City Hospitals Sunderland NHS
NHS Foundation Trust

INDUCTION AND TRAINING POLICY

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Sponsor	Kath Griffin, Director of Human Resources

Version	Date of amendments	Author	Update comments
1.0	July 2006	Mary Pollard – Learning and OD	
2.1	November 2008	Mary Pollard – Learning and OD	Amended training need matrix
2.2	January 2010	Mary Pollard Learning and OD Ruth Turner Medical Education and R&D Manager	Amendments to take into account e-learning availability, implementation of Manager Self Serve in ESR and addition of bullying and harassment to the NHSLA standards. Changes to assessment of junior doctor competencies. Amendments to the process for return of evidence following departmental induction and assessment
2.3	May 2011	Mary Pollard Education & Training	Amendments to take into account changes to the NHSLA standards 2011/12 year and removal of junior doctor induction and mandatory training requirements and processes from this policy. Junior doctor induction and mandatory training will be dealt with in their mandatory training policy.
2.4	June 2011	Mary Pollard - Education & Training	Amended to take account of comments from HR Strategy Group.
2.5	July 2011	Mary Pollard Education & Training	Amended to take account of comments from Mini Executive Board.
2.6	April 2012	Mary Pollard Education & Training	Amended to take account of Mandatory Training Review by EC and changes to the NHSLA Standards for the 2012/13 year.

Version	Date of amendments	Author	Update comments
2.7	April 2012	Mary Pollard Education & Training	Amended as directed by Mini Executive Committee April 2012
2.8	May 2012	Mary Pollard Education & Training	Amended as directed by the Policy Committee April 2012
2.9	October 2014	Mary Pollard Education & Training Ruth Turner Medical Education and R&D Manager	Merged Mandatory Training Policy, Junior Doctor Mandatory Training Policy and Training Needs Policy into one combined document
3.0	July 2015	Mary Pollard Education & Training	Amended to exclude Junior Doctors Mandatory Training Policy as directed by HR Strategy Group.
3.1	December 2015	Mary Pollard Education & Training	Amended as directed by HR Strategy Group.
3.2	March 2016	Mary Pollard Education & Training	Reviewed at JCG. No amendments requested.
3.3	June 2016	Mary Pollard Education & Training	Ratified by Policy Committee

CITY HOSPITALS SUNDERLAND NHS FOUNDATION TRUST

DOCUMENT APPROVAL PROFORMA

This proforma must be included when the document is submitted to Executive Committee/Policy Committee.

Policy Title: INDUCTION AND TRAINING POLICY

Policy Reference Number: HR6.MT.V3.3

Name of Author: Mary Pollard, Education and Training Manager

Name of Sponsor: Kath Griffin, Director of Human Resources

New Policy: No

Reviewed Without Amendments: No

Type of Policy:

Risk management	
Operational policy	
Operational guidelines	
Mental Health Act	
Human Resource	**X**
Control of infection	
Drugs policy	
Other	

Equality Impact Assessment:

If this policy has a potential discriminatory impact please record below the person who has informed and involved the sponsor:

Name: Date:

Title:

It is the sponsor's responsibility to submit the policy through the CHS approval route.

Checklist for the review and approval of the policy

Is the policy compliant with:	Y/N	Comments
Corporate style	Y	
Format including duties	Y	
Content (intended outcomes clearly described and explanation of terms used)	Y	
Evidence base (key references included and cited in full)	Y	
Associated documentation and supporting references (recorded)	Y	
Review/consultation process (list of groups/committees included with the policy)	Y	
Appropriate stakeholders consulted? (list)	Y	
If appropriate, has Staff Side approved the policy?	Y	
Dissemination & implementation (appropriately described)	Y	
Training requirements included (where appropriate)	Y	
Document control (table updated appropriately)	Y	
Monitoring compliance/ effectiveness (adequate monitoring of compliance by the various groups/committees described)	Y	
Review date (identified and acceptable)	Y	
Page numbers (correct with index)	Y	
Internet to be updated (Is there any reason why this policy cannot be placed on the Trust's external website?)	Y	
Individual approval Policy author	**Date**	**Sign**
Director of Corporate Affairs: update version control and approval of the process	**Date**	**Sign Andrea Hetherington 27 07 16**
Policy archived		**27 07 16**

Ratification Process

Committee which forms the approval process: Policy Committee

Date of approval: 09 June 2016

Contents   **Page Number**

1   INTRODUCTION

CHS is committed to providing quality health care to our patients in a safe environment. To enable this, the Trust is committed to a systematic approach to the provision of induction training at the start of employment, on-going mandatory training to meet its statutory obligations and Continuing Professional Development appropriate to roles.

