

# TYPE OF DOCUMENT

Trust Policy for approval by <u>Trust Policy Committee</u>

Patient based standard, guideline or policy for approval by <u>Standards and Guidelines Committee</u>

S	Statutory and Mandatory Training Policy					
Summary						
	This policy sets out the definition for statutory and mandatory training and the arrangements in place to meet our obligations.					
Operational date	October 2011					
Review date	October 2013 or as required in line with implementation of replacement of Human Resources Management System					
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Department / Service Group	Human Resources					
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**DLS** 

### **Version Record**

Date	Version	Author	Comments
10.12.10	0.1	E Kehelly	Initial Draft
03.02.11	0.2	E.Kehelly	Minor changes
11.04.11	0.3	E. Kehelly	Update further to consultation
06.06.11	0.4	E. Kehelly	Final amendment
21.10.11	0.5	E. Kehelly	Minor updates further to policy committee

# **Policy Record**

		Date	Version
Author (s)	Approval		
Director Responsible	Approval		

Approval Process - Trust Policies

1 10 010 1011 1 100000			
Policy Committee	Approval	17.10.11	
Executive Team	Authorise	19.10.11	
Chief Executive	Sign Off	19.10.11	

Approval Process - Clinical Standards and Guidelines

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Standards and Guidelines Committee	Approval						
Policy Committee	Ratify						
Executive Team	Authorise						
Appropriate Director	Sign Off						

**Local Approval Process** 

Approval	

### Dissemination

Areas:	

DLS

### **Full Description**

### Statutory and Mandatory Training

### Purpose:

The Belfast Health and Social Care Trust (BHSCT) recognises that statutory and mandatory training is of vital importance in the provision of high quality services to our patients and clients and is essential for effective risk management and the maintenance of required standards.

We recognise our duty to deliver appropriate and sufficient training and to ensure that employees have reasonable access to complete such training.

This policy sets out the definition for statutory and mandatory training and the arrangements in place to meet our obligations.

For the purposes of this policy, statutory and mandatory training will be referred to under the collective title of mandatory training.

### The Scope:

All employees, regardless of contract type, including those engaged in a regular volunteer capacity, are required to attend, within the specified time frames, all mandatory training as defined within the Trust's corporate training matrix (Appendix 1) or as identified specifically for their post.

The corporate training matrix defines the types of training that are considered to be mandatory for all staff or across broad groups of staff. There are four imperatives that govern whether or not training is included in the corporate training matrix:

- 1. A statutory obligation where the law defines that training must be undertaken.
- 2. A Health and Social Care mandate where a formal, official directive has been handed down within the Health and Social Care sector.
- 3. A corporate mandate where the Trust has identified training as being essential to organisational priorities.
- 4. Training which is regarded as being a requirement of individual professions for their members to maintain core occupational competences, is not included in the corporate training matrix. Professions and service managers will determine and record separately what training is mandatory to cover core role skills.

The requirement to undertake such training is normally also defined within a Trust Policy for the particular topic.

The content of the corporate training matrix is not exhaustive as requirements are subject to change and therefore will be regularly reviewed by the Trust's Inter Professional Learning and Development Group.

Due regard is to be given to the RQIA's guidance on mandatory training for providers of care in regulated services.

Reference should be made to other BHSCT policies which set out specific training requirements.

# Objectives:

- To comply with the law
- To support staff in carrying out their duties safely and efficiently
- · To reduce risks to our service users, staff, visitors and the public
- To maintain competence to the required standards
- To provide a systematic approach to the provision and monitoring of mandatory training for all staff
- To ensure that a systematic approach is in place to review recommendations for proposed mandatory training
- To ensure acceptable governance arrangements are in place regarding the provision of and attendance/completion of training
- To outline responsibilities for managers and staff members to comply with the requirements of this policy

### Roles and Responsibilities:

#### **Directors**

It is the responsibility of Directors to:

Implement the policy on Mandatory Training within their Directorate, ensuring that Managers are aware of their responsibilities for staff to attend/complete the relevant training.

Ensure that, where necessary, insurmountable issues with compliance are identified on the risk register.

For those Directors who also carry responsibility for the provision of mandatory training, to ensure that arrangements are in place to meet the objectives of this policy.

#### **Managers**

It is the responsibility of Managers to:

Facilitate staff to attend mandatory training.

Cascade information relating to attendance/completion of training to Line Managers, agreeing an action plan if the Department/area is not achieving the targeted uptake of relevant mandatory training.

Implement and monitor this policy ensuring that all employees within their areas of responsibility have addressed issues of non compliance for training completion/attendance.

