# Mandatory Training

<table>
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<tr>
<th>Reference Number:</th>
<th>148</th>
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</table>
| Author & Title:  | Tracy Elvins  
Head of Learning and Development |
| Responsible Director: | Human Resources |
| Review Date:     | 07 May 2018 |
| Ratified by:     | Claire Buchanan  
Director of Human Resources |
| Date Ratified:   | 07 May 2015 |
| Version:         | 5.0 |

**Related Policies and Guidelines**

- Induction Policy
- Performance Development Review Policy
- Study Leave Policy
- Study/Professional Policy for Consultants, Associate Specialists and Staff Grade Doctors
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<tr>
<th>Issue</th>
<th>Status</th>
<th>Date</th>
<th>Reason for Change</th>
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<tr>
<td>3.2</td>
<td>Approved</td>
<td>17 March 2010</td>
<td>Planned review</td>
<td>Trust Consultative and Negotiating Committee Policy Sub-Group</td>
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<tr>
<td>4</td>
<td>Approved</td>
<td>30 January 2013</td>
<td>Planned Review</td>
<td>Lynn Vaughan Director of HR</td>
</tr>
<tr>
<td>5</td>
<td>Approved</td>
<td>May 2015</td>
<td>Review to reflect process change</td>
<td>Claire Buchanon Director of HR</td>
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</table>
1. Purpose of this Policy

The Royal United Hospitals NHS Foundation Trust aims to provide the highest quality care to all patients using its services. In order to minimise risk to both patients and staff, all staff are required to attend mandatory training to deliver safe effective service in their area of work.

The purpose of this policy is to provide guidance to managers and staff on the arrangements for mandatory training within the Trust.

The Trust is committed to ensuring that adequate provision is made for mandatory training and for staff to be released to attend such training.

2. Aims and Objectives of this Policy

This policy sets out the framework for ensuring that staff receive corporate mandatory training according to the training matrix for each mandatory subject. The matrices have been developed as result of risk assessment contained within the Mandatory Training Ratification form. The matrix informs the content of the Mandatory Training Profiles which have been developed for staff groups. These profiles are available for all staff on the Staff Development pages of the intranet.

The policy applies to all staff employed by the Trust. This includes permanent staff, temporary staff (bank and those on fixed term or honorary contracts) and regular volunteer staff. Temporary staff employed via agencies and contractors must have their mandatory training needs met via their employer before starting work with the Trust. This is monitored via a checklist which is appended to the signed honorary contract.

This policy must be read in conjunction with the Trust Induction policy which outlines how the Trust will ensure that all new employees attend a Trust Induction Programme which will include initial mandatory training pertinent to their role.

Assurance of mandatory training meeting external regulatory standards is given through regular report monitoring by the appropriate Trust committee(s).
3. Policy Content

3.1 Definition of Mandatory Training

For the purposes of this policy, mandatory training is any statutory or compulsory training that the Trust requires its employees to undertake:

- To comply with the law and requirements of regulatory bodies
- To carry out duties safely and efficiently
- To reduce/address areas of risk
- To maintain competence to the required standards identified by external bodies.

The Trust mandatory training matrix identifies the mandatory training categorised by staff group. Some mandatory training is specific to particular staff groups, disciplines or roles determined by Trust policy. Additional training may be determined locally by managers on a risk-assessed basis.

3.2 Mandatory Training Profiles

The Trust identifies the mandatory training required by staff group and role using profiles. The profile identifies update frequency requirements for this training. Staff can access their Mandatory Training Profile via the Trust’s intranet page http://webserver.ruh-bath.nhs.uk/Training/Prospectus/Mandatory/index.asp?menu_id=7 and follow links to information about how training is provided for each mandatory subject. Mandatory training is available using a range of methods to maximise accessibility, including taught sessions/programmes, e-learning and e-assessment.

The mandatory training subjects, requirements are reviewed and agreed by the Mandatory Training Review Panel.

Other training may be deemed to be essential for specific roles within the Trust or for specific staff following changes/developments in service delivery, audit and/or the review of a clinical/ non-clinical incidents or complaints, where a particular need is identified. The responsibility for ensuring that this is provided rests with the SME and/or relevant department/line manager.
3.3 STAR (Staff Training Analysis Reports)

STAR is the tool used in the Trust to report on training compliance. STAR is available on the Intranet for all staff and is the mechanism for individuals to view training completion recorded against their mandatory training requirements. Information can be viewed at a personal, managerial and subject* level.