It is recognised that some staff may need support in the process (whether it be literacy, understanding or other support). If any employee has special needs or is unable to understand or read the text, then this policy will be explained on a one-to-one/face-to-face basis either by their manager or other staff member agreed with the individual. All support given will be in confidence. An easy read version of this policy is available at **Appendix 7**.

2   PURPOSE AND SCOPE

The purpose of this policy is two-fold. First, it sets out a framework for the provision of mandatory training, including comprehensive induction upon joining the Trust and thereafter, to ensure that staff are provided with training to enable them to maintain a safe working environment and adopt safe working practices which will help minimise potential risk to staff, patients/public and the Trust. Secondly, the policy also describes how non-mandatory training requirements are identified and met through Continuing Professional Development.

Staff already employed by the Trust who take up a post in a different ward/department or are returning on "flexible retirement" do not need to attend Corporate Induction.

Since the Trust is committed to ensuring that staff complete induction and mandatory training, this document sets out the roles and responsibilities of management and individuals in this regard. It identifies the process for monitoring and reporting of completion of training and following up failure to complete.

This policy applies to:-

- Permanent staff employed by the Trust

- Pre-Registration Students

- Locum Doctors and Agency workers (please refer Locum Doctor and Agency Worker Policy on the intranet)

Staff must adhere to this policy. Failure to complete induction training or keep up to date with mandatory training may result in disciplinary action.

Where there is reference to appraisal, this applies to non medical staff. Medical and Dental staff should refer to the Medical Appraisal Policy on the intranet.

3 DUTIES

3.1 Board of Directors

The Board of Directors is responsible for approving an Induction and Mandatory Training framework which enables organisational compliance with all relevant legislation and national directives.

3.2 Chief Executive

The Chief Executive, with delegated responsibility to the Executive Committee leads, is ultimately responsible for ensuring that the workforce is competent and capable, and that an Induction and Mandatory training framework is in place to enable staff to maintain a safe working environment and adopt safe working practices.

3.3 Director of Human Resources (HR)

The Director of HR is responsible for the implementation and monitoring of the policy for all staff excluding Junior Doctors. Amendments to the Mandatory Training Needs Analysis will be submitted to the Executive Committee via the Director of HR.

3.4 Heads of Service

It is the responsibility of Heads of Service (including Divisional General Managers and Directorate Managers), to ensure that all line managers within their areas adhere to the requirements of this policy.

Heads of Service have overall responsibility for monitoring compliance for staff other than junior doctors in their area, investigating areas of non-compliance and taking appropriate action and addressing issues of continued failure to attend. To enable them to do this they will receive quarterly progress reports on compliance from the Education and Training team.

3.5 Line Managers

Line managers are responsible for:-

- Ensuring that new starters do not work on their ward/department before they have completed Corporate Induction. Where, in exceptional circumstances and with the approval of the Director of HR or nominated deputy, staff have started outwith standardised start dates, line managers must ensure that they attend the earliest induction programme after their start date.
- Completing a Local Induction Checklist with the new starter within one month of starting. The completed checklist will be filed in the staff member's personal file and with a copy forwarded to Education and Training for entering onto ESR.
- Advising the Trust of training requirements via the training needs process.
- Allocating staff sufficient time to enable them to attend mandatory and other agreed training commitments.
- Taking action when receiving notification of staff failure to attend training via e-mail from Education and Training by advising staff to re-arrange the training and helping them if required. Continued failure to attend will be escalated to Heads of Service and may result in disciplinary action.

- Checking that staff are up to date with mandatory training before granting study leave for other purposes.
- In the event of new starters failing to complete their training during their induction (e.g. because of technical problems) ensuring that any outstanding training is completed departmentally and informing Education and Training if there are difficulties so that contingency arrangements may be made.
- Completing a local induction check list with a locum or agency worker and returning the completed form to HR.
- Arranging Corporate Induction for a locum or agency worker who provides cover for 12 weeks or more continuous working.

3.6 Patient Flow Manager

Patient Flow Managers (out of hours only) are responsible for:

- Completing a local induction check list with a locum or agency worker covering out of hours shifts. Check lists are available on the intranet via the following link**: http://chsintranet/corporate-functions/human-resources/employment-services/forms/**

3.7   All Staff

It is the responsibility of staff to:

- Complete all relevant mandatory training.
- Raise with their manager or the Education and Training Team if they have any problems accessing training.
- Inform their manager and the Education and Training Team if they are unable to attend a mandatory training session.

3.8   Human Resources

Recruitment Services are responsible for:

- Notifying new starters and their managers of the dates of Induction.
- Populating the induction calendar with new starters due to attend induction.
- Appointment of new starters outwith the process in exceptional circumstances and with the approval of the Director of HR and will notify Education and Training so that mandatory training may be commenced.
- Administering and monitoring local induction of locum and agency workers.