Contact training providers, if required, to request the provision of targeted training sessions in their service group.

Ensure that additional role specific mandatory training for posts within their span of control is identified and the necessary arrangements implemented to meet identified need. Heads of Profession will have a responsibility to ensure that mandatory training needs across the particular profession are identified and provided.

Ensure that all their staff have a current Personal Development Plan. During the process to agree this, a review of the training completed during the previous year will be undertaken and the mandatory training requirements for the forthcoming year will be identified and included in the employee's personal development plan. The line manager and the employee must agree an appropriate timetable and to ensure attendance at mandatory training events.

For new employees and those new to post, the line manager will identify what mandatory training is necessary and agree an action plan as part of induction arrangements.

Follow up and investigate non attendance/completion of training and rearrange for training as soon as possible.

Bring to their Co Director's attention, should significant issues arise in securing compliance with this policy.

Maintain their own records of training for staff members and ensure Trust training administration systems are appropriately utilised and updated.

### **Employees**

It is the responsibility of Employees to:

Be aware of their personal mandatory training requirements as outlined in the corporate training matrix and in their own personal development plans.

Exercise personal accountability to ensure that mandatory training requirements are kept up to date and report to their line manager any difficulties preventing them from undertaking the required training.

Attend/complete mandatory training as agreed with their line manager. Ensure that when completing/attending training the attendance/completion register is signed so that their training record can be maintained. Failure to do this will result in the individual appearing to be non-compliant with this policy.

Complete and return as necessary, training evaluation forms and report to their manager any areas of concern they may have following the training.

Transfer the learning received into practice on return to work.

### In house Mandatory Training Providers

It is the responsibility of in house mandatory training providers to:

Provide sufficient training to meet the identified need in line with specified timeframes and to identify to their Manager any issues that may prevent this.

Arrange for the provision of training, in an appropriate format and mode, to meet organisational need.

Clearly communicate the details for the provision of training to managers and staff in a timely way.

Regularly review training content to ensure its currency and relevance and consider mode of delivery, to take into account, the possibility of modernised modes eg

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electronic learning, where appropriate.

Ensure that all training has specific learning objectives stated as well as a detailed programme of content.

Maintain an attendance/completion record on the agreed Trust IT system. This may be through TAS or a local database until arrangements are in place for the utilisation of the replacement of the Human Resources Management System.

Provide reports of attendance/completion to service managers on request and bring non compliance issues to the attention of Directorate senior management.

Provide information and reports as requested by the Inter professional Learning and Development Group.

Provide to the Inter professional Learning and Development Group, any proposals for revisions to the corporate training matrix.

Have a procedure in place to follow up, through their line manager, staff who fail to attend mandatory training.

Carry out appropriate evaluation of training.

### The definition and background of the policy:

The need for this policy has been identified in order to strengthen good governance arrangements around the provision and recording of attendance/completion of mandatory training. This will support the Trust in ensuring compliance with the law as well as promoting quality standards and minimising risk to staff, service users, visitors and the public.

It will clarify the minimum requirements across all Trust staff and set out the expectations of managers and training providers to ensure robust systems are in place to meet our Trust obligations.

### **Policy statements:**

Mandatory training is compulsory for all staff regardless of staff group or professional status. However the mandatory training programme comprises of different requirements depending on the staff group and individual role. This policy sets out the corporate mandatory requirements for all staff or broad categories of staff across the Trust.

Training which is regarded to be a requirement by service managers and individual professions for their members to maintain core occupational competences is not defined on the corporate training matrix. Service managers along with Professions will determine and record separately what training is mandatory to cover core role skills.

In making a distinction between mandatory training and Continuing Professional Development (CPD), it is acknowledged that some staff are required to undertake specific training and updates in order to fulfil professional registration requirements. It is the responsibility of the individual with their line manager to identify and agree any CPD required through their personal development plan. It is emphasised that these requirements must be undertaken in addition to the Trust's mandatory training programme.

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All staff are expected to comply with the training set out within the corporate training matrix and for their own role within the stated time limits.

Completion of such training will take priority over non mandatory training.

Mandatory training should be completed as far as possible, within the first 6 months of taking up post and no later than 12 months. The manager, at all times, must ensure that any delay in completion of mandatory training does not create a risk for the employee or service user.

In line with the Assistance to Study policy, mandatory training will be fully funded for any associated course fees with paid time off to attend. Please refer to policy for detail regarding completion of training outside of normal working hours. Separate payment arrangements are set out for bank staff within the Bank Staff policy.