My Training Record allows staff to see whether their mandatory training has been completed and when it needs to be renewed. This report helps staff keep track of mandatory training and is used to support the appraisal/medical revalidation discussion and personal development planning.

The Manager View allows managers to see which members of their team are in date with their mandatory training and to plan when team members need to complete refresher training.

The Subject Compliance View analyses compliance levels by division and department for single subjects or groups of subjects. This enables Subject Matter Experts to identify where training needs to be targeted and provides reports to present to assurance and governance committees. *This view is restricted to identified members of staff (usually the lead for this subject).
4. Responsibilities

4.1 The Learning and Development Department

The Learning and Development Department has a duty to ensure that:

- Appropriate mandatory training is provided for all staff. This applies to staff employed whether whole time, part time or in a temporary capacity.
- Information about mandatory training requirements is kept up to date and is communicated via the mandatory training profiles and STAR on the Trust’s intranet pages.
- Staff are aware of the availability of mandatory training via the intranet, the Learning Management System and by contacting the Learning & Development department.
- Staff are informed of changes to mandatory training requirements, as agreed by the Mandatory Training Review Panel via the weekly staff e-newsletter and on STAR.
- There is a clear process for staff to book mandatory training and cancel where necessary.
- Accurate records are kept of all mandatory training undertaken.
- A process is in place for following up non-attendance by informing the individual’s manager of their non-attendance and the need to re-book.
- STAR is regularly updated, enabling individuals and managers to identify non-compliance.
- Clear reporting processes are maintained to enable monitoring of compliance with mandatory training.
- Capacity and take-up of mandatory training places is monitored.
- Performance reports on mandatory training compliance are made available to the appropriate Trust committees.
- Risks are raised to Strategic Workforce Committee on any subject area where compliance is deemed to be too low or there is insufficient capacity to meet demand.
- Outcomes of Mandatory Training Review Panel decisions are communicated to Subject Matter Experts.

In circumstances when training has to be cancelled by the Learning and Development Department, the department will do everything it can to contact the affected individuals, by email and/or telephone contact, leaving messages with managers where contact with the individual is not possible.
4.2 Mandatory Training Review Panel (MTR)

The MTR Panel has a duty to:

- Monitor Mandatory Training Ratification forms for any new mandatory training under development or changes which require approval.
- Ratify MTR forms, or ask for further information to be provided by the SME if the rationale or training needs analysis is not specified or explain why the request has been declined.

4.3 Strategic Workforce Committee (SWC)

The SWC has a duty to:

- Monitor compliance reports provided by the Learning & Development department.
- Respond to risks raised by the Learning & Development department. Review action taken against the implementation plan for new mandatory training, i.e. SME to provide feedback on progress and evaluation after a specified period for all new mandatory training.

4.4 Subject Matter Expert (SME)

Subject Matter Experts (SME) are expected to keep up to date with changes in legislation, national directives and requirements within their own area of responsibility and liaise with the Training Compliance Manager to ensure that the training implications are identified and appropriate training organised, provided and recorded centrally. It is the responsibility of the Subject Matter Expert (SME) to:

- Plan, deliver, evaluate and continually improve training sessions/programmes ensuring they are evidence based and compliant with Trust policy, and aligned to the Core Skills Framework.
- Raise risks around low compliance to their relevant committee.
- Participate in the SME Forum and use the Forum to inform about any significant changes required to the objectives/learning outcomes or content of their sessions/area of expertise.
- Maintain their expertise in their subject area.
- Ensure that participants record their attendance at sessions/programmes using the sign in sheet.
- Ensure that appropriate information is recorded on the Learning Management System to enable accurate reporting should the organisation be required to demonstrate evidence for any quality assurance frameworks.
- Ensure participants complete an evaluation form at the end of sessions/programmes.
- Contribute to the evaluation, review and development of mandatory training as required.
4.5 **Line Manager**

It is the responsibility of all line managers to:

- Ensure that all their staff are aware of the need to comply with mandatory training according to role requirements.
- Monitor mandatory training compliance for all of their staff.
- Use STAR to ensure that all staff are up to date with the relevant mandatory training for their role prior to attending any other training, as outlined in the Study Leave Policy.
- Plan the attendance of their staff at relevant mandatory training and give protected time to attend.
- Ensure that during the annual staff appraisal they:
  - Check compliance with mandatory training
  - Check required competencies
  - Identify learning needs and refresher requirements
- Follow up staff who have failed to attend booked mandatory training, investigate why and ensure training is arranged as soon as possible.