The Education and Training Team is responsible for:

- Compiling the Mandatory Training Needs Analysis (this may be found on the Education and Training page of the intranet) which is informed by the subject matter experts based on legislation and/or guidelines and approved by the Executive Committee.
- Amending the Mandatory Training Needs Analysis as required at the direction of the Executive Committee.
- Developing a training prospectus based on the approved Training Needs Analysis, updating it as required.

- For classroom based training, providing relevant training leads with numbers of places required in order to deliver the Mandatory Training Needs Analysis.
- Taking and confirming nominations from managers for classroom based mandatory training courses which require booking (some courses will be via e-learning, link training sessions, drop in sessions, booked by a different agency or targeted by the trainer at specific groups or may be booked by manager or employee self serve).
- Recording completion of e-learning on an individual's learning record where the e-learning is not attached to ESR or does not automatically update.
- Notifying managers of non-attendance at classroom based mandatory training.
- Reporting to Heads of Service on mandatory training compliance rates and providing details of staff outstanding for training on a quarterly basis.
- Exception reporting on failure to attend Induction to the relevant Head of Service.
- Checking that all new starters complete Corporate and Local Induction.
- Quarterly reporting to the Board of Directors on compliance/fail to attends
- Annual reporting to Corporate Governance Steering Group.
- Identification with Directorates of non-mandatory training needs and delivery against this if possible. This will identify Continuing Professional Development requirements for Tier 1 delivery and will inform the bid for Tier 2 regional funding. Collating non-mandatory training needs returns from Heads of Service once a year.

3.9   Subject Matter Experts/Training Leads

The subject matter experts/training leads are responsible for informing the Training Needs Analysis and content for their topic based on relevant legislation and/or guidelines. They are also responsible for training delivery, taking registers for classroom based training and returning completed registers to the Education and Training Team which are located in the Education Centre. It is their responsibility to advise the Education and Training Team of any amendments required to the Mandatory Training Needs Analysis because of changes in legislation and/or guidelines. These will be submitted via the Director of HR for Executive Committee approval.

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4 DEFINITIONS

4.1 Mandatory Training

Mandatory training is defined as essential training which is determined by legislation and national directives. Mandatory training requirements are identified in the Mandatory Training Needs Analysis (this may be found on the Education and Training page of the intranet).

Directorates/Departments may have additional mandatory training requirements for staff in certain roles which are specialty specific and are not included in this policy. This is monitored locally within Directorates and incorporated into the appraisal process.

4.2 Permanent Staff

Staff directly employed under a contract of employment with the Trust. This includes staff on temporary and fixed term contracts.

4.3 Locum and Agency Workers

Person who temporarily fulfils the duties of another (refer Locum Doctor and Agency Worker Policy on the intranet: **http://chsintranet/wp-content/uploads/2012/09/HR24.LDAW_.V6-Locum-Doctor-Agency-Worker-Policy-Oct13.pdf**)

4.3.1 Short Term Locum/Agency Working

- This may range from one session to a maximum of 12 weeks continuous working with the Trust.

4.3.2 Long Term Locum/Agency Working

- This is defined as 12 weeks or more continuous working with the Trust in one or more assignment.

4.4 Volunteers

A volunteer is a person who willingly performs or offers to perform voluntary service with no payment made by the Trust. Local induction and mandatory training will be carried out as specified in the Recruitment and Placement of Volunteers Policy.

4.5 Clinical Staff

For the purposes of this policy, clinical staff are defined as healthcare staff who provide direct patient care. This excludes healthcare professionals working in roles where they are not required to deliver care to patients.

4.6 Corporate Induction

Corporate Induction is a centrally organised training programme which provides new starters with key information about the organisation and mandatory training prior to their starting work in their ward or department.

4.7 Local Induction

Local Induction provides new starters with an orientation to their area of work and covers their ward or departmental processes and procedures.

4.8　Electronic Staff Record (ESR)

The Electronic Staff Record (ESR) is a computerised system used by the NHS in England and Wales which integrates payroll, employment and training information. Training completed by staff employed by the Trust is recorded in ESR on their learner record.　Staff employed by the Trust are provided with access to ESR through Employee Self Service and E-learning.　Staff are able to view their personal information including their learning history and compliance with mandatory training via a Compliance Matrix.　ESR is also used to record appraisal meetings at which training is agreed.

4.9　Mandatory Training Needs Analysis

The Mandatory Training Needs Analysis (which may be found on the Education and Training page of the intranet) identifies mandatory training topics, staff groups and update frequency and is determined by relevant legislation and/or guidelines.　It is approved by the Executive Committee.