Mandatory training requirements specific to the Trust for Agency staff must be met by their employer as well as the Trust, as appropriate. Such staff must be able to demonstrate evidence of competency in such requirements. Reference should be made to the specific conditions of the contract for agency staff. In relation to health and safety training, the cost of any training which the Trust is required to provide will be met by the employer of the agency staff.

It will be a requirement that Agencies providing staff to the Trust will have ensured that all staff have up to date training to undertake the duties of their post. This will be reflected in the contract arrangements with Agencies. Where staff are recruited from Agencies off contract, it will be the responsibility of the approaching Trust Officer to ensure such training is in place.

Honorary contract holders must have their mandatory training needs considered by their placement supervisor in the Trust and arrangements made for training completion/attendance if deemed necessary.

Attendance/completion of training will be monitored by the Training Provider on a regular basis and reported to various Trust committees which have responsibility for such matters. Such committees will determine what action may be required to address non compliance and communicate this to managers.

Although all managers and staff are expected to comply with mandatory training requirements, it is acknowledged that service priorities, sickness and leave may impact on the achievement of full compliance from time to time. However it is expected that the highest levels of compliance are achieved. Directorates will be required to report on this as part of performance management and accountability arrangements.

Non-compliance with the required mandatory training may result in an investigation from which possible disciplinary action may be taken in accordance with the Trust's Disciplinary policy.

Mandatory training is currently delivered through a variety of methods including classroom delivery and E learning. The Trust will explore and develop methods of learning to assist with flexibility of access and as appropriate to the subject matter.

Audit mechanisms will support managers to ensure that competency levels for staff have been achieved.

The Trust is cooperating regionally in the development of a mandatory training passport which will support the transferability of an individual's training record from one Trust to another. Such arrangements, when completed and operational, will be communicated to managers.

All corporate mandatory training will be advertised and administered using the Trust's Training Administration System (TAS) or agreed alternatives eg Beeches website for Nursing/Midwifery. Training Providers who wish to seek an exemption from this must secure the agreement of the Inter professional Learning and Development Group.

Mandatory training requirements must be reviewed by line managers for staff new to the Trust, as well as those new to post and action taken as necessary to support compliance for the individual's role.

All proposed new areas of mandatory training will be considered by the Inter Professional Learning and Development Group and the corporate training matrix updated as required.

For Agenda for Change staff, the non achievement of mandatory training may result in the employee's failure to comply with the Knowledge and Skills Framework core dimension Health, Safety and Security and may adversely affect progression through gateways. Line Managers are required to ensure that they have facilitated the completion/attendance at training to avoid this situation occurring.

### Implementation / Resource requirements:

This policy is required to be implemented by all Directorates and by all providers of mandatory training. All staff are required to comply with this policy.

### Source(s) / Evidence Base:

This policy is based on best practice and in light of statutory training requirements.

### References, including relevant external guidelines:

**BHSCT Policies: -**

Assistance to Study Policy

Induction Policy

Medical Appraisal

Personal Contribution Framework Guidance Notes

Knowledge & Skills Framework Guidelines

General Health and Safety Policy

Manual Handling

Risk Management Strategy

Data Protection and Protection of Personal Information

Fire Safety Policy

Equal Opportunities Policy

Bank Policy

Zero Tolerance Policy

Our responsibilities for safeguarding children - an information and training

framework

RQIA Guidance on mandatory training for providers of care in regulated services.

**Consultation Process:** 

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DLS 332-041-008

This policy has been subject to consultation with Directors, Co Directors, Senior Managers, Members of Inter professional Learning and Development Group and Senior HR Managers. Staff side have been consulted through the Learning and Development Sub Committee and Policy Sub Committee.						
Act 1998), Targeting Social Need Initia	egislation (Section 75 of the Northern Ireland ative, Disability discrimination and the Human carried out an initial screening exercise to					
✓ ☐ Screening completed No action required.	☐ Full impact assessment to be carried out.					

Author

Printed Name Elaine Kehelly Date: 21 October2011

Director of Human Resources Date 19 October 2011 Chief Executive Date 19 October 2011

