

Mandatory Training Policy

Effective: August 2010

Review: June 2012

1. Introduction

The delivery of safe and effective care to patients, and the wellbeing of all employees is of optimum importance within the organisation.

The Trust is responsible for and committed to ensuring that all employees are appropriately trained to enable them to undertake their duties, and to protect their own wellbeing.

Appropriate training covering a wide range of Health and Safety issues is made available to all employees. This policy sets out those training requirements determined by the Trust as being mandatory (i.e. training which must be attended by staff), the employees to whom training applies, and the frequency which training must be undertaken and the responsibilities of those involved. Paid study leave will be granted to all employees undertaking mandatory training.

Mandatory training standards are set out in the matrix in Appendix 1 to this policy which details which training should be undertaken by all Trust employees and the frequency, and also indicates mandatory training for specific employee groups and the frequency to attend.

Identification of new mandatory training requirements from policy/legislation change must be discussed with the Head of Education and Development in the first instance prior to agreement by the Trust Education Board and final Trust Executive approval.

This policy applies to all employees of the Trust including the Nurse Bank.

2. Role Responsibilities

2.1 Directorate/Departmental Managers/Clinical Directors

- 2.1.1 Are responsible for ensuring that staff are allocated time to attend mandatory training identified by risk assessments where appropriate and Appendix 1 of this policy.
- 2.1.2 Must ensure that applications for funding to attend external training events are not submitted to the Education and Training Department for approval without confirmation that mandatory training has been completed, or training dates allocated.
- 2.1.3 Will identify Department/Directorate Mandatory training requirements using the matrix in Appendix 1, and ensure compliance is maintained by all employees required to undertake any additional specific local mandatory training.
- 2.1.4 Are responsible for following up Did Not Attend (DNA) notifications within their service, ensuring the individuals re attend their required training
- 2.1.5 Are responsible for ensuring that accurate records are maintained at local level in order to monitor compliance with this policy.
- 2.1.6 Are responsible for ensuring that accurate registers (using standard register template) for any locally provided mandatory training are returned to the

Education and Training Department within 5 days of the training being completed for recording on ESR.

- 2.1.7 Are responsible for ensuring that mandatory training requirements/completions are agreed and documented within the annual staff appraisal process

2.2 Employees

- 2.2.1 Are responsible for ensuring that they attend mandatory training identified for their role on the dates agreed unless prevented from doing so.
- 2.2.2. Must ensure that mandatory training must have been completed, or a place allocated on all relevant programmes prior to seeking approval for paid leave/expenses to attend non-mandatory external training events.
- 2.2.3 Should be aware that failing to attend mandatory training events as allocated to them for reasons other than the need to cover unplanned service demands or sickness absence, may lead to disciplinary action.
- 2.2.4 Employees who fail to attend a pre booked session, and have not cancelled within 24 hours will be deemed to be a DNA (did not attend) and will receive written notification of this, copied to their manager.

2.3 Trust Education and Training Department / Mandatory Training Providers

- 2.3.1 The Trust Education and Training Department is responsible for maintaining accurate records of all staff completing mandatory training as indicated in Appendix 1, and providing monthly summary reports to the Trust Executive and Directorates. All mandatory training listed within Appendix 1 is to be recorded using ESR or the Training data warehouse (for e learning)
- 2.3.2 Mandatory Training Providers are responsible for ensuring that accurate registers are maintained of all employees completing training delivered directly by them, including indicating DNAs and that registers are returned to the Education and Training Department within 5 working days of the training event taking place.
- 2.3.3 The Education and Training Department will coordinate the scheduling of all corporate provision of mandatory training and annual training plan and mandatory training providers will contribute to this process.

3. Definition Of Clinical Staff

Clinical staffs are defined as Doctors, Dentists, Nurses, Midwives, Health Care Assistants, Allied Health Professionals, including helpers, Pharmacists, Physicists and other persons who are involved in the direct care of patients. Clinical support staff includes porters and technical support where indicated.

4. Attendance Records for Mandatory Training

Attendance at all mandatory training programmes for all staff is monitored centrally by the Education and Training department through the use of ESR records. This will include DNA rates for pre bookable programmes. This data is the only source data to be used for Directorate performance review and quarterly reports to the Trust Executive and Trust Board.