4.10　Continuing Professional Development

There are two strands of Continuing Professional Development (CPD).　The first, Tier 1 funding, is available to progress healthcare professionals through to degree level without direct cost to themselves or their directorate.　The second strand, Tier 2 funding, includes clinical and other professional development courses not included in Tier 1.　CPD is not mandatory and is therefore not included in the Mandatory Training Needs Analysis.　CPD training must be identified through the appraisal process to meet Directorate objectives/service plans and detail on CPD is given at **Appendix 1**.

4.11　Mandatory Training Prospectus

The Training Prospectus for mandatory training will be developed by the Education and Training team based on the Training Needs Analysis, identifying the topic, staff group and frequency of update training, and dates for classroom based training up to three months in advance.　It is available on the Education and Training page of the intranet.

4.12　Appraisal

Where there is reference to appraisal, this applies to non medical staff.　Medical and Dental staff should refer to the Medical Appraisal Policy on the intranet.

5   MANDATORY TRAINING AT INDUCTION

All staff who join the Trust are required to attend some form of induction. The minimum content of Corporate Induction is identified in **Appendix 2**. The business process for its delivery and completion is identified in Sections 6 and 7 with flow charts describing Corporate Induction at **Appendix 3** and local induction at **Appendix 4**.

<u>Induction of Permanent Staff</u>

The Trust recognises that a comprehensive induction process will help new starters integrate into the organisation and feel confident and competent to take up their new role. New starters employed directly by the Trust must undertake both Corporate and Local Induction.

Corporate Induction

City Hospitals operates standardised start dates for Corporate Induction. New starters must complete Corporate Induction before starting work in their ward or department. The first day of Corporate Induction will be the first day of commencement of employment with the Trust and will be provided to the new starter by the HR Department.

Exceptions to this are:

1)   Newly qualified nurses who are block recruited at set times of the year. This group may commence their Preceptorship Programme prior to attending Corporate Induction. Their first day of work will be attendance at either the Preceptorship Programme or Corporate Induction. They will not start work in their ward or department until they have completed Corporate Induction. This will be within one month of starting.

2)   In exceptional circumstances some staff may be required to start outwith the process. This must be with the approval of the Director of HR or nominated deputy, and Education and Training must be informed so that where possible mandatory training may be started. The new starter must attend the earliest Corporate Induction programme after their start date.

Section 6 outlines the process of Corporate Induction.

Local Induction

New starters are provided with a Local Induction Checklist in their HR Pack. A copy of the local induction check list is available under forms on the intranet.

The Local Induction Checklist must be completed by the individual and their manager within one month of starting employment and returned to the Education and Training team. A copy of the checklist will be filed in the individual's personal record.

<u>Pre-Registration Students</u>

Pre-registration students must undertake an induction. In cases where students join the Trust in large groups at certain times of the year (e.g. nursing and midwifery students) they will receive their own induction programme which incorporates the mandatory training elements of the Corporate Induction Programme. This is arranged, facilitated and audited by the Practice Placement Facilitator.

Pre-registration students joining the Trust for short periods (e.g. Physiotherapy, OT placements) must complete local induction and the records must be maintained by the educational coordinator for that area.

Other pre-registration students joining the Trust for long term placements (e.g. Pharmacy) will attend Corporate Induction as soon as possible after starting (their start date is determined by their educational programme) and undertake Local Induction.

6 PROCESSES SUPPORTING DELIVERY AND COMPLETION OF CORPORATE AND LOCAL INDUCTION

The following processes support delivery and completion of induction of staff other than junior doctors joining the Trust.

6.1 Delivery of Corporate Induction

The Trust operates standardised start dates to deliver Corporate Induction and commencement of employment for new starters will generally be the first day of Corporate Induction. Exceptions to this are identified in Section 5.

Duration of Corporate Induction

The first two days of induction consist of generic training which is applicable to all staff, followed by training which is relevant to role and area of work as identified in the Mandatory Training Needs Analysis (which may be found on the Education and Training page of the intranet) and, for practical skills, in consultation with the relevant trainer.

The duration of the training varies dependent upon role and numbers requiring practical skills training. It may last two to three days for non clinical staff and up to seven days for clinical staff.

HR notify new recruits of their Corporate Induction date and populate the Induction Calendar which is accessible by the Education and Training team. In the week prior to Corporate Induction, the Education and Training team devise a matrix identifying training for each delegate, based on the Mandatory Training Needs Analysis and consultation with the practical skills trainers. Delegates are informed of their training requirements and schedule of practical skills (if relevant to the role) on the first day of induction.

The Education and Training team ask all staff attending induction to sign a register to evidence their attendance. On Day 1 of Corporate Induction any failure to attend is notified in the first instance to HR to identify any valid reason for non attendance. If there is no valid reason the job offer may be withdrawn. If non attendance is

because of a valid reason (e.g. adverse weather conditions, bereavement) the non attender must attend the remainder of the programme for that week where possible and attend the following month for any missed classroom based sessions. The relevant Head of Service will be notified via exception reporting.

