|  |  |
| --- | --- |
| **Document name:** | Mandatory Training Policy (including Essential to Job Role Training) |
| **Document type:** | Policy |
| **What does this policy replace?** | Replaces previous Mandatory Training Policy |
| **Staff group to whom it applies:** | All staff within the Trust |
| **Distribution:** | The whole of the Trust |
| **How to access:** | Intranet and website |
| **Issue date:** | March 2021 (version 8) |
| **Next review:** | March 2024 |
| **Approved by:** | Executive Management Team  |
| **Developed by:** | Head of Learning and Development |
| **Director leads:** | Director of Human Resources, OD and Estates |
| **Contact for advice:** | Head of Learning & Development |

**CONTENTS**

|  |  |  |
| --- | --- | --- |
| **1.0** | **Introduction** | **3** |
|  |  |  |
| **2.0** | **Purpose and Scope** | **4** |
|  |  |  |
| **3.0** | **Definitions** | **4** |
| 3.1 | Trustwide Mandatory Training | **4** |
| 3.2 | Essential to Job Role Training | **5** |
|  |  |  |
| **4.0** | **Duties** | **5** |
| 4.1  | Trust Board | **5** |
| 4.2  | Executive Management Team (EMT) | **5** |
| 4.3  | Directors | **6** |
| 4.4  | Director of Human Resources, OD and Estates  | **6** |
| 4.5 | Operational Management Group (OMG) | **6** |
| 4.6 | Mandatory Specialist Advisors Group | **6** |
| 4.7  | Education and Training Governance Group | **7** |
| 4.8 | Head of Learning and Development | **7** |
| 4.9  | Workforce Information | **7** |
| 4.10 | Line-managers | **8** |
| 4.11 | Employees | **8** |
|  |  |  |
| **5.0** | **Principles** | **9** |
|  |  |  |
| **6.0** | **Development Process** | **10** |
|  |  |  |
| **7.0** | **Equality Impact Assessment**  | **10** |
|  |  |  |
| **8.0** | **Dissemination and Implementation Arrangements**  | **10** |
|  |  |  |
| **9.0** | **Process for Monitoring Compliance of this Policy** | **10** |
|  |  |  |
| **10.0** | **Review and Revision Arrangements** | **11** |
|  |  |  |
| **11.0** | **Appendices** | **12** |
| 1 | Mandatory and Essential to Job Role Training Needs Matrix | **13** |
| 2 | Process for Monitoring Compliance of Mandatory Training | **14** |
| 3 | Associated Documents and References | **16** |
| 4 | Procedure for undertaking Trustwide Mandatory Training and Essential to Job Role Training | **18** |
| 5 | Process for New and Revised Mandatory and Essential to Job Role Training | **18** |
| 6 | Business Case for Potential Subjects to become Mandatory or Essential to Job Role Training | **21** |
| 7 | Equality Impact Assessment | **24** |
| 8 | Checklist for the Review and Approval of Procedural Document  | **26** |
| 9 | Version Control Sheet | **29** |

**South West Yorkshire Partnership NHS Foundation Trust**

**MANDATORY TRAINING POLICY**

1. **Introduction**

 South West Yorkshire Partnership Foundation Trust (SWYPFT) aims to provide a safe working environment for staff to deliver safe, high quality care to everyone using its services through the maintenance of a skilled and competent workforce. As part of this, SWYPFT requires all employees to attend specific training subjects on a mandatory, non-optional basis depending on their role and area of work. These subjects have been assessed by SWYPFT as of critical importance in mitigating common, key Trustwide risks. As such, attendance rates of these subjects will be regularly reported to the Trust Board as a key performance indicator of Trust services.

 In addition to training subjects agreed as mandatory on a Trustwide basis, service and line managers may place further, specific training expectations on staff for which they are responsible. These Essential to Job Role training subjects are likely to be diverse and constantly changing and may be shaped by:

* Guidance or recommendations arising out of specific Trustwide Health and Safety, Clinical or Employment policies.
* Local risks and context e.g. arising out of specific working conditions, high risk client groups, learning from incidents or contractual requirements of Commissioners.
* Requirements to comply with external standards e.g. relevant training subjects identified in NHS Litigation Authority Standards, and Care Quality Commission guidance.

The policy and associated procedures identify relevant training subjects and to whom these apply and set out responsibilities for ensuring training subjects are appropriately identified, provided and undertaken within approved time frames and that appropriate action is taken should this not occur.

 This policy and associated procedure should be read in conjunction with all of SWYPFT’s related Health and Safety, Clinical or Employment policies (Appendix 3). For staff attached to/managed by SWYPFT in Integrated Service Teams, the policy and procedures should also be read in conjunction with any relevant Service Integration Frameworks, which will state what mandatory training may be accepted between lead and host employers.

 This policy and associated procedure have been written in accordance with SWYPFT’s Policy for the development, approval and dissemination of policy and procedural documents (Policy on Policies).

**2. Purpose and Scope**

This policy and associated procedures applies to all Trust staff including bank. Volunteers comply with the Mandatory Training Handbook for Volunteers (Available on the Trust Intranet).

This Policy aims to define Trust-wide Mandatory Training that is required to be completed by all staff; and Essential to Job Role Training, which is training recognised by the Trust as requiring consideration by services as a minimum to identify training subjects relevant to their specific service delivery.

It is not possible within this policy to define which specific Essential to Job Role training requirements apply to which specific posts in the same way as it is for Trustwide Mandatory Training. The policy however, sets out an agreed list of such Essential to Job Role training subjects which have been recognised by SWYPFT as requiring consideration by services as a minimum.

The intended outcomes of this policy and associated procedures are the achievement of a systematic approach to identifying and reviewing Trustwide Mandatory and Essential to Job Role training subjects, outlining a systematic approach to the planning, provision, and monitoring of training and the achievement of desired levels of training uptake.

Failure to implement or comply with this policy and associated procedures may result in the following risks arising:

* Staff failing to attend appropriate required training within specified time frames poses a potential risk to themselves, service users, colleagues and the reputation of the Trust.
* SWYPFT may fail to comply with legal, contractual and professional requirements including, but not limited to, the requirements of the Care Quality Commission, NHS Litigation Authority and commissioners of Trust services.

