

Mandatory, Statutory and Role Essential Training Policy

Version 1.0

Purpose:	The purpose of this document is to lay out the process for planning and delivering statutory, mandatory and role essential training
For use by:	All staff
This document is compliant with/ supports compliance with:	Care Quality Commission, Regulation 18: Staffing Core Skills Training Framework (England)
This document supersedes:	Mandatory Training Policy v3.0 (Ipswich) – registered document 1941
Approved by:	Mandatory and Role Essential Training Steering Group
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In case of queries contact Responsible Officer:	Assistant Director of Libraries and Digital Learning Services
Division and Department	Human Resources, Faculty of Education
Archive Date i.e. date document no longer in force	<i>To be inserted by Information Governance Department when this document is superseded. This will be the same date as the implementation date of the new document.</i>
Date document to be destroyed:	<i>To be inserted Information Governance Department when this document superseded</i>

Version and document control:

Version number	Date of issue	Change Description	Author
1.0	29/07/23	New policy for all ESNEFT staff	

This is a Controlled Document

Printed copies of this document may not be up to date. Please check the Trust intranet for the latest version and destroy all previous versions.

Trust documents may be disclosed as required by the Freedom of Information Act 2000.

As part of the Trust's networking arrangements and sharing best practice, the Trust supports the practice of sharing documents with other organisations. However, where the Trust holds copyright to a document, the document or part thereof so shared must not be used by any third party for its own commercial gain unless this Trust has given its express permission and is entitled to charge a fee.

Release of any strategy, policy, procedure, guideline or other such material must be agreed with the Lead Director or Deputy/Associate Director (for Trust -wide issues) or Business Unit/ Departmental Management Team (for Business Unit or Departmental specific issues). Any requests to share this document must be directed in the first instance to Assistant Director of Libraries and Digital Learning Services.

For further advice, see the Development and Management of Trust wide Procedural Documents Policy

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Section 1 – Introduction

1.1 Policy Statement and Rationale

East Suffolk and North Essex NHS Foundation Trust is committed to ensuring all staff, at all levels including the Board of Directors, are competent to undertake their roles.

To achieve this, the Trust will provide effective training, education and on the job learning. This will support the delivery of high quality patient care and a safe and healthy workplace.

This policy describes the Trust's arrangements for assessing the needs of permanent staff (and temporary staff on a contract of 3 months or more) for statutory, mandatory and role essential training and how such training is delivered. It will ensure the Trust meets the requirements for compliance with relevant standards and current legislative requirements.

It is essential that all employees complete their statutory and mandatory training, and any role essential training required for their post. All staff members, including Board members, are required to comply with this policy.

1.2 Key Principles

- To ensure all staff are trained to undertake their roles;
- To ensure patient and staff safety.

1.3 Definitions

Statutory Training	Statutory training is that which the Trust is legally required to provide as defined in law, or where a statutory body has instructed organisations to provide training based on legislation.
Mandatory Training	Mandatory training is that required for the safe and efficient running of the organisation. It is concerned with minimising risk, providing assurance against policies and ensuring the Trust meets external standards and best practice. ESNEFT has aligned statutory and mandatory training requirements with the UK Core Skills Training Framework (CSTF).
Role Essential Training	This is additional training specific to defined roles that must be completed.
Competence	The knowledge, skills, experience, attitude and other attributes, that enable a person to undertake functions therefore meeting appropriate standards. Competence is not based on qualifications alone.
ESR	NHS Electronic Staff Record
OLM	Oracle Learning Management: the learning element of ESR
Training Needs Analysis	A methodical approach to identifying what people need to know and do to meet various requirements when carrying out activities, for example, by comparison to the Trust and National Standards in relation to a particular activity.
Risk	The likelihood of harm occurring from a hazard, described as low, medium or extreme.

Section 2 – Duties and Responsibilities

2.1 Chief Executive

The Chief Executive has a statutory responsibility to ensure that systems and processes of risk management are in place and that appropriate training is delivered across the organisation. The Chief Executive leads by the example of ensuring all Board members and senior managers complete the required statutory, mandatory and role essential training.

2.2 Chief Nurse

The Chief Nurse ensures that there are systems and processes in place to ensure all nurses, midwives and healthcare professionals receive appropriate statutory, mandatory and role essential training.

2.3 Medical Director

The Medical Director ensures that there are systems and processes in place to ensure all medical staff receive appropriate statutory, mandatory and role essential training.

2.4 People and Organisational Development Committee (POD)

Compliance and actions are tabled at POD with exceptions from that meeting reported at Trust Board.