The Education and Training team follow up delegates who fail to attend any part of Corporate Induction and maintain a Fail to Attend tracking sheet until completion is achieved.

The Education and Training team record completion of Corporate Induction on ESR and check that all new starters are compliant by matching ESR reports on completion of Corporate Induction against latest hire date. Any gaps will be investigated with HR and the relevant Head of Service and escalated if necessary to the Director of HR. Failure to comply may result in disciplinary action.

6.2 Delivery of Local Induction – Permanent Staff

New starters employed directly by the Trust are provided with a Local Induction Checklist with the information sent to them by HR. The form must be completed by the individual with their manager within one month of starting and sent to the Education and Training team in the Education Centre. A copy must be placed on the individual's personal file.

E-mail reminders to complete the Local Induction Checklist are sent in the week following the individual's attendance at Corporate Induction and if necessary in the week prior to the next Corporate Induction.

Continued failure to complete local Induction will be escalated by the Education and Training team to the relevant Head of Service and HR and may result in disciplinary action.

ESR reporting is used to identify failure to comply.

6.3   Induction of Locum and Agency Workers

Locum and agency workers are not employed directly by the Trust. They may work in a variety of ways and may cover one shift on one occasion only, whilst others may be employed over a longer timescale. It is the responsibility of the line manager (or a duty manager out of hours) to complete an Agency and Locum Local Induction Checklist. This is provided by HR and must be returned to HR when complete within one month (copies of the Local Induction Checklist are available on the intranet). HR monitor returns and follow up non-returns.

Short Term: Workers covering one shift and up to a maximum of 12 weeks continuous working are not required to complete Corporate Induction but must complete Local Induction.

Long Term: Workers providing cover for 12 weeks or more must attend Corporate Induction at the next induction following their 12 weeks of continuous working. They must thereafter complete mandatory training in line with the Trust's Mandatory Training Needs Analysis available on the intranet. Prior to attending Corporate Induction the individual will be added to ESR as a non employee and competences applied to their role as with permanent staff. This will allow monitoring of compliance of mandatory training.

Process

HR Administrators book agency worker/locum in line with Agency worker/Locum Doctor Policy

Monday to Friday (8.30 am – 5.00 pm)

Agency worker/Locum doctor will be asked to attend HR prior to them presenting for their shift where they will be met by an HR Administrator. The HR Administrator will take copies of required documents and provide the agency worker/locum doctor with a Local Induction Checklist (a copy of the Checklist is available on the intranet) instructing them to give this to the manager of the department/ward for completion.

A copy of the Local Induction Checklist will also be e-mailed to the manager who is meeting the agency worker/locum doctor requesting them to complete this with the individual and return to HR. If the HR Administrator is unaware of who is meeting the agency worker/locum doctor the information will be e-mailed to the Directorate Manager who authorised the booking asking them to ensure that the Local Induction Checklist is completed and returned.

Out of Hours

An e-mail is forwarded to the Patient Flow Management Team and Directorate Manager on call on the Friday afternoon (around 4.30 pm) informing them as to whether there is any agency worker/locum doctor to meet out of hours. This e-mail contains information with regard to the completion and return of the Local Induction Checklist. It is then the responsibility of the Patient Flow Manager to ensure that the Local Induction Checklist is completed on the first shift and returned, along with other documents which they are required to complete/take copies.

Returned Checklists

All returned checklists will be recorded on the Locum Record spreadsheet and the Agency Worker/Locum Doctor Checklist. The original Local Induction Checklist is filed in the Agency Worker/Local Doctor's personal file. A copy of the Local Induction Checklist will be placed on the Local Induction Checklist file.

Checklists Not Returned

Should a Local Induction checklist not be returned as requested, the HR Administrator will forward an e-mail to the relevant person (Patient Flow Manager and Directorate Manager – out of hours /Directorate Manager and/or individual who was meeting the Agency Worker/Locum Doctor – Monday – Friday) reminding them that the Local Induction Checklist has not been returned that they must do so as soon as possible.

If they still fail to return the completed Local Induction Checklist a copy of the chase e-mail should be forwarded to the HR Administration Manager who will escalate the "fail to return" to the Director of HR. Copy of any e-mail correspondence where a Local Induction Checklist has not been returned must be placed on the Local Induction Checklist file.

7 PROCESSES SUPPORTING DELIVERY AND COMPLETION OF ONGOING MANDATORY TRAINING

7.1 Enrolling on Mandatory Training Courses

Courses may be classroom based or e-learning. Staff are provided with ESR access to self-enrol. New starters are provided with training during induction on how to enrol on e-learning. Guides are available on the intranet. Staff may also contact the Education and Training team for support.