4.6 **All staff**

It is the responsibility of all staff, whether employed whole or part-time to:

- Ensure corporate mandatory training requirements as identified in the mandatory training profile and those identified locally are met.
- Refer to STAR for refresher or new mandatory training requirements.
- Identify when updating is required and agree a date for this with their manager.
- Give priority to mandatory training and make every effort to attend training sessions arranged for this purpose.
- Alert their line manager and the provider of the training (this in most cases will be the Learning and Development team) if they are unable to attend.
- Sign the attendance record for the session/programme.
- Partake in evaluation of session/programme in order to influence future provision.
- Apply the learning to their area of work/role.
5. Recording, Reporting and Monitoring Mandatory Training

Accurate recording of mandatory training records is essential as it provides the evidence of compliance required by internal and external assessing bodies. All mandatory staff training/learning event attendance is recorded on the Trust’s Learning Management System.

All staff attending mandatory training events must sign the attendance record in order that their attendance can be recorded accurately by the Learning Management System administration team, following receipt of the attendance record sheet.

When a participant fails to attend a mandatory training event the programme administrator generates an individual email to the participant’s manager which outlines what the participant has not attended and informs them of the requirement to re-book their mandatory training as soon as is practically possible.

Subject compliance is reported from STAR reports and shows the percentage of relevant staff who are compliant with training in each mandatory subject. This data can be broken down to a divisional, departmental or individual level in order for local reporting and performance monitoring to be carried out.

Monthly training compliance reports are provided to Management Board and Strategic Workforce Committee for monitoring.

6. Flexible Arrangements

It is recognised that there will be occasions when staff may not be able to attend all or some of the mandatory training due to disability or unavoidable domestic or other commitments. In these instances the manager in consultation with the Learning and Development department must make alternative arrangements to ensure that these staff are able to complete the mandatory training requirements for their post. Alternatives to classroom training may be available.

7. Introducing New Mandatory Training

All new mandatory training will be introduced following Trust procedure to ensure a coordinated and streamlined approach. This approach is outlined in Appendix 1, Flowchart for Identifying & Agreeing Organisational Learning Needs.

A Mandatory Training Ratification (MTR) form is required for any new mandatory training initiative. This is available by contacting the Learning and Development Department on ext 5502.

Please contact the Training Compliance Manager in the Learning and Development Department for further help with this process.
8. Monitoring and Review

The responsibility for routine review of this policy will rest with the Learning and Development Department. The policy will also be reviewed if there is a change in national or local legislation.

In accordance with the Trust’s governance arrangements the Director of Human Resources has ultimate responsibility for ensuring that this and other related polices are kept up to date, implemented effectively and monitored regularly for effectiveness.
Appendix 1: Process for Identifying & Agreeing Organisational Learning Needs

New service, directive, policy, legislation, or incident indicates potential learning need or change to existing eg refresher period or major change to staff requiring training

Relevant committee and SME identified

SME to complete MTR form (with support from TCM) to determine the need for learning, delivery mechanism, recording/monitoring/reporting requirements and communication plan etc. Or to update an existing form provided by TCM

SME to present to relevant committee/group for approval

TCM to present MTR form to MTR panel for ratification

MTR form ratified?

Yes

If agreed that learning will be recorded in ESR, SME to complete ESR paperwork (with support from TCM)

Process for reporting agreed by TCM, where appropriate

Learning added to Learning Matrix and MT Profiles by TCM

Delivery of training/e-learning development starts

No

MTR panel to make recommendations

TNA – Training Needs Analysis
SME – Subject Matter Expert
TCM – Training Compliance Manager
MTR Panel – Mandatory Training Review Panel
MTR Form – Mandatory Training Ratification Form
ESR – Electronic Staff Record

All documentation is located in Shared Folders/ PROCESSES/ SSLAP Forms
Ratification Assurance Statement

Dear Claire

Please review the following information to support the ratification of the below named document.