**3. Definitions**

* 1. **Trustwide Mandatory Training**

For the purposes of this policy, Trust-wide MandatoryTraining is defined as:

 ‘Mandatory Training is compulsory training that is determined essential by the Trust for the safe and efficient delivery of services. It is training deemed to reduce Trust risks and comply with local or national policies, statute, legislation, or standard.’

Training which requires a **minimum** uptake of 80% of staff eligible to undertake that subject to be achieved in all parts of the Trust at any one time.

The approved list of Trustwide mandatory training subjects together with guidance on which posts require training can be found in the Mandatory and Essential to Job Role Training Matrix (Appendix 1).

3.2 **Essential to Job Role Training**

For the purposes of this policy, Essential to Job Role training is defined as:

‘Essential to Job Role Training is non-optional training **in addition** to Mandatory Training deemed by services relevant to their service delivery, function, and job roles. It is training informed at local level based on guidance provided in this policy and/or though individual specific Health and Safety, Clinical or Employment policies prepared by relevant Trust specialist advisors.’

The approved list of Essential to Job Role training subjects together with guidance and signposting to relevant policies and specialist advisors to assist with training needs decision making, can be found in the Mandatory and Essential to Job Role Training Matrix (Appendix 1).

**4. Duties**

 The following duties apply to this policy:

4.1 **Trust Board**

* The Trust Board is ultimately responsible for ensuring that the organisation provides sufficient Trustwide mandatory training and that uptake rates achieve acceptable levels.
* The Trust Board will receive assurance of Trustwide mandatory training provision and uptake through quarterly reports against uptake targets, relative risks and mitigating actions.

4.2 **Executive Management Team (EMT)**

* Approve this policy and ensuring it has been developed in accordance with SWYPFT’s Policy for the Development, Approval and Dissemination of Policy and Procedural Documents.
* Take appropriate action to address any identified factors affecting Trustwide Mandatory or Essential to Job Role training provision or uptake.
* To provide final approval of any revisions to the Mandatory Training and Essential to Job Role Training provision.

4.3 **Directors**

* Act as sponsors and strategic leads for designated Trustwide Mandatory and Essential to Job Role training areas
* Appoint a named specialist advisor for those subjects for which they have been named as responsible.
* Ensure provision of sufficient Mandatory and Essential to Job Role training for those subjects for which they have been named as responsible.
* Ensure relevant underpinning Health and Safety, Clinical or Employment policies are in place as required for those subjects for which they have been named as responsible.
* Ensure resource issues and other risks affecting provision or uptake of training for which they are responsible are brought to the attention of the ETGG
* Implement this policy within their BDU or Support Services ensuring that managers are aware of their responsibilities for ensuring staff attend/complete relevant training.
* Achieve required Trustwide mandatory training uptake rates within their BDU or Support Services, and have an overview of any areas/individuals who are persistantly non compliant with their mandatory training.
* Ensure local services identify and achieve safe levels of attendance at Essential to Job Role training.

4.4 **Director of Human Resources, OD and Estates**

* Ensure this policy is developed, maintained and controlled in accordance with Trust procedures.
* Ensure all directors are aware of their responsibilities in relation to this policy
* Provide performance reports on mandatory training to the Trust Board and/or relevant committees.
	1. **Operational Management Group (OMG)**
* To provide operational oversight of mandatory and essential to job essential training compliance at team level within BDUs and services.
* To receive a monthly hot spot report from the Mandatory Training Specialist Advisors Group to review risk areas of all mandatory training and agree plans for their staff and teams to mitigate the risks of non-compliance and ensure that training is undertaken in their areas.

4.6 **Mandatory Training Specialist Advisor (MTSA) Group**

* + - * To identify, assess, and escalate risks relating to Trust-wide mandatory training compliance.
* To review annually and amend as appropriate the Mandatory Training Policy and Matrix, and respective local policies and procedures where these relate to mandatory training.
* To receive and approve changes in national/local legislation that has implications for mandatory training.
* Produce plans for potential Trustwide Mandatory or Essential to Job Role training subjects.

Specific responsibilities within the each of the Specialist Advisor’s area of expertise:

* Advise (either directly and/or via relevant policy) which staff posts attend Mandatory and Essential to Job Role training subjects, including advising on the training needs of any new roles and positions in the organisation.
* Produce a timely training trajectory for their subject with support from Learning and Development, to ensure sufficient training places are scheduled when training will be required, including anticipated periods when training activity will be high, or at periods of high recruitment.
* Where there are emergent demands for training in areas where training capacity does not meet need, to agree with Learning and Development any additional training delivery requirements to meet the need and escalate to the MTSA Group where there are risks in maintaining compliance.
* Ensure training resources are targeted at services/staff groups where training is deemed to have the highest risk or need, ensuring training methods used are aligned and driven by relevant legislation, such as e-learning or blended learning for low risk staff groups or services (Appendix 4).
* Ensure that training attendance registers are recorded on ESR within one week of training completion to enable timely recording and reporting of attendance on ESR. Or where appropriate, the trainer will input staff attendance to Mandatory and Essential to Job Role training at the time of the training activity using technology available.
* To monitor compliance rates for their own subject area and escalate any risks and service hot spots to the MTSA Group for OMG review and action.

4.7 **Education and Training Governance Group (ETGG)**

* To receive any recommendations or business cases for new mandatory or essential to job role training, amendments to current provision, for subjects to be removed, or for moving subjects between mandatory or essential to job role.
* To receive and review risks to mandatory training compliance and escalate to EMT as appropriate.
* To review and amend as appropriate the Trust’s policies and procedures, which relate to or reference Mandatory and Essential to Job Role training subjects.
* To consider and approve responses to changes in legislation, national standards

4.8 **Head of Learning and Development**

* Produce, maintain and review the Mandatory Training Policy and associated procedures and guidance on the training needs of staff, including the Mandatory and Essential to Job Role training schedule available through the Trusts intranet.
* Ensure that ESR contains mandatory training requirements for all Trust posts (as training competencies) based on advice of mandatory training providers/specialist advisors.
* Provide support and guidance where required to the specialist advisors to ensure sufficient training provision for each subject is scheduled for the full financial year meeting the full workforce training requirements, considering periods of high and low risk (Appendices 4 and 5 for planning process).
* Highlight training resource risks where limited training provision exists, escalating resource issues affecting this to the attention of the relevant director sponsor.
* Ensure there is an appropriate suite of supporting e-learning or blended learning materials to assist in the achievement of required levels of training.
* Provide guidance when individuals are unable for whatever reason to undertake their required training.
* To lead an annual review of mandatory training and produce a report for the Trust’s Clinical Governance and Clinical Safety Committee.