Dates and times of classroom learning are available in the Mandatory Training Prospectus on the Education and Training page of the intranet. Places may be booked as follows:

- Via Employee Self Service/E-Learning in ESR.
- Via Manager Self Service in ESR. Managers may enrol their staff onto a classroom course via Manager Self Service.
- Course booking link. Anyone may book a classroom place via the course booking link from the Education and Training section of the intranet
- The Education and Training team (Education Centre) may be contacted directly for help and advice if necessary.

7.2 Delivering Mandatory Training

The Education and Training team provides trainers/subject matter experts with information on the number of places required for classroom based training and gap analysis on a quarterly basis to allow targeted training if required. E-learning provides unlimited places, so resource planning is only required for courses which are delivered in a classroom environment. Where the training is delivered in a classroom environment, the Education and Training team calculate the number of places required for a topic by using staff lists and training reports from ESR to produce a gap analysis, taking into account date of last attendance and relevant update frequency.

The Education and Training team provide the relevant training service head with the number of places required to deliver the Mandatory Training Needs Analysis. It is the responsibility of the relevant training service head to provide the trainers to deliver sufficient sessions to meet needs.

7.3 Developing the Training Prospectus

The Training Prospectus is developed annually and updated as required through the year by the Education and Training team based on the Trust's approved Training Needs Analysis with dates and times of classroom based training as submitted by the trainers.

The Training Needs Analysis is approved by the Executive Committee and amendments are made as required by the Education and Training team at the direction of the Executive Committee. Any amendments required because of changes to legislation/guidelines/directives will be proposed by the subject matter experts.

The Training Needs Analysis (which may be found with the Mandatory Training Prospectus on the Education and Training page of the intranet) identifies training requirements by staff group and shows frequency updates.

7.4 Recording Completion of Mandatory Training

Appendix 5 shows recording completion of mandatory training in a flowchart.

E-learning installed into ESR automatically updates a learner's record on completion of the training. Where it fails to update because of technical reasons and certificates/evidence of completion are provided by the individual to the Education and Training team, the completion will be updated manually into the system.

If training is classroom based, the Education and Training team issues registers to the trainers. Trainers return their signed registers to the Education and Training team in the Education Centre. The Education and Training team check that all registers which have been issued have been returned and follow up with trainers via email any failure to return the signed register for their topic.

Signed registers for classroom based training are used to record completion of the training against the employee's learner record. ESR is used for reporting purposes. Gaps in training completion are identified by matching a report on training completion for the relevant topic against a staff list on active assignment with the Trust. Reports are provided to Heads of Service and Executive Committee on a quarterly basis. Annual reporting is to the Corporate Governance Steering Group.

7.5 Follow Up of Staff Who Fail to Attend or Complete Training

Staff who fail to attend for a place booked on classroom based training will be recorded as "Did Not Attend" against their staff record and an e-mail will be sent to them and their manager advising them to book another place. It is the staff member's responsibility to arrange a further date with the assistance of their manager if necessary. It is the manager's responsibility to action "Fail to Attend" e-mails and address failure to keep up to date with mandatory training.

Reports from ESR on staff list and training completions are used to identify staff still outstanding for training. Reports are provided to Heads of Service on a quarterly basis.

7.6 Persistent Non Attendance

Mandatory training is required to maintain the safety of staff, patients and visitors and the Trust regards failure to keep up to date with mandatory training as serious.

At annual appraisal managers must identify with the staff member that they are up to date with all mandatory training requirements for their role in line with the Training Needs Analysis. Managers and staff with Employee Self Service and E-learning may check the date they last attended training and their compliance on ESR. The Training Needs Analysis (which may be found on the Education and Training page of the intranet) identifies update frequency.

Appendix 6 outlines the steps to be taken in respect of persistent failure to attend mandatory training.

7.7 Contingency Arrangements

Where service pressures have prevented an individual attending training which may result in the pay increment being deferred, the manager must contact the Education and Training Team so that attempts may be made to arrange the training. If it cannot be arranged, the deferment of the individual's pay increment will be reviewed on a case by case basis depending upon the circumstances.

If managers and/or staff are unable to access training because it is not available they should inform Education and Training so this may be addressed.

8 MONITORING COMPLIANCE/EFFECTIVENESS

The organisation will monitor the following:-

Area For Monitoring	Method	Frequency	Responsibility	Monitoring Assurance Group	Lead for Developing the Action Plan	Group Responsible for Monitoring the Action Plan
Number of new starters completing corporate and local induction in the timescales identified	Workforce Report	Quarterly	Training Manager	Executive Committee	Director of Human Resources	Board of Directors
Mandatory training compliance	Workforce Report	Quarterly	Training Manager	Executive Committee	Director of Human Resources	Board of Directors

9 DISSEMINATION, IMPLEMENTATION AND TRAINING

Dissemination

Dissemination of this policy to managers will be via e-mail, through Senior Manager Forum, and via Team Brief.

