following reports every month
- Detailing compliance at Directorate level;
- Subject Leads (e.g. Safeguarding, Fire Safety, Respect) - detailing compliance and non-compliance at directorate/team level;
- Directorate/Service - detailing compliance and non-compliance by team and employee level.

The Head of Education, Training and Development and Mandatory Training Lead will be responsible for monitoring corporate compliance against the Trust essential training targets, reporting any issues of concern to the Director of Human Resources to confirm their support for the development of an action plan to address the compliance issue. The action plan will be delegated to the Service Director and Clinical Director concerned.   If a Directorate identifies problems in meeting compliance, they should record this on the Trust Risk Register. In such circumstances, the Head of Education, Training and Development will need to be informed by the Service Director so that the Directorate can be supported to reach their required targets in compliance.

7. Dissemination, storage and archiving (Control)

Following the Policy Governance Process the policy will be available to all Trust employed staff via the Trust's intranet and website. A notification of the latest version will also be disseminated to all staff via the Trust's weekly Connect bulletin.
This Policy supersedes the previous Mandatory Training policy issued January 2016.

8. Training and other resource implications

Resource implications for this policy include the following:
- Sufficient qualified and competent trainers to deliver the identified core mandatory and job specific training;
- Identified full time Mandatory Training Lead;
- Sufficient administration support staff in ETD and workforce information teams to book, prepare, record and monitor staff attendance on training and produce reports;
- Smart cards;
- Training rooms with required equipment (IT, clinical skills);
- IT infrastructure and support;
- E-Learning Capacity;
- Identified e-Learning Lead and admin support;

9. Links to other policies, standards and legislation (associated documents)

- Study Leave Policy
- PDR Policy
- Induction Policy
- Risk Management Policies
- Disciplinary Polices
- Any Trust policies, which identify training for staff employed by the Trust.

10. Contact details

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Director of Human Resources	Dean Wilson	0114 22 63960	Dean.Wilson@shsc.nhs.uk

11. References

- o Department of Health (2013), Education outcomes framework

- o Care Quality Commission: Essential standards of quality and safety March 2010

- o Management of Violence and Aggression at Work 2008