4.9 **Workforce Information**

* Lead in the production of mandatory training performance data reports for Trust services at service and team level, for staff, EMT, and the Board.

4.10 **Line-managers**

* Implement and monitor this policy and associated procedures ensuring that all employees within their area of responsibility have attended and are up to date with the appropriate training identified for their post.
* Ensure Trustwide mandatory training requirements of relevant staff are understood (Appendix 1) and uptake targets are achieved.
* Ensure Essential to Job Role training requirements of relevant staff are identified (Appendix 1) and ensure there is sufficient numbers of appropriately trained staff to ensure safe levels of functioning in the local context at any one time.
* Ensure that staff have access to current information on relevant training opportunities provided by the Learning and Development department.
* Ensure that time is allocated to enable staff to attend relevant training events or complete relevant e-learning programmes.
* Support specialist advisors and Learning and Development to identify the mandatory training requirements for any new posts created.
* Provide all new employees with a schedule to complete all their mandatory and Essential to Job Role training as part of the local induction process.
* Ensure that staff who require reasonable adjustments to access training are supported.
* To agree Mandatory and Essential to Job Role Training requiements with staff as part of the Trust’s appraisal process.
* To regularly review mandatory training compliance with staff and inform them of the consequences of any non-completion of required training:

4.11 **Employees**

* Complete all required Mandatory and Essential to Job Role training subjects within the renewal period (or within the local induction period for new starters), and attend training on the date/time agreed.
* Monitor their own renewal compliance for mandatory training subjects and take personal accountability to ensure that all training requirements are met. To alert their line manager when a training subject is due to expire.
* Book onto a training place using recognised booking procedures for each programme as laid out in SWYPFT’s online Training and Development Brochure.
* Promptly cancel any places on courses where they cannot attend to enable their place to be re-allocated.
* Report directly to their line manager of any non-attendance or problems experienced in accessing training.
* Ensure that when attending training events, the attendance register is signed as confirmation of attendance.

All employees are required to comply with mandatory training requirements as specified by the Trust unless there is a significant reason why this cannot be achieved. Repeated failure to comply will affect pay progression in line with Agenda for Change terms and conditions of employment, and may be dealt with as a conduct issue and may result in the disciplinary procedure being invoked.

**5. Principles**

5.1 SWYPFT will have in place a systematic Learning Needs Analysis process for identifying and providing Trust-wide Mandatory Training and Essential to Job Role training needs matrix. These subjects reflect areas considered by SWYPFT as critical or otherwise important for mitigating risk and ensuring minimum levels of service safety and quality. Training subjects collectively reflect statutory expectations, directives, compliance requirements and the NHS Litigation Authority Training Needs Analysis Minimum Dataset.

5.2 All staff employed by SWYPFT have a responsibility to undertake the identified Trust-wide mandatory training for their roles as a minimum within the specified time limit. The approved list of mandatory training subjects together with guidance on which posts require training can be found in the Mandatory and Essential to Job Role Training Needs Matrix (Appendix 1).

5.3 All staff employed by SWYPFT have a responsibility to undertake any Essential to Job Role training as directed by their manager. The approved list of Essential to Job Role training subjects together with guidance / signposting to relevant policies to assist with training needs decision making can be found in the Mandatory and Essential to Job Role Training Needs Matrix (Appendix 1).

5.4 SWYPFT have in place central systems to record, monitor and report attendance at Trustwide mandatory training against annually agreed uptake targets.

5.5 New starters are able to transfer any matching mandatory training compliance achieved in their previous NHS trust employment through the automated ESR Inter Authority Transfer (IAT) process reducing the need to repeat any immediate mandatory training.

5.7 Any training transferred must match the mandatory training course outcomes agreed by the Mandatory Training Specialist Advisor and the last recorded training activity must also be within the renewal period as determined by the Trust. This supports the Trust’s declaration for subjects that are aligned with the national Core Skills Training Framework (CSTF).

5.8 The ESR IAT process will be administrated by the Learning and Development department who will centrally update ESR employee learner records as they are received via the automated process.

5.9 Any new starter learner records that are not received via the automated ESR IAT process can be reviewed on an individual basis by the Mandatory Training Specialist Advisor with the employee providing evidence to Learning and Development of any training completed in their previous NHS trust employment. This also covers students on placement programmes dependent on what mandatory training might be included in the university programmes.

5.10 Junior Doctors hosted by SWYPFT as part of their rotation will be required to complete any supplementary training as required by the Trust in addition to that completed with the Deanary. The process to determine training requirements and access to training will be agreed between HR Medical Recruitment, the Medical Education Department, and Learning and Development.

5.11 In line with their local induction requirements, Agency Staff may be asked by the services in which they are hosted to complete appropriate mandatory training relevant to their immediate duties the individual may be asked to perform for which they do not have the relevant training or competence. Training completed will be recorded as part of the local induction documentation.

5.12 All potential or proposed new areas of Trust-wide Mandatory training or Essential to Job Role training subjects should be initially discussed with Learning & Development. Discussion plans to be presented to the MTSA group, so that implications of any changes or additional training requirements can be explored prior to referring to the ETGG for recommendations, and then to EMT for confirmation of training status. Please refer to the template in Appendix 6 – Business Case for Potential Subjects to become Mandatory or Essential to Job Role Training.