5. Monitoring

Compliance reports detailing those staff who've attended training as required and staff who have not attended scheduled training will be provided to Directorates within the monthly HR reports and are to be monitored by the Directorates in line with their responsibilities outlined in the policy. It is the responsibility of the Directorates to ensure non-attendees are followed up until all required training is completed.

Compliance will be monitored by the Head of Education and Development, who will provide quarterly reports detailing corporate and Directorate training provision, uptake and non attendance for mandatory training to the Trust Education Group

The Trust Education Group will review the training figures and non attendance rates, identify any deficiencies and monitor required corrective actions through the completion.

The Trust Education Group will review the annual mandatory training needs analysis and confirm the mandatory training matrix and staff numbers requiring training at the beginning of each financial year and oversee the production of the Annual Training report.

Author: Head of Education and Development

Staff Group	Course Provision	Clinical Support Services	Administrative and Clerical	Allied Health Professionals	Ancillary Staff	Building and Maintenance	Laboratory Staff Groups	Pharmacy	Professional and Technical	Medical	Dental	Nursing and Midwifery Registered	Matrons/Nurse Consultants	Non Clinical Senior Managers
Blood Transfusion Awareness	E learning	IN - A*								IN - A*		IN - A*	IN - A	
Blood Transfusion Collection & Delivery Competence Assessment	Taught Session	IN - A*										IN - A*	IN - A	
Blood Transfusion Administration Competence Assessment	Taught Session													
Blood transfusion specimen taking competence Assessments	Taught Session	IN - 3*								IN - 3*		IN - 3*	IN - 3	
Safeguarding - Child Protection Foundation	E learning (combined Adult and Children package)	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3		IN - 3	IN - 3	IN - 3
Safeguarding - Child Protection Core	classroom or E learning	A (P)	A (P)	A (P)						A (P)		A (P)	A (P)	
Complaints handling	induction	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP		I/NP	I/NP	I/NP
Equality and Diversity Awareness	E Learning	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3		IN - 3	IN - 3	IN - 3
Fire Safety	E learning	I -A	I -A	I -A	I -A	I -A	I -A	I -A	I -A	I -A		I -A	I -A	I -A
Food Hygiene Awareness	Induction and every 3 years	IN	IN	IN	IN	IN	IN	IN	IN	IN		IN	IN	IN
Health & Safety at Work	Induction	IN	IN	IN	IN	IN	IN	IN	IN	IN		IN	IN	IN
Induction (corporate)	classroom (e learning for junior drs)	IN	IN	IN	IN	IN	IN	IN	IN	IN		IN	IN	IN
Induction (Local)	Checklist on Intranet	IN	IN	IN	IN	IN	IN	IN	IN	IN		IN	IN	IN
Incident Reporting	Induction	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP	I/NP		I/NP	I/NP	I/NP
Infection Control Level 1	e learning	I -A	I -A	I -A	I -A	I -A	I -A	I -A	I -A	I -A		I -A	I -A	I -A
Infection Control Level 2	e learning	A								A		A	A	
Manual Handling Awareness	induction	IN	IN	IN	IN	IN	IN	IN	IN	IN	IN	IN	IN	IN
Manual handling Office staff	elearning		IN-3						IN-2					IN-2
Manual Handling Objects	Taught Session				IN-2	IN-2	IN-2	IN-2						