Implementation

Implementation will be as soon as ratification.

Training/Awareness

Directorate Management Teams will be responsible for the training/awareness of staff in relation to this policy.

10 CONSULTATION, REVIEW AND APPROVAL/RATIFICATION

Consultation

- HR Strategy Group
- Joint Consultative Group

Review

- Three years

Approval

- Executive Committee

Ratification

- Policy Committee

11 REFERENCES

- The Agency Worker Regulations 2010

12 ASSOCIATED DOCUMENTATION

- Staff Development and Appraisal Policy
- Locum Doctor and Agency Worker Policy
- Medical Appraisal Policy
- Mandatory Training Needs Analysis
- Honorary Arrangements Policy
- Recruitment and Placement of Volunteers Policy
- Junior Doctor Mandatory Training Policy

Continuing Professional Development (CPD)

Tier 1 Funding: an undergraduate CPD framework is available to CHS healthcare professionals via regional contracts with universities.   This allows healthcare professionals to take an individualised pathway, from one module through to an entire degree, without direct cost to themselves or their directorate.

- Staff wishing to take this route will consult with their line managers who will identify the requirement as part of the annual Training Needs process.
- Managers will consider whether the module will be of benefit to the service and fit with the Directorate/Specialty business plan and Directorate Objectives, Goals, Strategies and Measures (OGSM)
- Application will be via the Education and Training team.
- Managers will review an individual's progress.

This pathway allows access to a *limited* schedule of CPD modules free of direct cost (not all modules advertised by the contracted universities are free) and staff members choosing to do identical or similar modules not covered by the contract may be liable for their own fees. It is therefore recommended that staff consult with their line manager and the Education and Training team prior to enrolment..

Tier 2 Funding: for clinical and other professional development courses and modules not included in Tier 1, the Trust has to bid for regional funding. Managers who support staff to be considered for Tier 2 funding must identify this as part of the Training Needs Process.   The aims of the course/module must fit with the Directorate's OGSM and meet the requirements of the service.

The process for identifying training needs for CPD will be via the Training Needs Process. A Training Needs Identification document is emailed by the Education and Training team to Directorate Managers annually. This information is collated by Education and Training, who provide the information to relevant trainers, if the CPD training requested can be delivered in-house. Training is advertised via the intranet. External funding not identified as part of the CPD requirements may have to be funded by Directorates.

Information in relation to CPD requirements is used by the Workforce Development and Education Manager to bid for Tier 2 funding. Managers are informed by the Workforce Development and Education Manager if bids are successful and funding is available.

The relevant universities are informed of Tier 1 requirements via Education Forums.

Minimum Content of Corporate Induction

Content

All Staff
- Introduction to CHS
- Counter Fraud Awareness
- Equality and Diversity
- Safeguarding Children and Young People
- Complaints Handling
- Risk Management
- Clinical Governance
- Information Governance
- General Health and Safety Awareness including COSHH, VDU Operation and Fire Safety
- Infection Prevention and Control
- Hand Hygiene
- Conflict Management Procedures
- Moving and Handling
- E-Mail access (and basic computer awareness if required)HR requirements: Payroll and SMART card access if applicable
- ID badge issued
- Library enrolment
- ESR training (E-Learning/Employee Self Service/Manager Self Service)
- Safeguarding Adults

Role specific

- Medicines Management
- Blood Transfusion
- Slips, Trips and Falls (patient falls)
- Basic Life Support
- MEDITECH Training

Corporate Induction Process Flowchart

HR issue dates to new starters/populate induction calendar

↓

Education and Training create matrix for induction week/print off registers

| New starter attends all induction sessions relevant to role | New starter attends Day 1 but fails to attend other sessions | New starter fails to attend Day 1 of Induction |

New starter attends Day 1 but fails to attend other sessions

↓

Line Manager and Head of Service informed

↓

Name kept on file and individual/line manager provided with new dates until full attendance achieved

New starter fails to attend Day 1 of Induction

↓

HR advised to investigate reason

↓

Re-arrange training or withdrawal of offer of employment

↓

Exception reporting to Head of Service of failure to attend

↓

If employment offer not withdrawn name kept on file until attendance achieved

Recorded against learner record

Flowchart for Local Induction (Staff with permanent, temporary or fixed term contract of employment)