**6. Development Process**

6.1 Version 8 of this policy was developed as a result of approved changes to Mandatory and Essential to Job Role Training. The policy revision reflects latest advice from relevant specialist advisors regarding changes to training requirements subsequent to the release of the last policy review. It also describes new governance procedures through the Education and Training Governance Group (see section 4.5).

6.2 The Policy follows consultation and work with the Operational Management Group (OMG) to improve training compliance monitoring.

6.3 Future policy considerations will take an informed risk management approach to mandatory training, considering compliance levels within services/staff groups when less than 100% compliance is deemed high risk despite the Trust-wide target of 80%.

**7. Equality Impact Assessment**

Included as Appendix 7.

**8. Dissemination and Implementation Arrangements**

* Policy launched via weekly email communications and Trust intranet.
* Members of the Learning and Development department to raise and maintain awareness of the policy with managers and staff during scheduled meetings and in response to information requests regarding mandatory training.
* Policy to be referred to in mandatory training reports provided for managers
* Policy to be referred to, and from other relevant policies including study leave policy and induction policy.
* Policy to be circulated to training providers / specialist advisor.

**9. Monitoring Compliance of this Policy**

Compliance with, and effectiveness of this policy will be assessed through ongoing analysis and formal annual review of:

* Mandatory training compliance rates against a minimum attendance target set annually by the EMT.
* Trust Board assurance will be through the performance monitoring process based on mandatory training rates and through quarterly Board reports summarising existing risks and mitigating actions.
* Complaints in relation to the application of the Policy will be investigated as they arise, ensuring that issues are addressed both through feedback to managers, the Learning and Development Department and training providers/specialist advisors, and through policy amendments as required.
* In receipt of updates in legislation, statute, standard, or best practice, the Head of Learning and Development and Specialist Advisor will review the mandatory training policy and associated training based on:
	+ - * + Recommendations from providers/specialist advisors/ETGG
				+ Latest guidance and published requirements
				+ Verbal and written feedback received from managers in response to existing practice

Further information on the the Process for Monitoring Compliance of Mandatory Training is found in Appendix 2.

**10. Review and Revision Arrangements**

This policy will be reviewed by the Head of Learning and Development three years from the date of approval or sooner if there is a requirement to meet legal, statutory or good practice standards.

The Head of Learning and Development is responsible for placing the new version of the policy in the electronic document store, for ensuring the document being replaced is removed from the document store and that an electronic and paper copy, clearly marked with version details, are retained as a corporate record.

**11. Appendices**

1. Mandatory and Essential to Job Role Training Needs Matrix (The matrix is timely updated as Mandatory and Essential to Job Role training subjects change. Access is via the Trust intranet, a link is provided in appendix 1)
2. Process for Monitoring Compliance of Mandatory Training
3. Associated Documents and References
4. Procedure for Undertaking Trustwide Mandatory Training and Essential to Job Role Training
5. Process for New and Revised Mandatory and Essential to Job Role Training
6. Business Case for Potential Subjects to become Mandatory or Essential to Job Role Training
7. Equality Impact Assessment
8. Checklist for the Review and Approval of Procedural Document
9. Version Control Sheets

**Appendix 1- Mandatory and Essential to Job Role Training Needs Matrix**

**This document is stored on the Trust’s intranet and is accessible from the** [**Learning and Development**](http://nww.swyt.nhs.uk/learning-development/Pages/default.aspx) **web page**

The Matrix document is not embedded into this policy as to do so would result in the need for frequent updates to the policy or inaccurate guidance given. The matrix is a working document and is timely updated as Mandatory and Essential to Job Role training subjects change.

**Appendix 2 - Process for Monitoring Compliance of Mandatory Training**

 i. **ESR Recording and Reporting**

 All Trustwide Mandatory and Essential to Job Role training attended by staff is recorded using the NHS Electronic Staff Record. Administration of attendance records is either with Learning and Development or the subject specialist advisor where this has been agreed. Mandatory and Essential to Job Role Training completed via e-learning is automatically recorded in ESR learning records if completed by staff using the ESR portal.

ii. Essential to Job Role training is recorded in staff’s individual ESR learning record and therefore is monitored at service level. All line managers are locally responsible for ongoing monitoring and ensuring required training attendance.

iii. Mandatory training attendance reported and recorded in ESR for each calendar month will be reported in the next calendar month via HR Workforce Information reports to ensure the full month’s training acitivty is accurately captured and reported. Ad hoc reports can be produced for regulatory requirements at any point during the month but will only include data that has been inputted at the time of running the report.

iv. Only training activity that is reported to Learning and Development and/or recorded on ESR by the Specialist Advisor is able to be corporately reported. It is critical that all Mandatory and Essential to Job Role Training is recorded on ESR as soon after the training activity as possible to ensure that any reports run from ESR are current and are in real-time.

v. **Service and Local Monitoring**

 It is the individual and line-manager’s personal responsibility to monitor training activity and compliance renewal periods at individual and team level by reviewing the mandatory training data on the intranet or via the reports distributed on a monthly basis by HR Workforce Information.

vi. BDU and service levels are monitored by relevant directors and senior managers based on uptake reports (Performance Wall) provided by HR Workforce Information.

vii. **Mandatory Training Specialist Advisor Group (MTSA Group)**

 The Mandatory Training Specialist Advisors Group is responsible for monitoring compliance and individual specialist advisors are specifically responsible for monitoring compliance for their own subject area on a monthly basis. Where there is increased demand for training in areas where training capacity is does not meet demand, the specialist advisor will agree with Learning and Development for any additional training delivery requirement to meet the need. Where there are risks in meeting demand, this should be escalated to the Education and Training Governance Group via the MTSA Group.

viii. Mandatory Training Specialist Adivsors as part of this process will highlight service hot spots where there are risks to services in not maintaining the required compliance levels for each subject. This will form part of the hot spot report produced by the MTSA Group for OMG review.

ix. Mandatory Training Specialist Adivsors are also responsible for monitoring best practice and changes in regulation for their subject area and updating training content in an appropriate timeframe when required.