2.5 Mandatory and Role Essential Steering Group

The Mandatory and Role Essential Training Steering Group are responsible for ensuring the training matrix is current and fit for purpose. The steering group reviews new training requests and recommends their addition to the matrix as appropriate.

2.6 Assistant Director of Libraries and Digital Learning Services

The Assistant Director of Libraries and Digital Learning Services has overall responsibility for the day to day management of statutory, mandatory and role essential training as specified in this policy, and is responsible for ensuring the education department is able to perform its duties as specified in section 2.7.

2.7 Education Department

The education department liaise with training providers and maintain central records of attendance on OLM. The team is responsible for uploading registers of attendance to OLM. They also support staff with any issues around mandatory and role essential training compliance.

2.8 HR Recruitment Team

The HR Recruitment Team adds new staff to ESR and places all new staff onto the appropriate Trust induction programme.

2.9 OLM Lead

The OLM Lead is responsible for the OLM system function for ESNEFT, enabling the effective management of training compliance. They have responsibility for the implementation of training requirements against staff positions, development of OLM functions, and for supporting the integration of data flows between OLM and Moodle.

2.10 Training Providers

Training providers are responsible for ensuring adequate arrangements for bookings, keeping records and carrying out any follow-up referrals after the training for those who did not attend, in order to meet Trust requirements.

It is the responsibility of training providers to send the registers of attendance to the Education Department so that attendance is recorded on OLM.

2.11 Managers and Heads of Department at All Levels

It is the duty and responsibility of all line managers to ensure their staff are competent and compliant with all aspects of statutory, mandatory and role essential training as detailed in the policy.

It is essential that staff are up to date with all requirements for their job role and are able to provide a competent and safe service to patients.

Line managers are responsible for ensuring that staff only undertake tasks for which they are safe and competent.

Managers must ensure staff have sufficient time within working hours to complete their statutory, mandatory and role essential training.

Managers must regularly monitor compliance of the staff they are responsible for, and raise non-compliance when it occurs.

Statutory, mandatory and role essential training compliance must be reviewed and discussed at probation meetings with new staff members, and new staff must be fully compliant with their mandatory and role essential training within the first three months of their employment.

Statutory, mandatory and role essential training compliance must be reviewed and discussed at annual appraisals with all staff. Appraisals must not be signed off if there are any outstanding training requirements.

2.12 All Staff

All staff have a responsibility and duty to take reasonable care for the health and safety of themselves and others, and to co-operate with the Trust in discharging its statutory duty. This is in each Trust job description and is a condition of employment.

All staff are responsible for ensuring they are compliant with all mandatory and role essential requirements for their job role. If there are issues in completing, this must be discussed with their line manager in the first instance.

Individual compliance with mandatory and role essential training can be ascertained via ESR and the training portal on the intranet.

Compliance with mandatory and role essential training is a condition of employment with ESNEFT, and as such persistent non-compliance may result in disciplinary action being taken.

Staff on long-term leave, such as maternity, long-term sickness, or external secondments, are excluded from compliance reports. However, if a staff member becomes non-compliant with any mandatory or role essential training whilst on any type of leave, it is their responsibility to complete the training as soon as possible on their return to work. Line managers must allow time for this within usual work patterns. KIT days could also be utilised for statutory, mandatory and role essential training, if appropriate for the individual.

Section 3 – Statutory, Mandatory and Role Essential Training Policy

3.1 Statutory and Mandatory Training Requirements

ESNEFT have aligned Statutory and Mandatory training requirements with the Core Skills Training Framework (CSTF), developed by Health Education England, Skills for Health. By aligning to this framework, we can have confidence in the quality and standard of training. It also enables staff to move between organisations without duplicating training.

The following statutory and mandatory subjects are aligned to the CSFT, and must be completed by all staff:

Topic	Frequency
Conflict Resolution Level 1	3 yearly
Equality, Diversity and Inclusion	3 yearly
Fire Safety Level 1	3 yearly
Health, Safety and Welfare	3 yearly
Information Governance and Data Security Awareness	Annually
Moving and Handling Level 1	3 yearly
Preventing Radicalisation – Prevent Awareness	3 yearly

The following statutory and mandatory training subjects are assigned to specific staff groups:

Topic	Frequency
Basic Life Support (Adult / Paediatric / Newborn)	Annually
Infection Prevention and Control Level 1	2 yearly
Infection Prevention and Control Level 2	2 yearly
Learning Disability and Autism Level 1	3 yearly
Learning Disability and Autism Level 2	3 yearly
Moving and Handling Level 2	2 yearly
Safeguarding Adults Level 1, 2 and 3	3 yearly
Safeguarding Children Level 1, 2 and 3	3 yearly

The latest version of the training matrix, detailing staff groups required to complete statutory and mandatory training, is available on the intranet.