Local Induction process

```
┌─────────────────────────────┐
│ Local induction check list  │
│ provided by HR (Copy        │─────────────┐
│ available on the intranet)  │             │
└─────────────┬───────────────┘             │
              │                             ▼
              ▼                  ┌─────────────────────────────┐
┌─────────────────────────────┐ │ Non completion followed up  │
│ Local induction checklist   │ │ by Education and Training   │
│ completed with line manager │ │ with line manager and       │
│ within a month of           │ │ individual                  │
│ commencing employment       │ └──────────────┬──────────────┘
└─────────────┬───────────────┘                │
              │                                 │
              ▼                                 │
┌─────────────────────────────┐                │
│ Completed checklist         │◄───────────────┘
│ forwarded to Education and  │
│ Training team for inputting │
│ into ESR.  Copy put on      │
│ individual's personal file. │
└─────────────────────────────┘
```

Completion of Training and Fail to Attend Flow Chart

Staff member identifies relevant mandatory training with manager

↓

Staff member identifies relevant training course assisted by manager if necessary

↓

Staff member enrols on the relevant course assisted by manager or Education & Training if necessary

Use Training Needs Analysis and date of last attendance on ESR via Employee Self Service if available or from Manager who will have access to the information via Manager Self Service.

Training Prospectus which is under Education & Training on the intranet identifies how the training is delivered and how to book a place or how to access e-learning.

↓ ↘

The course is e-learning.

The course is classroom based

↓

Staff member arranges with manager time and computer to complete training. (Computers and face to face help to access the training is available from the Library, Education Centre if required)

↓

Staff member books a place (with the assistance of their manager if necessary). Use the Training Prospectus (under Education & Training on the intranet) for method of booking.

Education and Training in the Education Centre will advise if necessary.

↓ ↓

Staff member completes e-learning

Learner Record on updated on ESR

Staff member attends

Staff member fails to attend

↓

Education & Training record attendance on Learner Record on ESR

Education & Training record "Did not Attend" on Learner Record on ESR and sends e-mail to staff member and manager

↓

Education & Training compile reports from ESR matching training completion reports to staff list

Staff member re-books with assistance of manager if necessary

↓

Persistent non-attendance resulting in failure to complete relevant mandatory training will be identified through appraisal (refer Appendix 6)

ACTION FOR PERSISTENT NON-ATTENDANCE

```
┌─────────────────────────────┐
│     Appraisal carried out   │
└─────────────────────────────┘
        ↙             ↘
┌──────────────────┐   ┌──────────────────────┐
│ Relevant mandatory│   │ Relevant mandatory    │
│ training completed│   │ training  NOT         │
│                  │   │ completed             │
└──────────────────┘   └──────────────────────┘
                                  ↓
                       ┌──────────────────────────┐
                       │ Unsatisfactory Appraisal  │
                       │ Recorded by selecting "No"│
                       │ against "Progress through │
                       │ Gateway"                  │
                       └──────────────────────────┘
                          ↓              ↓
                  ┌──────────────┐  ┌──────────────┐
                  │ Staff member │  │ Staff member │
                  │ completes    │  │ fails to     │
                  │ relevant     │  │ complete     │
                  │ training     │  │ training     │
                  └──────────────┘  └──────────────┘
                                          ↓
                       ┌──────────────────────────┐
        ◇              │ Manager refers to HR for  │
  Satisfactory         │ investigation &           │
  Appraisal            │ disciplinary action if    │
  Recorded in ESR by   │ necessary                 │
  selecting "Yes"      └──────────────────────────┘
  against "Progress
  through Gateway"
```

Note: For non-medical staff, deferment of increments and potential disciplinary action because of failure to complete mandatory training will be considered on an individual basis.

Medical and Dental staff should refer to the Medical Appraisal Policy on the intranet.

PLAIN ENGLISH GUIDE FOR POLICY OF TRAINING AND INDUCTION POLICY

What is the policy for?

This policy explains:-

- How we make sure everyone who works for us has the essential training they need to help them work safely.
- What is mandatory training and who does it
- Who does what to make sure people attend the training they need
- How we track training and who gets the reports
- How we work out what other training people need to do

What does the policy say?

Everyone who is starting to work for us must:-

- On the first day of work go to the Education Centre and do some essential training before going to the ward/department where they work. Their manager will then show them where things are in the department and any other training they need to do.

Everyone who already works for us must:-

- Have a meeting with their manager every year and agree what training they need to do over the next year. This is called an appraisal.
- A list of the training will be written down as a Personal Development Plan
- Go to the agreed training
- At the next appraisal meeting show certificates or other evidence that they have attended the training

Managers for staff with contracts of employment must:-

- Have a meeting with each of their staff within a month of starting and every year after that (appraisal).
- For new starters help them complete a Local Induction Checklist. Send this over to the Education Centre and put a copy on their personal file or complete it on the computer
- At appraisal agree the training for the year and a Personal Development Plan. This meeting must be recorded with a copy given to the staff member and one put in their personal file
- Make sure staff are up to date with their mandatory training and record this.
- Provide a copy of the personal development plan to the staff member and put one in their personal file
- Send people to the agreed training
- Review what was covered