x. **Operational Management Group (OMG) Hot Spot Review**

 OMG will receive a monthly hot spot report for compliance risk areas of all mandatory and essential to job training as informed by the MTSA Group. Service leaders will agree plans for their staff and teams to mitigate the risks of non-compliance and ensure that training is undertaken in their areas.

xi. **Education and Training Governance Group (ETGG)**

 The Education and Training Governance Group is responsible for overseeing the governance process for all Mandatory and Essential to Job Role Training. This includes receiving any escalations and risks in training compliance, reviewing recommendations to changes in mandatory training provision, and to receive regular updates and assurance from the MTSA Group.

xii. **Head of Learning and Development**

 The Head of Learning and Development will lead an annual review of mandatory training and produce a report for the Trust’s Clinical Governance and Clinical Safety Committee.

xiii. **Executive Management Team (EMT)**

 The Executive Management Team approves this Policy ensuring it has been developed in accordance with SWYPFT’s Policy for the Development, provides final approval to any changes in changes to mandatory provision, and takes appropriate action to address any identified factors affecting Trustwide Mandatory or Essential to Job Role training provision or uptake.

xix. **Trust Board**

 The Trust Board is ultimately responsible for ensuring that the Trust provides sufficient organisation-wide mandatory training and that uptake rates achieve acceptable levels. This is done by the regular review of mandatory training performance at Trust Board performance meetings.

**Appendix 3 - Associated Documents and References**

NHS Litigation Authority NHSLA Risk Management Standards 2013-14, March 2013

SWYPFT Cardiopulmonary Resuscitation Policy [http://nww.swyt.nhs.uk/docs/Documents/277.docm](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/277.docm)

SWYPFT The Care Programme Approach and Care Co-ordination

[http://nww.swyt.nhs.uk/docs/Documents/899.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/899.docx)

SWYPFT Care Records Management Policy [http://nww.swyt.nhs.uk/docs/Documents/1005.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/1005.docx)

SWYPFT Clinical Management of Service Users with Dual Diagnosis (Mental Health

and Substance Misuse) [http://nww.swyt.nhs.uk/docs/Documents/767.pdf](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/767.pdf)

BBDU Clinical Procedures Manual [http://nww.swyt.nhs.uk/docs/Documents/1138.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/1138.docx)

SWYPFT Clinical Risk Assessment, Management and Training Policy [http://nww.swyt.nhs.uk/docs/Documents/769.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/769.docx)

SWYPFT Data Quality Policy [http://nww.swyt.nhs.uk/docs/Documents/213.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/213.docx)

SWYPFT Fire Safety Policy [http://nww.swyt.nhs.uk/docs/Documents/530.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/530.docx)

SWYPFT First Aid Policy [http://nww.swyt.nhs.uk/docs/Documents/494.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/494.docx)

SWYPFT Food Hygiene Policy [http://nww.swyt.nhs.uk/docs/Documents/115.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/115.docx)

SWYPFT Food and nutrition policies and procedures

[http://nww.swyt.nhs.uk/docs/Documents/1238.pdf](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/1238.pdf)

SWYPFT Functions of Hospital Managers under the Mental Health Act 1983 Policy [http://nww.swyt.nhs.uk/docs/Documents/940.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/940.docx)

SWYPFT Harassment and Bullying Policy [http://nww.swyt.nhs.uk/docs/Documents/458.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/458.docx)

SWYPFT Health & Safety Policy [http://nww.swyt.nhs.uk/docs/Documents/231.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/231.docx)

SWYPFT Induction Policy [http://nww.swyt.nhs.uk/docs/Documents/372.docx](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/372.docx)

SWYPFT Infection Prevention and Control Operational Arrangements policy

[http://nww.swyt.nhs.uk/docs/Documents/790.pdf](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/790.pdf)

SWYPFT Information Governance Policy (including Information Risk Management Policy from 2014) [http://nww.swyt.nhs.uk/docs/Documents/297.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/297.docx)

SWYPFT Investigating and Analysing Incidents, Complaints and Claims to Learn from Experience Policy [http://nww.swyt.nhs.uk/docs/Documents/776.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/776.docx)

SWYPFT Management of Aggression and Violence: Personal Safety and Violence Reduction policy, procedures and guidance [http://nww.swyt.nhs.uk/docs/Documents/1002.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/1002.docx)

SWYPFT Medicines Code, Medicines Management Training Matrix <http://nww.swyt.nhs.uk/learning-development/Electronic%20LandD%20Brochure/Core%20Training/Medicines%20Optimisation%20Training%20Matrix.pdf>

SWYPFT Mental Capacity Act (2005) Policy and guidance

[http://nww.swyt.nhs.uk/docs/Documents/807.pdf](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/807.pdf)

Mentorship Guidance <http://nww.swyt.nhs.uk/mentorship/Pages/Mentorship-Guidance.aspx>

SWYPFT Moving and Handling Policy [http://nww.swyt.nhs.uk/docs/Documents/523.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/523.docx)

SWYPFT Policy and Procedures on the Protection, Safeguarding and Promoting the Welfare of Children (incorporating the Safeguarding Children Supervision Guidance)

[http://nww.swyt.nhs.uk/docs/Documents/778.docx](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/778.docx)

SWYPFT Prevent Strategy Implementation Policy

[http://nww.swyt.nhs.uk/docs/Documents/1115.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/1115.docx)

SWYPFT Rapid Tranquillisation and PRN Psychotropic Medication; Policy and Guidance [http://nww.swyt.nhs.uk/docs/Documents/518.docx](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/518.docx)

SWYPFT Risk Management Strategy [http://nww.swyt.nhs.uk/docs/Documents/829.pdf](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/829.pdf)

SWYPFT Safeguarding Adults at Risk from Abuse or Neglect [http://nww.swyt.nhs.uk/docs/Documents/1156.docx](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/1156.docx)

SWYPFT Falls and Bone Health (Slips Trips and Falls) Policy and Guidance [http://nww.swyt.nhs.uk/docs/Documents/765.pdf](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/765.pdf)

SWYPFT Supervision of the Clinical Workforce Policy [http://nww.swyt.nhs.uk/docs/Documents/280.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/280.docx)