New members of staff are expected to be compliant in the statutory and mandatory training requirements within three months of their start date.

The Trust aims for a minimum of 90% of staff to be compliant with their Statutory and Mandatory training. There is an exception for Information Governance compliance.

Information Governance

It is a requirement of the NHS Data Security and Protection Toolkit, that Trust compliance for Data Security Awareness (Information Governance) is 95%. All staff and Board members must be compliant with this training, and undertake an annual refresher.

Basic Life Support

Adult and Paediatric Basic Life Support training is completed through a system called Laerdal RQI (Resuscitation Quality Improvement).

This is an individual two-step training programme, which can be completed 24 hours a day, seven days a week. The first stage is an e-learning package to check a person's knowledge, and the second stage is completed on a 'simulation station' using both an adult/child and infant manikin, requiring the staff member to perform CPR on the manikins. The linked-up laptop checks their performance, talking through any issues or offering the opportunity to repeat the assessment if they fail.

Training is undertaken quarterly within set quarters and follows the low dose high frequency model for improved skill retention.

Registers of completion are received weekly from Laerdal and are uploaded to ESR.

3.2 Role Essential Training Requirements

The following training is role essential for specific groups of staff:

Topic	Frequency
Antimicrobial Stewardship	3 yearly
Blood Transfusion	2 yearly
Conflict Resolution Level 2	Once
Falls Prevention	2 yearly
Fire Safety (Local)	3 yearly
Good Manufacturing Practice in Pharmacy Clean Rooms Environmental Microbiology Training	Annually
Hand Washing (Local Infection Control)	2 yearly
Medical Gases	Annually
Medicines Management Theory	Annually
NEWS2	Once
Palliative and End of Life Care (General / Paediatric/ Maternity)	3 yearly
Patient Safety	Once
RESPECT	Once
Safeguarding Adults – Dementia Awareness	3 yearly
Safeguarding Adults – Dementia, MCA & DOLS, Domestic Violence & Abuse	3 yearly
Safeguarding Adults – Level 4	3 yearly
Safeguarding Children – Referring to Social Care	3 yearly
Safeguarding Children – MCA for Young People & Domestic Violence and Abuse	3 yearly
Safeguarding Children – Level 4	3 yearly

Sepsis / Sepsis Maternity / Sepsis Paediatrics	2 yearly
Tissue Viability	2 yearly
VTE Awareness	Once
18 week Referral to Treatment RTT (Ipswich / Colchester)	Once

The latest version of the training matrix, detailing staff groups required to complete role essential training, is available on the intranet.

New members of staff are expected to be compliant in the role essential training requirements of their post within three months of their start date.

3.3 Requirements for Specific Staff Groups

New Starters

Once a post is accepted, the recruitment team issues new starters with the dates of the next available induction, which comprises e-learning and taught sessions.

Registers of attendance at induction sessions are retained by the Education Department who enter the details into OLM. Where there has been a non-attendance, the relevant manager is notified and requested to take the appropriate follow-up action.

If the new staff member is a Registered Nurse, Midwife or Healthcare Assistant the first day of employment will be day one of the induction programme. For all other staff members such as Administration and Clerical Healthcare Scientists and Professionals Allied to Medicine the date of the next available induction will be allocated. It is the expectation that managers allow staff time to complete the induction and it is recommended that this is on day one of employment.

Arrangements for training from other programmes not part of the induction programme are made by the line manager.

New starters receive details of ESR and Moodle within their offer email.

Inter Authority Transfers (IATs)

New Staff members who have previously completed statutory and mandatory training that meet the requirements of the NHS Core Skills Training Framework or ESNEFT standards, and is within the relevant time scale, may be exempt from having to repeat this training again.

Training records transfer from other NHS Organisations via the Inter Authority Transfer (IAT) process, and training records uploaded into ESR.

Where this is not possible, evidence of previous training completion, such as certificates, can be provided for assessment, and if deemed acceptable, training records can be updated. The education team will seek advice from subject experts if needed before accepting or declining evidence provided.

New staff will be required to complete any local training assigned to their position.

Medical Bank Staff

Medical Bank staff must be fully compliant with Statutory, Mandatory and Role Essential training before they can be booked to a shift.

Consultants

Mandatory and role essential training is included in SPA activity.

3.4 Process for Identifying Training Needs, Attendance and Recording training

Identifying Training Needs

Statutory and Mandatory training is training that the Trust must legally provide to staff, or is mandated to provide to comply with external standards. At ESNEFT statutory and mandatory training is aligned with the Core Skills Training Framework and this sets out the audience for each subject, the frequency of refresher required, and the current legal requirements.