# Statutory and Mandatory Training Matrix Appendix 1

Training Programmes	Required Prequency	Delivery Method firstor to face, cresesming.	Staff required to complete statutory/mandatory training
Corporate Welcome Includes:	Once	ı	All newly appointed staff to the Trust must attend within 4 months of appointment.
-Opening by Chief Executive	-11,1-		Excludes doctors in training who have separate arrangements. Automatic invite will be Issued from Human Resources.
<ul> <li>-Human Resources (inc. Learning and Development, Employee Relations, Improving Working Lives, Occupational Health)</li> </ul>			
-inequalities and Partnership	:		
-Records Management	:		
-Finance			
-Child Protection/Protection of vulnerable adults			
-Governance and Risk			
-infection prevention & control			
Local Induction	Once	f	All staff who are new to a department/role must have a local induction
Fire & Environmental Awareness	Annually	f	All staff (blannual for residential care staff)
Health & Safety Awareness	3 yearly	e	All staff
Adverse Incident reporting	Once	f	All staff
Complaints Management	Once		All staff 마하나 사람이 많아 얼마나 나는 바람이 가지 않는 것 같아 하는 일 나는 이 사람들이 나는 사람들이 되었다.
			ORY OR MANDATORY FOR SOME STAFF GROUPS
Induction for Doctors in Training	Once	f	All doctors in training on rotation
Preceptorship	Once	f	All newly registered nurses and midwives
Nursing and Midwifery Induction Programme	Once	f	All nurses and midwives new to the Trust
Band 2 Induction & Development Programme	Once	f	All newly employed Band 2 Nursing/Midwifery support staff
Band 3 Induction & Development Programme	Once	f f	All newly employed Band 3 Nursing/Midwifery support staff  All staff who will be sitting on a recruitment panel with no previous Trust R&S training or it has been more than 3 years
Recruitment and Selection	Once	f	since last active on a recruitment panel
Recruitment and Selection Refresher	3 yearly	f/e	All staff who have been on the R&S Training within the last 3 years and will be sitting on a recruitment panel within this period
Management of Attendance	3 yearly	f	All staff who have staff management/supervisory responsibilities
Equal Opportunities	Once	f/e	All staff who do not have staff management/supervisory responsibilities
Managing Diversity	Once	f	All staff who have staff management/supervisory responsibilities
PCF/KSF Development Review	Once	f	All reviewers
Medical Appraiser Training	Once	f	All medical staff who are appraisers in the Appraisal Process for Medical Practitioners
Medical Appraiser Training Refresher	3 yearly	f	All medkal staff who are appraisers in the Appraisal Process for Medical Practitioners and who have been on Medical Appraiser Training within the last 3 years
Safeguarding Vulnerable aduks	Variable	f	Requirement and frequency is particular to your care environment needs - refer to local arrangements
Protection of Children	Variable	f	Requirement and frequency is particular to your care environment needs - refer to local arrangements
Life Support (various levels) .	Annually	,	Requirement and frequency is particular to your care environment needs - refer to local arrangements and Life Support Policy
First Aid at Work	3 yearly	f	Designated staff in each workplace
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Programmes		ిది	Staff required to complete statutory/mandatory training
Page 2	Ι		
Basic Personal Safety Training	2 yearly	f	Clinical staff working in theatres, specialist services, rheumatology, and student social workers on placement
Back Care for Office Workers	2 yearly	f	All staff who use display screen equipment
Display Screen Equipment Facilitators Course	Once	f	Designated staff in each workplace
Introduction to Patient Handling for Hospital Staff	Once	f	Ali hospital staff who undertake patient handling duties
Update in Patient Handling for Hospital Staff	2 Yearly	f	All hospital staff who undertake patient handling duties and who have completed the introduction to Patient Handling for Hospital Staff or Update in Patient Handling for Hospital Staff within the last 2years
Introduction to Ckent Handling for Community Staff	Once	f	All community staff who undertake client handling duties
Update in Client Handling for Community Staff	Every 18mths	f	All community staff who undertake client handling duties and who have completed the Introduction to Client Handling for Community Staff or Update in Client Handling for Community Staff within the last 18 months
Load Handling	2 yearly	f	All staff who undertake load handling but have no patient/cBent contact
Patient/Client Handling Facilitators Course	Once	f	Designated Trust staff who are Indentified as having a formal link to the Ergonomics Team
Update Patient Handling Facilitators Course	Annually	f	Designated Musgrave Park Hospital staff who facilitate patient/client handling courses and who have completed the Patient/Client Handling Facilitators Course within the last year
COSHH Awareness	3 yearly	e	All staff who may be exposed to hazardous substances in the course of their work activity and where a risk assessment deems it necessary. Please also refer to the RQIA Training Matrix
COSHH Risk Assessors Course	3 yearly	f	Designated COSHH risk assessors
Deputy Nominated Officer (Fire)/Fire Warden	3 yearly	f	Designated staff in each workplace
Infection Prevention & Control	2 Yearly	f	All clinical/community staff with direct patient/client contact.
General Health & Safety Risk Assessment Workshop	3 yearly	f	Designated general risk assossors
CIEH Level 2 Award in Food Safety(Basic Food Hygiene)	Once	f	All PCSS staff who handle food. Care staff within domiciliary, residential and daycare settings  All PCSS staff who handle food and care staff within domicaliary, residential and daycare settings who have been on Basic
CIEH Level 2 Award in Food Safety(Refresher)	3 yearly	f	Food Hygiene training within the past three years
CIEH Level 3 Award in Supervising Food Safety in Catering (Intermediate Food Hygiene)	Once	f	All staff who work in food preparation areas at supervisory level or above
CIEH Level 4 Award in Food Safety (Advanced Food	Опсе	f	All trainers and managers working within the Catering Department
Hygiene)  CIEH Level 3 Awards in TSP -Training Skills & Practice	Once	<u> </u>	And Batters and Hairagers Horizing Within the Coloring Department
(Professional Trainer Certificate)  DHPSS Colour Coding - Environmental Cleanliness	Олсе	f	All trainers who deliver CIEH qualifications in food safety
/Infection control	Once	f	All PCSS staff
CIEH Level 3 Award HACCP in Catering	Once	f	All catering line managers and supervisors
Waste	3 yearly	f	All PCSS staff and as designated in Waste Policy.
Medical Devices Awareness	3 yearly	f	All staff who use and manage medical devices
Basic Medical Gas Safety	Once	f	All staff responsible for using, moving, handling, storing, and transporting medical gases, including cylinders and piped supplies (this is not intended for those staff who repair or maintain medical gas pipeline systems)
Management of Actual and Potential Aggression	Once	f	As identified through risk assessment. Refer to Zero Tolerance policy
(MAPA)(5 day)  Management of Actual and Potential Aggression (MAPA)	Once	<u> </u>	As wentuned unrough his assessment, neigh to zero folerance pointy
update	Variable	f	Requirement and frequency as identified through risk assessment. Refer to Zero Tolerance policy
Management of Actual and Potential Aggression (MAPA) for Security Staff (5 day)	Once	f	All security officers on BCH, RVH, Musgrave and Mater sites
Management of Actual and Potential Aggression (MAPA) for Security Staff Update	Annually	f	*All security officers on BCH, RVH, Musgrave and Mater sites who have attended the 5 day programme in the past 12 to 15 months. *Refer to service group risk assessment
SCIP - Strategles in Crisis Intervention and Prevention (3 day)	Once	f	All social care, community nursing, social services, affled health professional and medical staff who work in learning disability services in residential and day care facilities
SCIP - Strategies in Crisis Intervention and Prevention Refresher (1 day)	Annually	f	All social care, community nursing, social services, allied health professional and medical staff who work in learning disability services in residential and day care facilities and who have completed the 3 day programme within the last 12 months