SWYPFT Violence, Abuse, Harassment and Aggression at Work Policy [http://nww.swyt.nhs.uk/docs/Documents/1002.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/1002.docx)

SWYPFT Working with Display Screen Equipment Policy [http://nww.swyt.nhs.uk/docs/Documents/338.doc](https://swyt.sharepoint.com/sites/Policy-Documents/Shared%20Documents/338.docx)

**Appendix 4 - Procedure for undertaking Trust-wide Mandatory and Essential to Job Role Training**

* Together, managers and staff clarify which Trust-wide Mandatory and Essential to Job Role training subjects apply to the individual by referring to the Mandatory Training Needs Matrix and Essential to Job Role Training Needs Matrix (Appendix 1). Further advice can be sought from indicated specialist advisors or the Learning and Development department where training expectations are not clear.
* Together, managers and staff identify time to undertake training to ensure that the individual remains compliant with their training requirements. This will be addressed during local induction and staff supervision
* Details of training provision, including e-learning options, are provided in the Mandatory Training Needs Matrix and Essential to Job Role Training Needs Matrix (Appendix 1). The individual should select the preferred training route bearing in mind the flexibility offered by e-learning where available to complete required training as quickly as possible.
* Staff are able to view, search, and book places directly for face-to-face courses and e-learning via the ESR employee portal where new course dates are added in real-time. Dates and times of training and details of how to book are published in the Training and Development Brochure accessed from the Learning and Development intranet page. Further advice can be sought from indicated specialist advisors where required.
* Managers should ensure that staff are provided with protected time to complete e-learning or attend taught training events within their working hours to enable them to comply with their training requirements.
* Attendance at taught training is confirmed by the signing of attendance sheets provided by the training provider and inputted directly into ESR or returned to the Learning and Development department. Failure to sign the attendance sheet will result in the individual appearing to be non-compliant with their training requirements.
* Managers and staff should contact programme facilitators (contact details provided on the relevant training and development portfolio page) or the Learning and Development team for further advice and information where required.

**Appendix 5 – Process for New and**

**Revised Mandatory and Essential to Job Role Training**

Potential new Mandatory or Essential to Job Role training subject / Change to current subject requirements is to be discussed with L&D with regard to administration requirement costs, and confirmation of the designated Specialist Advisor Lead.

Training proposal discussed with Mandatory Training Specialist Advisors Group (MTSA Group).

Training recommendations presented to Education Training Governance Group (ETGG)

(See Template)

Training presented to Operational Managers Group (OMG) for implementation

Proposal approved by EMT and recommendation made

Subject policy updated accordingly

**Essential to Job Role Training Subject**

Training provider / specialist advisor to assess job roles potentially requiring training and how often

* L&D support the training provider to forecast number of training sessions required
* Managers to consider training need and capture through Learning Needs Analysis process
* Training promoted through L&D training brochure
* Training is requested via individual study leave forms submitted to L&D
* Service managers monitor staff compliance and ensure sufficient local levels of trained staff
* L&D to provide ad hoc reports on staff trained as required

**Mandatory Training Subject**

 Specialist advisor works with L&D to identify all specific posts requiring training

Mandatory training - L&D populate ESR with training competency requirements of posts and enter previous known training attendance of post holders. L&D consult with services for accuracy/discrepancies

Workforce Information provide all staff with an individual report regarding their mandatory training status each month, produce % attendance report (Performance Wall) based on specific post holders required to attend training, and also upload mandatory training data onto Trust Intranet Site. Report cascaded to managers with request to respond to accuracy issues

Learning and Development will also provide a report to OMG and Trust Board on a quarterly basis

Training schedule and methods agreed with the specialist advisor and advertised in L&D portfolio

ESR updated to correct accuracy issues by L&D / WI depending on nature of issue. Corrections appear on next attendance report

**MONTHLY CYCLE WITH ANNUAL REVIEW**

L&D work with provider to calculate number of sessions required to meet outstanding need, and total costs where required to commission external training or build internal business cases

Staff attend required training

**Appendix 6**



Business Case for Potential Subjects to become Mandatory or Essential to Job Role Training

Draft Proposal for MTSA Group

 **Learning and Development**

This document provides criteria for assessing or reviewing the need for subjects to be Mandatory training or Essential to Job Role training. It is the responsibility of Clinical Leads/Specialist Advisors within their subject specialist fields to conduct a Learning Needs Analysis (LNA) to establish the need for a specific subject to become Mandatory or Essential to Job Role training, and also the staff groups this is applicable for. To be reviewed annually or following a change within statutory requirements, key legislation, or other directives



**www.southwestyorkshire.nhs.uk**

|  |
| --- |
| **Business Care for the Recommendation to ETGG of Potential Subjects to become Mandatory or Essential to Job Role Training** **(for detailed explanations of each section - see next page)** |
| 1. **Specialist Advisor for Training Subject and/or Proposer (if different):**
 |
| 1. **Subject or training title:**
 |
| 1. **Business case for the training:**
 |
| 1. **Drivers and reasons for Mandatory/Essential to Job Role training:**
 |
| 1. **Target staff groups and numbers:**
 |
| 1. **Training methods suggested and frequency or renewal for each staff group:**
 |
| 1. **Resources required for training provision:**
 |
| 1. **Measurement of success and evaluation (ROI):**
 |
| 1. **Calculated costs of proposal (development costs, recurrent delivery and staffing costs, administration, etc.):**
 |
| 1. **Recommendations:**
 |

|  |
| --- |
| **Detailed explanations for proposed Mandatory or Essential to Job Role Training** |
| 1. **Specialist Advisor for Training Subject and/or Proposer (if different):**

The clinical/medical/profressional lead for maintaining content in line with best practice and regulation; is also the person who will lead the design, delivery, and evaluation of the training subject. |
| 1. **Subject or training title:**
 |
| 1. **Business case for the training:**

Current situation. Explain what is to be achieved by the proposed learning i.e., Safety, CQC Ratings etcIs there a time scale for proposal completion and date for staff compliance – roll outConsider the impact on Service Delivery -Opportunities – improved quality of service delivery, transferable skills, In-line with Trust Mission and Values, and supports service transformationChallenges – Sustainability. Implications for resources, finance, workforce release - Is there a need for a headroom business case |
| 1. **Drivers and reasons for Mandatory/Essential to Job Role training:**