Each role within the organisation is mapped to the statutory and mandatory training as per the Core Skills Training Framework. This was approved at Executive level.

Role Essential training requirements are assessed by subject matter experts, either through the need to adhere to national guidance or policies, or via a training needs analysis.

A training needs analysis is undertaken by considering:

- The requirements of the task itself or function.
- The competencies needed in the person performing the task or function, including qualifications, experience and what they need to know and do.

Each role within the organisation is mapped to role essential training requirements.

The Mandatory Training and Role Essential steering group reviews role essential training requirements and make recommendations for additions.

Accessing Training and checking compliance

Statutory and Mandatory Training

Staff can access statutory and mandatory training via ESR. The only exceptions are Basic Life Support and Manual Handling - Patients, which is a classroom session, but can be booked via ESR. Dates of classroom training are available on the mandatory training intranet page.

Role Essential Training

Most role essential training is available on ESR, though some courses are accessed via the Learning Management System, Moodle. A program is underway to migrate role essential training courses from Moodle to ESR. The latest information as to where courses can be located is available on the mandatory training intranet pages.

Conflict Resolution Level 2 is a classroom session, but can be booked via ESR. Dates of classroom training are available on the mandatory training intranet page.

Checking Compliance

Staff can access their ESR at any time to ensure they are up to date with their training, and this will show both mandatory and role essential elements.

Staff and managers can also access the training compliance portal on the intranet to check their compliance status, or that of their department and team members. This is refreshed overnight with training data from ESR.

Training completed via Moodle, and any registers for classroom training and Basic Life Support, are regularly uploaded to ESR. There will therefore be a delay between staff completing the training and their ESR and training tracker showing their updated compliance.

Reporting Compliance

All staff have a duty to ensure their training is up to date, and they are compliant with all mandatory and role essential training assigned to their position. This is a condition of employment within ESNEFT.

Training compliance is reported monthly at Divisional Assurance Meetings and annually to the People and Organisational Development Committee. Exceptions are reported at Board level.

Evaluation

Evaluation forms are provided to the tutors for each session. It is their responsibility to request completion of the forms and to ensure that they are returned to the Education Department at the end of each session. Evaluations are reviewed and, if there is cause for concern, the material is revised. All courses are reviewed and refreshed depending on the prevailing topic against current evidence base

Recording Attendance

The central electronic training database, OLM, holds training records for staff.

Responsibility for attendance at identified training and updates lies with both the designated line manager and the employee. The designated line manager will ensure that staff attend and complete appropriate training within the off duty rotas and it is the responsibility of the staff member to attend.

Each designated Trainer will bring to every session planned, a register of the staff expected to attend the session and all staff will sign against their name on the register, or scan a QR code, as proof of attendance.

The register of attendance will be retained by the relevant training area, for example Risk Manager or designated Trainer, and all attendances will be entered onto the Trust's electronic database. Retention of registers may be electronic (scanned). The Education Department will retain copies of all signed registers returned centrally.

It is recognised that training takes place on an "ad hoc" basis across the Trust. When this happens it is the responsibility of the training provider to ensure a register of all attending the session is sent to the Education Department so training records can be updated.

3.5 Non-attendance and Non-Compliance

Staff identified as non-compliant with their mandatory or role essential training will be unable to progress to their next step pay point until all the required training is completed.

Staff will not be able to attend any other non-statutory training (study leave) until all the required elements of statutory and mandatory training have been completed.

Continued non-compliance will be escalated by managers to Heads of Departments.

Persistent non-compliance with mandatory and / or role essential training may result in disciplinary action being taken.

Non-compliance with mandatory and role essential training may affect ARCP progression for medical trainees.

Non-compliance with mandatory and role essential training may affect revalidation and / or registration requirements for some healthcare professionals.

Where individuals repeatedly fail to attend any of the required elements of induction as requested by their line manager without reasonable justification, disciplinary action may be taken.

The education team will email line managers of staff that fail to attend classroom based sessions as soon as possible.

Section 4 – Training and Education

Each role is mapped to ensure that individuals complete the training relevant to their role within the trust.

Regular reminders are sent to staff via ESR, advising of any areas that they are not compliant in and when they are due to renew any aspect of mandatory training.

Training guides and videos are available on the intranet for all staff.

Section 5 – Development and Implementation including Dissemination

The suite of mandatory training was agreed at executive level.

The training requirements are available on the intranet.

Section 6 – Monitoring Compliance and References

The Trust's electronic database system records attendance. Compliance can be monitored by BI self-service reporting.

Automated e-mails are sent to individuals who are outstanding in any aspect of mandatory training.