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Training Programmes	Sequired Frequency	Delivery Method feface to face, analoaming	Staff required to complete statutory/mandatory training
Safe Transfusion practice	Onće	f/e	All medical and nursing staff involved in any of the processes of transfusion
Safe Transfusion practice update	Annually	f/e	All medical and nursing staff involved in any of the processes of transfusion
HIV Awareness	Опсе	f	All nursing, midwifery, medical, AHP and social care staff with direct patient/client contact
Right Patient Right Blood competency assessment	3 yearly	f	Any member of staff taking blood for pre-transfusion sampling, collecting blood from a blood fridge or administering blood
Blood collection and good manufacturing process training	Annually	f	Any member of staff collecting blood from the transfusion laboratory
Pre-transfusion sampling	Once	f	Phlebotomists taking blood for pre-transfusion sampling
Pre-transfusion sampling update	Annually	f	Phlebotomists taking blood for pre-transfusion sampling
Hyponatremia	Once	e	All staff involved in administering intravenous fluids to children
Therapeutic Crisis Intervention Systems [7CI] (5 days)	Once	f	All residential child care workers
Therapeutic Crisis Intervention Systems Update (1 day)	Every 6months	f	All residential child care workers who have completed the 5 day training within the last 6 months
Medicines Update	3 yearly	f	Nurses/Midwives who administer medications
Administration of Intavenous Medications	Once	f	Nurses/Midwives who administer intravenous medications
UNOCINI Training Modules 1 - 3	Once	f	Requirement and frequency is particular to your care environment needs - refer to local arrangements and Child Protection Nurse Adviser
Mentorship Training	Every 5 years	f	Mentors supporting nursing & midwifery students on non NMC registerable/recordable programmes
Mentorship Training	Annually	f	Mentors supporting nursing & midwifery students on NMC registerable/recordable programmes