Manual Handling Patients	Taught Session	IN - 2		IN - 2						IN - 2	IN - 2	IN - 2	IN - 2	
Manual Handling Facilitator Training/Updates OBJECT Handling	Taught Session	2	2		2	2	2	2	2					
Manual Handling Facilitator Training/Updates PATIENT Handling	Taught Session	A		A					A	A	A	A		
Display Screen Assessor	Taught Session		3				3	3	3					
Adult Basic Life Support	Taught Session	A		A			A*	A*		A	A	A	A	
Paediatric Basic Life Support	Taught Session	A (P)		A (P)			A (P)	A (P)		A (P)	A (P)	A (P)	A (P)	
Safeguarding Adults Level 1 - Basic Awareness	E Learning	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3	IN - 3
Safeguarding Adults Level 2 - Recognising and Responding to abuse	Safeguarding team			3						3 (*)	3 (*)	3	3	
Staff Group	Course Provision	Clinical Support Services	Administrative and Clerical	Allied Health Professionals	Ancillary Staff	Building and Maintenance	Laboratory Staff Groups	Pharmacy	Professional and Technical	Medical	Dental	Nursing and Midwifery Registered	Matrons/Nurse Consultants	Non Clinical Senior Managers
Safeguarding Adults Level 3b - The role of the service manager	Multiagency training - Newcastle Safeguarding												Once	Once ®
Saving Lives Modules	e learning	Once								Once	Once	Once	Once	
Slips, Trips and Falls - All Staff	Induction	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once	IN - Once
Slip, trips and falls Clinical Staff	E learning	Once		Once						Once	Once	Once	Once	
Violence and Aggression Awareness - Conflict Resolution	E Learning	3	3	3	3	3	3	3	3	3	3	3	3	3
Violence and Aggression - breakaway training	Taught Session	A - RA	A - RA	A - RA						A - RA	A - RA	A - RA	A - RA	
Violence and Aggression - C & R training	Taught Session	A - Porters			A - Security Staff									
COSHH	Taught Session	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	
Radiation Protection	Dept based	A ®		A ®						A ®	A ®	A ®		
Student Mentor updates	Dept based			2							A	A		
First Aid at Work	Taught Session	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	

First Aid at Work refresher	Taught Session	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	
First Aid one day Appointed persons	Taught Session	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	Once - NP	
First Aid one day Appointed persons refresher	Taught Session	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	3 - NP	
H & S Risk Assessment	Taught Session	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	A NP	
TUG Driver	Taught Session	A @			A @	A @								
Medical Gases	Dept based	Local IN - N		Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N		
Medical Devices	Dept based	Local IN - N		Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N	Local IN - N		
Medicines Management	Dept based	Local IN		Local IN			Local IN	Local IN	Local IN	Local IN	Local IN	Local IN		

KEY	A @ = relevant to role	IN = Induction	A = annual	2 = Biennial	3 = every three years (P) = Paediatric staff only	NP = nominated person only	Local IN - N Local induction and when new equipment used	RA - Risk Assessment - if identified for role as result of local risk assessment - contact Health & Safety Team for information	* with direct patient contact responsibilities	Infection control level 1 training includes hand hygiene	Induction includes the following: Safeguarding (Child and adult foundation/level 1), Health and safety including slips, trips and falls, incident reporting, inoculation incidents, complaints. Equality and diversity mandatory session, bullying and harrasment/dignity and respect and e learning mandatory modules as indicated on matrix.	
		P = for those working frequently with children	For those with food handling responsibilities ONLY	* with direct patient contact responsibilities	Relevant to Role See details on e learning	FRONT LINE STAFF ONLY						

THE NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST
IMPACT ASSESSMENT – SCREENING FORM A

This form must be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Policy Title:	Mandatory Training	Policy Author:	Head of Education and Development
		Yes/No?	You must provide evidence to support your response:
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	Impact is the same for all staff regardless of this area
	• Ethnic origins (including gypsies and travellers)	No	Impact is the same for all staff regardless of this area
	• Nationality	No	Impact is the same for all staff regardless of this area
	• Gender	No	Impact is the same for all staff regardless of this area
	• Culture	No	Impact is the same for all staff regardless of this area
	• Religion or belief	No	Impact is the same for all staff regardless of this area
	• Sexual orientation including lesbian, gay and bisexual people	No	Impact is the same for all staff regardless of this area
	• Age	No	Impact is the same for all staff regardless of this area
	• Disability – learning difficulties, physical disability, sensory impairment and mental health problems.	No	Adjustments are available for sensory impairment in terms of e learning and face to face training provision
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4(a).	Is the impact of the policy/guidance likely to be negative? (If “yes”, please answer sections 4(b) to 4(d)).	No	
4(b).	If so can the impact be avoided?		
4(c).	What alternatives are there to achieving the policy/guidance without the impact?		
4(d)	Can we reduce the impact by taking different action?		

Comments:	Action Plan due (or Not Applicable):

Name and Designation of Person responsible for completion of this form: Karen Giles Date: 13.8.10

Names & Designations of those involved in the impact assessment screening process: As before – only changes were to frequency of training and discussed at Trust Education Group.

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 (If any reader of this procedural document identifies a potential discriminatory impact that has not been identified on this form, please refer to the Policy Author identified above, together with any suggestions for the actions required to avoid/reduce this impact.)