Compliance with trust and individual training records are accessible via the training portal available on the intranet.

Statistical data from the Trust's Datix electronic incident reporting system is used to identify if there are possible training needs arising from incidents or near misses. Monitoring of this occurs at both local clinical governance groups and at Trust committees such as the Risk and Compliance Committee. Training can be re-visited as a result of incidents.

Risk management knowledge, such as record keeping and patient safety, are also included in various audits.

Individual specialist staff also undertake specific observation audits in the workplace, for example the Health & Safety Advisor, who is responsible for reporting the outcome of Health and Safety visits each and every quarter to the Health and Safety Committee.

Section 7 – Control of Document including Archiving Arrangements

Once agreed by the Mandatory Training and Role Essential Steering Group the Responsible Officer will forward this document to the Information Governance Department for a document index registration number to be assigned and for the document to be recorded onto the central hospital master index and central document library of current documentation.

In order that this document adheres to the Hospital's Records Management Policy, the Information Governance Department will:

- Ensure that the most up-to-date version of this document is stored on the documentation library.
- Archive previous versions of this document.
- Retain previous versions of this guideline for a period of time in accordance with the NHS Records Retention and Disposal Schedule.

Section 8 – Supporting Compliance and References

This document will support the Trust's compliance with the Health and Safety at work act (1974), The Equality act 2010, the Government's counter terrorism strategy (CONTEST) and safeguarding adults and children.

References

Health Education England, Skills for Health, 2021. Core Skills Training Framework (England) Statutory/Mandatory Subject Guide For NHS Trusts in England. Version: CSTF (England) v1.1

Appendix A - Equality Impact Assessment Form

The purpose of this Equality Impact Assessment form is to determine the extent to which policies, procedures and practices impact upon individuals and groups in relation to one or more of the equality categories.

If the policy, procedure or practice is found to have an adverse impact, the author/s must consider all other alternatives, which may more effectively achieve the promotion of equality of opportunity. This may include the development of specific measures to mitigate the adverse impact.

This Equality Impact Assessment form must be completed and forwarded to Human Resources Administration Office, Post Point N020 attached to the draft document prior to it being considered for approval. The Responsible Officer must retain the original. In the event that the document appears to be discriminatory, please refer to your Human Resources Manager/Adviser who will be able to advise you in accordance with employment legislation.

DOCUMENT TITLE:	Statutory, Mandatory and Role Essential Training Policy					
GROUP/DIVISION/DEPARTMENT:	Faculty of Education					
NAME AND JOB TITLE OF RESPONSIBLE OFFICER	Head of Libraries, Learning and Development					
1. SERVICE USERS – Check for <u>DIRECT</u> discrimination against any minority group						
Does your document contain any statements which may exclude people from using services who otherwise meet the criteria under the grounds of:	Response		Action Required		Resource Implication	
	Yes	No	Yes	No	Yes	No
Age		X				
Gender		X				
Disability		X				
Race		X				
Religion or Belief		X				
Sexual Orientation		X				
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						
2. EMPLOYEES – Check for <u>DIRECT</u> discrimination against any minority group						
Does your document contain any statements which may exclude employees from operating under the grounds of:	Response		Action Required		Resource Implication	
	Yes	No	Yes	No	Yes	No
Age		X				
Gender		X				
Disability		X				
Race		X				
Religion or Belief		X				
Sexual Orientation		X				
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						

3. SERVICE USERS – Check for <u>INDIRECT</u> discrimination against any minority group						
Does your document contain any conditions or requirements which are applied equally to everyone, but may disadvantage certain individuals or groups because they cannot comply due to:	Response		Action Required		Resource Implication	
	Yes	No	Yes	No	Yes	No
Age		X				
Gender		X				
Disability		X				
Race		X				
Religion or Belief		X				
Sexual Orientation		X				
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						
4. EMPLOYEES – Check for <u>INDIRECT</u> discrimination against any minority group						
Does your document contain any statements which may exclude employees from operating under the grounds of:	Response		Action Required		Resource Implication	
	Yes	No	Yes	No	Yes	No
Age		X				
Gender		X				
Disability		X				
Race		X				
Religion or Belief		X				
Sexual Orientation		X				
If yes is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						
5. Check for ACCESS Discrimination						
Is your document accessible:	Response		Action Required		Resource Implication	
	Yes	No	Yes	No	Yes	No
In a variety of languages						
To specific disabled service users/employees						
If no is answered to any of the above, the document may be considered discriminatory and requires review and further work to ensure compliance with legislation						

Name of group/s consulted with on document:	
Signature of Responsible Officer:	
Date:	