Supporters and sponsors; Subject legislation/Statue, CQC/Regulatory, HEE, H&S Executive, Public Health EnglandAreas of specific corporate need identified through analysis of lessons learned, reduction of duplication and improved cost efficiencies |
| 1. **Target staff group and numbers:**

Employee groups and numbers as identified for training by the directiveLevels of training or competencies required for different services or staff groups. Consider: demographics, services/teams, professions, staff grades and employment status - employed, volunteers, bank, agency, partnerships |
| 1. **Training methods suggested and frequency or renewal for each staff group**

Face to face, eLearning, workbook, blended learning, in-house etc. Are there different levels or methods of training depending on staff groups/teams. Is it delivered to specific staff groups or a mixed workforce.Duration, frequency and renewal: One off training. Repeated after a specified period of time, or there is a refresher version which is shorter in duration or has a different delivery methodIs this the most resourceful and effective method to achieve learner competency – where is it evidenced that these methods need to be used. Are they dictated by the directive |
| 1. **Resources required for training provision:**

Is the following in place or need to be for the training programme to be developed/ delivered:**Training content and delivery** - Responsibility and accountability for:* Development of learning resources that promote equality and inclusive learning
* Subject expert knowledge that informs of best practice training content
* Provide future updates in line with feedback and legislation changes
* Provide effective teaching methods, assessing and evaluating learning

**Administration resource/cost**–staff access, monitoring, attendance inputting, and reporting |
| 1. **Measurement of success and evaluation (ROI):**

Refer to **Kirkpatrick’s** four levels of training evaluation (*reaction, learning, behaviour, results*) for the methods and tools you could use to measure and evaluate the training programme (Donald Kirkpatrick's (1994) *Evaluating Training Programs)* |
| 1. **Calculated costs of proposal** as mentioned above(development costs, recurrent delivery and staffing costs, administration, etc)
 |
| **10. Recommendations:** |

**Appendix 7 - Equality Impact Assessment**

**Equality Impact Assessment Template to be completed for all Policies, Procedures and Strategies**

**Date of Assessment: March 2021**

|  |  |  |
| --- | --- | --- |
|  | **Equality Impact Assessment Questions:** | **Evidence based Answers & Actions:** |
| **1** | **Name of the document that you are Equality Impact Assessing** | Mandatory Training Policy |
| **2** | **Describe the overall aim of your document and context?****Who will benefit from this policy/procedure/strategy?** | The aims of the policy are to provide clarity on the mandatory training requirements of all staff, the achievement of a systematic approach to identifying and reviewing Mandatory and Essential to Job Role Training subjects, a systematic approach to the planning, provision, and monitoring of training and the achievement of desired levels of training uptakeAll staff |
| **3** | **Who is the overall lead for this assessment?** | Head of Learning and Development |
| **4** | **Who else was involved in conducting this assessment?** | Mandatory Training Specialist Advisors GroupOperational Management GroupThe Employment Policy GroupHR Business PartnerStaff Side |
| **5** | **Have you involved and consulted service users, carers, and staff in developing this policy/procedure/strategy?****What did you find out and how have you used this information?** | The Executive Management Team was consulted on the original development of the Policy. Update of version 8 of this policy was developed through consultation with members of the Education and Training Governance Group Mandatory Training Specialist Advisors Group, and Learning and Development. Staff side organisations represented staff’s views.The Mandatory and Essential to Job Role Training Needs Matrix needed to be current, easily understood and accessible for all staff groups. To achieve this the matrix was simplified and the policy and intranet now have a link to the matrix. Feedback was also received from a recent internal audit around strengthening the monitoring information within the Policy and recognising the emergent governance arrangements developed since version 7. |
| **6** | **What equality data have you used to inform this equality impact assessment?** | Equality Workforce Monitoring Annual Report 2020 <https://www.southwestyorkshire.nhs.uk/wp-content/uploads/2020/05/Workforce-Report-2020.pdf> |
| **7** | **What does this data say?** | See below |
| **8** | **Taking into account the information gathered above, could this policy /procedure/strategy affect any of the following equality group unfavourably:** | Yes | **Evidence based Answers & Actions. Where Negative impact has been identified please explain what action you will take to remove or mitigate this impact.**Impact in some areas due to personal circumstances e.g. a disabled member of staff who is unable to read powerpoint presentation due to font size therefore Mandatory Trainers will be informed by Learning and Development where staff disclose the need for a reasonable adjustment to their training. Staff will need to request reasonable adjustments directly with Learning and Development when their booking is made using ESR self-service. This is in adherence to the Accessible Information Standard, WDES, and WRES Trust standards. |
| **8.1** | **Race** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.2** | **Disability** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. However, staff requiring reasonable adjustments to access training are available. |
| **8.3** | **Gender** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.4** | **Age** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.5** | **Sexual Orientation** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.6** | **Religion or Belief** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.7** | **Transgender** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.8** | **Maternity & Pregnancy** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.9** | **Marriage & Civil partnerships** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. |
| **8.10** | **Carers\*Our Trust requirement\*** | N | It is not anticipated that the policy will have any adverse impact on these groups as all staff are required to complete mandatory training. However, staff requiring reasonable adjustments to access training are available. |
| **9** | **What monitoring arrangements are you implementing or already have in place to ensure that this policy/procedure/strategy:-** | This policy aims to ensure all staff attending Mandatory or Essential to Job Role training should not be affected by an individual’s race, gender, disability, age, sexual orientation, religion, belief, or whether the individual is from the Trans community or acting as a Carer. |
| **9a** | **Promotes equality of opportunity for people who share the above protected characteristics;** | Mandatory compliance by protected group(s) will be monitored to help identify issues affecting access to training or completing training. Otherwise, no additional special monitoring arrangements are anticipated. |
| **9b** | **Eliminates discrimination, harassment and bullying for people who share the above protected characteristics;** | This policy relates to all staff and so should not be promote any discrimination, harassment and bullying. |
| **9c** | **Promotes good relations between different equality groups;** | Mandatory training is accessible to all and is delivered collectively and inclusively. |
| **9d** | **Public Sector Equality Duty – “Due Regard”** | Mandatory training is a regulatory requirement for NHS employees. |
| **10** | **Have you developed an Action Plan arising from this assessment?** | Promote awareness, available support and easy access to the Mandatory Training Policy and procedural documents through the Trust intranet, Welcome Event and the Trust’s Mandatory Training Specialist Advisors. |
| **11** | **Assessment/Action Plan approved by** | **Alan Davis** |
|  | **(Director Lead)** | **Sign: Date: March 2021****Title: Director of HR, OD and Estates** |
| **12** | ***Once approved, you must forward a copy of this Assessment/Action Plan to the Equality and Inclusion Team:*****Zahida.mallard@swyt.nhs.uk** **or Aboobaker.bana@swyt.nhs.uk****Please note that the EIA is a public document and will be published on the web.****Failing to complete an EIA could expose the Trust to future legal challenge.** |  |