Name of document: Mandatory Training Policy (Reference 148)

Name of author: Tracy Elvins

Job Title: Head of Learning and Development

I, the above named author confirm that:

- The Policy presented for ratification meets all legislative, best practice and other guidance issued and known to me at the time of development of the Policy;
- I am not aware of any omissions to the Policy, and I will bring to the attention of the Executive Director any information which may affect the validity of the Policy presented as soon as this becomes known;
- The Policy meets the requirements as outlined in the document entitled Trust-wide Policy for the Development and Management of Policies (v4.0);
- The Policy meets the requirements of the NHSLA Risk Management Standards to achieve as a minimum level 2 compliance, where applicable;
- I have undertaken appropriate and thorough consultation on this Policy and I have documented the names of those individuals who responded as part of the consultation within the document. I have also fed back to responders to the consultation on the changes made to the Policy following consultation;
- I will send the Policy and signed ratification checklist to the Policy Coordinator for publication at my earliest opportunity following ratification;
- I will keep this Policy under review and ensure that it is reviewed prior to the review date.

Signature of Author: Tracy Elvins
Date: 07 May 2015

Name of Person Ratifying this policy: Claire Buchanan

Job Title: Director of Human Resources

Signature: ___________________________ Date: 07 May 2015

To the person approving this policy:
Please ensure this page has been completed correctly, then print, sign and post this page only to: The Policy Coordinator, John Apley Building.
The whole policy must be sent electronically to: ruh-tr.policies@nhs.net
### Consultation Schedule

<table>
<thead>
<tr>
<th>Name and Title of Individual</th>
<th>Date Consulted</th>
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<tbody>
<tr>
<td>Fiona Vallis, Training Compliance Manager</td>
<td>December 2014</td>
</tr>
<tr>
<td>Joanne Stanger, Training Compliance Manager</td>
<td>December 2014</td>
</tr>
<tr>
<td>Angela Hayday, Associate Director of HR</td>
<td>December 2014</td>
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<tr>
<td>Rachelle Jendrey, Trust Induction Co-ordinator</td>
<td>December 2014</td>
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<tr>
<td>Julie Blackman, Head of Clinical Skills</td>
<td>December 2014</td>
</tr>
<tr>
<td>Yvonne Glenn, Head of Learning and Development</td>
<td>March 2015</td>
</tr>
<tr>
<td>Sarah Thompson, Learning and Development Coordinator</td>
<td>March 2015</td>
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The following people have submitted responses to the consultation process:

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<thead>
<tr>
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<th>Date Responded</th>
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<tbody>
<tr>
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<td>Julie Blackman, Head of Clinical Skills</td>
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<tr>
<th>Name of Committee/s (if applicable)</th>
<th>Date of Committee</th>
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<tr>
<td>Mandatory Training Group</td>
<td>April 2015</td>
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### Equality Impact: (A) Assessment Screening

To be completed when submitted to the appropriate Executive Director for consideration and approval.

<table>
<thead>
<tr>
<th>Person responsible for the assessment:</th>
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<tbody>
<tr>
<td>Name: Tracy Elvins</td>
</tr>
<tr>
<td>Job Title: Head of Learning and Development</td>
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<tr>
<th>Does the document/guidance affect one group less or more favourably than another on the basis of:</th>
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<th>Comments</th>
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<tr>
<td>Race</td>
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<td>Culture</td>
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<td>Age</td>
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<td>Disability (learning disabilities, physical disability, sensory impairment and mental health problems)</td>
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<td>Is there any evidence that some groups are affected differently?</td>
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<td>If you have identified potential discrimination, are there any valid exceptions, legal and/or justifiable?</td>
<td>❑ Yes  ❑ No</td>
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<td>Is the impact of the document/guidance likely to be negative?</td>
<td>❑ Yes  ❑ No</td>
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<td>If so, can the impact be avoided?</td>
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<tr>
<td>What alternative is there to achieving the document/guidance without the impact?</td>
<td>❑ Yes  ❑ No</td>
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<tr>
<td>Can we reduce the impact by taking different action?</td>
<td>❑ Yes  ❑ No</td>
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If you answered **NO** to all the above questions, the assessment is now complete, and no further action is required. 

If you answered **YES** to any of the above please complete the **Equality Impact: (B) Full Analysis**