**Appendix 8 - Checklist for the Review and Approval of Procedural Document**

|  | **Title of document being reviewed:** | **Yes/No****Unsure** | **Comments** |
| --- | --- | --- | --- |
| **1.** | **Title: Mandatory Training Policy** |  |  |
|  | Is the title clear and unambiguous? | YES |  |
|  | Is it clear whether the document is a guideline, policy, protocol or standard? | YES |  |
|  | Is it clear in the introduction whether this document replaces or supersedes a previous document? | YES |  |
| **2.** | **Rationale** |  |  |
|  | Are reasons for development of the document stated? | YES |  |
| **3.** | **Development Process** |  |  |
|  | Is the method described in brief? | YES |  |
|  | Are people involved in the development identified? | YES |  |
|  | Do you feel a reasonable attempt has been made to ensure relevant expertise has been used? | YES |  |
|  | Is there evidence of consultation with stakeholders and users? | YES |  |
| **4.** | **Content** |  |  |
|  | Is the objective of the document clear? | YES |  |
|  | Is the target population clear and unambiguous? | YES |  |
|  | Are the intended outcomes described?  | YES |  |
|  | Are the statements clear and unambiguous? | YES |  |
| **5.** | **Evidence Base** |  |  |
|  | Is the type of evidence to support the document identified explicitly? | YES |  |
|  | Are key references cited? | YES |  |
|  | Are the references cited in full? | YES |  |
|  | Are supporting documents referenced? | YES |  |
| **6.** | **Approval** |  |  |
|  | Does the document identify which committee/group will approve it?  | YES |  |
|  | If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document? | N/A |  |
| **7.** | **Dissemination and Implementation** |  |  |
|  | Is there an outline/plan to identify how this will be done? | YES |  |
|  | Does the plan include the necessary training/support to ensure compliance? | YES |  |
| **8.** | **Document Control** |  |  |
|  | Does the document identify where it will be held? | YES |  |
|  | Have archiving arrangements for superseded documents been addressed? | YES |  |
| **9.** | **Process to Monitor Compliance and Effectiveness** |  |  |
|  | Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document? | YES |  |
|  | Is there a plan to review or audit compliance with the document? | YES |  |
| **10.** | **Review Date** |  |  |
|  | Is the review date identified? | YES |  |
|  | Is the frequency of review identified? If so is it acceptable? | YES |  |
| **11.** | **Overall Responsibility for the Document** |  |  |
|  | Is it clear who will be responsible implementation and review of the document? | YES |  |

**Appendix 9 - Version Control Sheet**

*This sheet should provide a history of previous versions of the policy and changes made*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Version** | **Date** | **Author** | **Status** | **Comment / changes** |
| 2 | 13.11.08 | Maggie Bell | Approved | Slight changes in formatting to provide greater clarity for stakeholders. Changes agreed and signed off by the accountable director. |
| 3 | 10.08.10 | Garry Smith |  | Change in formatting and change in format of statutory, mandatory and service specific information at Appendix 1. |
| 4 | 28.09.12 | Jeremy Robbins |  | Completely revised policy developed as a result of the need to align the respective, but inconsistent, mandatory training policies and associated training observed in Care Services Direct (CSD) and SWYPFT following CSD’s acquisition by the Trust. The policy also updates SWYPFT’s existing policy to introduce further clarity on mandatory training requirements of staff and to improve approaches to mandatory training planning, provision and attendance reporting |
| 5 |  | Jeremy Robbins |  | Policy revised in-line with changes to individual Mandatory Training Subject Policies and reporting procedures. |
| 6 | 30.03.15 | Jeremy Robbins |  | Mandatory Training Needs Analysis changed to reflect changes to provision of Aggression Management training and e-learning alternative for Safeguarding Children Level 3. |
| 7 | Apr 17 | Andrew Broadhead (Professional lead)Written by:Sue McCrory(Senior Learning and Development Facilitator) |  | Policy revised in-line with changes to individual Mandatory Training Subject Policies and governance procedures, and in-line with changes to Mandatory and Essential to Job Role Training Needs Analysis in the provision of:Cardio Pulmonary Resuscitation. Moving from Essential to Job Role to mandatory. Driven by Business CaseAggression Management CASS. Internal decision to integrate in to Adults, Older Peoples and Forensics trainingAggression Management Personal Safety Awareness Non Clinical Level 1. Moved from Mandatory to Essential to Job RoleClinical Risk Formulation and Management. Mandatory driven by policy changeSainsburys Risk Assessment Tool. Mandatory driven by policy change PREVENT 3 Levels. Essential to Job Role driven by legislation and internal strategicSafeguarding Children. Levels of training and training hours changed due to Intercollegiate DocumentMCA/MHA – Moved from Essential to Job Role to Mandatory training provision |
| 8 | March 2021 | Andrew Broadhead,Head of Learning and Development |  | Defintion title change from Core Training to Essential to Job Role Training for increased clarity;Governance process for proposing new, amending or removing mandatory training provision updated;Montoring section updated to reflect corporate and local governance and responsibility arrangements. |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |