STATUTORY AND MANDATORY TRAINING POLICY

South Central Ambulance Service NHS Foundation Trust
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SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST
Statutory and Mandatory Training Policy

Statutory training is required to ensure that the Trust is meeting any legislative duties. **Mandatory training** is an organisational requirement to limit risk and maintain safe working practice.

1. Policy Statement

1.1 South Central Ambulance Service NHS Foundation Trust is committed to providing a high quality service to the communities it serves and recognises that statutory and mandatory training is of vital importance to adequately protect its staff, patients and the public. It is committed to ensuring that adequate provision is made for training and for staff to be released to attend such training.

1.2 This policy describes the process that will be followed within the Trust for the identification of need and the subsequent implementation of statutory and mandatory training for ALL staff (including apprenticeships). It provides provisions for statutory and mandatory training which must be undertaken by all staff and also specific mandatory training which is relevant to other groups supporting the work of SCAS.

1.3 The Trust values of Teamwork, Caring, Professional and Innovation underpin everything we do to support our vision of saving lives and enabling patients to get the care they need.   SCAS aims to nurture a healthy culture, based on all staff demonstrating their role-relevant values-based behaviors' within their working lives. All staff are expected to model their behaviors' to support SCAS with its strategic aims to become an Employer, Partner and Provider of Choice.

1.4 This policy is designed to be read in conjunction with other Trust policies and guidelines which are relevant including:

   • Corporate Induction Policy

2. Purpose

2.1 This policy will ensure that there is a process by which all statutory and mandatory training is consistently delivered and recorded. This policy applies to all staff and others e.g. Volunteers as noted within this document.

3. Definitions

3.1 Statutory training

Statutory training is required by law or a statutory body, such as the Care Quality Commission, and has instructed the organisation to carry the training to meet legislative requirements.

For example

- Fire Safety training is required by statute: Management of Health and Safety at Work Regulations 1997, amended 1999

- Race related training is required under the Race Relations Amendments Act (2000) as interpreted by the Commission for Racial Equality

3.2 Mandatory training

Mandatory training differs from statutory training as it is usually made compulsory by the organisation to ensure their employees are competent to reduce risks, follow guidelines and comply with their policies. Employees undertake this training with the purpose of minimising risk, providing assurance against policies and to meet external standards which will ensure that:-

- Staff are able to carry out duties safely and efficiently
- To protect staff, patients and the public from harm
- To maintain competence to the required standard e.g. Care Quality Standards and the NHSLA

3.3 Some mandatory training is specific to particular groups and disciplines, and may be determined by Trust policy, government regulation and professional regulation instruction and guidelines. A Training Needs Analysis will be undertaken to determine the mandatory training requirements of the Trust. Appendix 1 gives guidance on generic mandatory training, individual departments are required to review the provision and make requests for additions, revisions or subtractions from the provision prior to the annual review.

3.4 Compliance
The Trust expects that every available member of staff will attend statutory and mandatory training as designated for their job roles according to this policy. The Trust has set compliance targets for completion of this training and will monitor this through various mechanisms including Statutory & Mandatory Integrated Workforce Plan, the Integrated Performance Review (IPR), Workforce Board and Quality & Safety Committee.

The following staff are removed from reporting statistics to reflect absolute compliance figures: Currently the total compliance figure is always calculated by excluding specific staff groups namely

- Non employed UCAS Student Paramedics
- All Inactive staff including Maternity, Adoption Leave, Sabbatical and Career breaks.
- Honorary contract holders

All bank staff, staff on sick leave and/or returning to work following any long term sickness or other absence must ensure they are up to date with statutory and mandatory training on return to work.

Percentage compliance targets will be reviewed by the Trust Execs, with "stretched targets" applied as required.

The compliance target for the Statutory & Mandatory is 95% as agreed by execs and in line with CSTF requirements.

Aspirationally the Trust will move to full Skills for Health Clinical Skills Training Framework (CSTF) for all Statutory and Mandatory subjects, which may require the compliance targets to be adjusted to ensure any new areas or levels are set correctly.

4. Duties and Responsibilities

The Trust has a duty of care to ensure that staff receive the relevant statutory and mandatory training for their job role in order to ensure their own and patient and staff safety.

Responsibility for delivering statutory and mandatory training;

4.1.1 Executive Management Team
Directors of the Trust are responsible for ensuring the requirements of this procedure are complied with within their respective directorate. This includes ensuring that required staff attendance, whether this training is provided via face to face or e-learning, are completed to the required standards, monitored and maintained. Where attendance/completion fails to meet the required targets, Directors are responsible for developing and delivering recovery plans for monitoring by the Workforce Board or Quality & Safety Committee.

The Trust Board has overall responsibility for ensuring that an effective education and training system is in place within the Trust and for meeting all statutory requirements and adhering to guidelines issued by regulated in respect of training and education

The Executive Management Team will:-

- Set organisational, directorate and departmental objectives
- Agree direction for workforce development in line with national and local agenda
- Support all directorates to achieve their learning and development objectives
- Initiate Trust-wide initiatives to meet organisational workforce development issues

4.1.2 Executive Management

The Executive Director of Human Resources (HR) & Organisational Development (OD) has overall responsibility for the development and implementation of training and education. The Executive Director of HR & OD resources chairs the Workforce Board, which reports to the Executive Management Team.

The Workforce Board will:-

Identify and initiate the direction for workforce development in line with national and local agenda.
Identity opportunity and mitigate risk to the delivery of learning and development.
Identify external initiatives that could benefit the organization's learning and development aims and objectives.

The Executive Director of Patient Care and Service Transformation has delegated responsibility for managing the development and implementation of the Trusts training and education programmes in relation to Clinical input.

4.1.3 The Assistant Director of Education has responsibility for
- Ensuring the practical implementation of the varying methods of training E-learning, face to face, workbook, etc. training programmes
- The monitoring and reporting of training compliance data
- Identifying risk to maintaining compliance
- Provide a continuous improvement plan
- Proposing recovery plans
- Present the proposed training plans for approval
- Monitor progress of training plans
- Present regular reports on completion of training against plans, including non-attendance numbers and reasons
- Identify any risk to completion of plans and attainment of Trust targets and make recommendations for action

4.1.4 The Head of Education will:
- Develop and maintain the mandatory training plan
- Identify risks to completion of plans and propose actions to remedy.
- Maintain effective liaison with all managers to ensure compliance with attendance requirements and follow up non-attendance
- Has responsibility to collating the data
- Analyses the data to identify the training needs of department, teams and staff
- Detect and action plan staff who repeatedly avoid compliance
- Ensuring training programmes are developed and delivered that are relevant to the Training Needs Analysis
- Contribute to the ongoing professional development of Trust staff

In addition the Head of Education will deputise for the Assistant Director for any duties and all reporting within the Trust.

4.1.5 The education team delivering Mandatory & Induction Training will:

- Deliver training according to the training plans within their areas.
- Record attendance and non-attendance
- Provide weekly updates on attendees to the administration team through completion of the appropriate training documentation

4.1.6 The Education Coordinator(s) Mandatory & Induction will:
- Record on a weekly basis attendees on mandatory training
- Record non-attendees and obtain reason for non-attendance
- Provide compliance updates as requested
- Provide a monthly report on compliance

4.1.7 Subject Matter Experts are responsible for
- Providing the necessary support and information for the development of training programmes Sign off of learning materials and e-learning content
- Setting various levels of compliance including frequency, content, assessment and teaching methods
- Will be responsible for random audits of the training deliver of their specialist area to ensure consistency across the trust.
- This will give support to the educators delivering these subject
- Will be able to assure our commissioners that we have checked consistency & compliance

4.1.8 Line Managers and Team Leaders are responsible for

Line Managers and Team Leaders have responsibility for ensuring that their staff attend and will proactively undertake the relevant Statutory and Mandatory training required for their role in accordance with the requirements of their role, and as described in this policy.
Attendance/completion of training will be reported regularly to the Workforce Board (see above)

The Statutory and Mandatory programme supports the identification and setting of the direction for workforce development in line with national and local agendas.

4.1.9 All Trust Executives, Line Managers and Team Leaders are responsible for proactive completion of their own and their staff undertaking Statutory and Mandatory training and will;
- Support and encourage staff completing the Statutory and Mandatory training
- Cascade the set organisational & departmental objectives to their teams
- Set and support individual objectives that are both realistic and achievable
- Promote initiatives that meet organisational workforce development issues
- Review Statutory and Mandatory compliance at Annual Appraisal
- Supporting staff to attend/complete identified training
- Following up when a member of staff has failed to attend/complete planned training
- Notifying the Mandatory Training team of reasons for non-attendance

- Identifying where additional training interventions are required for individuals outside of the mandatory training plan to ensure that all team members undertake an appraisal on an annual basis (minimum) recording Statutory and Mandatory attendance/completion
- Ensure staff are aware of their required attendance on a course or learning activity and the learning objectives they need to achieve
- Respond appropriately to staff members who do not attend planned events. Reports and reviews of non-attendees will be notified to the line manager by the Learning and Development Department
- Identify the training requirements for their staff through appraisals and with regard to the business objectives and corporate goals of the Trust

4.1.10 Individual Trust Employees are responsible for
- Attending/completing profiled training and undertaking any face to face, self-directed and e-learning included within their training plan.
- Identify own learning and development needs in line with the job specific competencies and take personal responsibility for undertaking agreed development
- Complying with the educational objectives of the organisation in addition to legislative and professional educational commitments
- Attend all Statutory and Mandatory training as required by the trust
- Take responsibility for Continued Professional Development as required
- Maintaining a portfolio of evidence of CPD activities undertaken
- Notify cancellation of any arranged course or training as early as possible to the appropriate person/s
- Ensure personal compliance with professional registration requirements

4.1.11 Responsibilities of Committees/Groups established in the Trust

Within the context of these procedures, topics that are included within the scope of Mandatory Training have been categorised into four main risk areas, within individual topics assigned to each of these four areas. The four risk areas identified are;
- Health, Safety, Fire and Security
- Clinical Care & Patient Safety
- Organisational Responsibilities
- Managerial Responsibilities

5. Responsible committees and groups

5.1 Overall Workforce Board and the Quality and Safety Committee will monitor the implementation of relevant polices and guidelines, within the Trusts governance structure. This Committee will monitor the effectiveness of policies and guidelines ensuring that the Trust Board is aware of any significant non- compliance as a result of review and audit activity. It specifically monitors performance with regards Risk Assessments and the Trust Risk Register, Complaints, Legal Claims, Health, Safety and Risk, Adverse Incidents, Risk Reports, Quality and Clinical performance and improvement, and the Board Assurance Framework. The Committee is responsible

for reviewing and ensuring that recommendations from external reports from the Care Quality Commission, NHSLA Risk Management Standard for the Provision of Pre Hospital Care and Clinical Telephone Triage in the Ambulance Service etc. are implemented.

5.2 The Workforce Board will agree priorities for education and agree the annual training plan, including statutory and mandatory training, and the methodology for delivery. The Workforce Board will receive regular reports detailing progress against the annual plan, agree action plans to mitigate risk and to address underperformance against targets.

5.3 The Clinical Review Group is responsible for the reviewing the recommendations of the clinical content of the training programmes on a regular basis, or when significant revisions are made or required, ensuring that all relevant clinical standards are maintained. The Clinical Review Group will submit documents to the Executives Committees for approval as required.

5.4 The Health, Safety and Risk Group is responsible for the reviewing the recommendations of Health and Safety content of the training programmes on a regular basis.

5.5 The Senior Education Training Group (SET) is responsible for Organisational, Managerial, Monitoring, development, revision and amendments to content of the training programme. It is the responsibility of the Senior Education Managers to regularly review the objectives, content and methods of delivery.

5.6 Responsibilities of the Education Department

5.6.1 The Education Department ("The Department") is responsible for delivering the agreed statutory and mandatory training plan in accordance with Trust work-force planning data. See Appendix 1 for the annual Training Needs Analysis.

5.6.2 The Department will ensure records of completed training are entered on to the Oracle Learning Management (OLM) System, and for undertaking regular audits of attendance and reporting the results to the Workforce Force and Quality & Safety Groups.

5.6.3 The Department will inform the member of staffs line manager when a member of staff fails to complete a course, and to re book if appropriate

5.6.4 The Department will work closely with Scheduling, Clinical and Operational management teams to ensure programmes are fit for practice and purpose, and that delivery methods of the courses is planned to support operational activity.

5.6.5 The Department will review and evaluate all statutory and mandatory training programmes as appropriate ensuring any necessary changes or improvements are managed and implemented according to Trust policy.

5.6.6 The Department will monitor Corporate Induction, and Statutory and Mandatory Training Activity, reporting as noted above.

5.7 The local Education Coordinators will ensure that they complete the relevant records, inform line managers of attendance / non-attendance, re- book staff onto courses, if appropriate, and ensure that any action plans devised by line managers are reported to the Assistant Director of Education.

5.8 Personal responsibility of staff in relation to Statutory and Mandatory training

All staff are encouraged to ensure that they are compliant with the requirements of Statutory and Mandatory Training policy, and will be supported by this Trust to do so by way of agreed stand down time in hours in addition to any face to face practical training to allow individuals opportunity to achieve compliance with e-learning however, non-compliance with this policy by the personal action of staff, as identified by Line Managers, at personal appraisal or by identification via the Learning Management System, will be monitored and reported to Workforce Board or to the Quality and Safety Committee.

The relevant Nodal/Department Managers will be informed by the Education Department Coordinators and are then required to devise action plans to be implemented to rectify this and to inform the Educations Department of these actions.

5.9 Professional Registration and Continuing Professional Development

5.9.1 Individual members of staff are required to maintain personal professional accreditation and hold responsibility for ensuring that they personally maintain their registration and are responsible for their own learning.

6. Methods of teaching
6.1 The term training methods is used to describe a variety of teaching methods including faceto-face (classroom based training), E-learning, Video Casting (Youtube etc), Coaching (small numbers such as an Operational teaching) and Workbooks. An overview of the variety of methods of learning used to support Statutory and Mandatory Training delivery within the Trust is highlighted below.

6.2 Classroom-based training
This is one of a number of methods that will be used in the delivery of mandatory training and awareness. It is acknowledged that classroom-based training has its place in providing initial training in new topics, but there are more effective methods available to provide both general awareness and updates.

6.3 E-learning

National (000) and Local (195) E-learning is now available for all staff to use. This works alongside the national NHS e-learning system. These e-learning systems currently have programme available covering a range of topics identified in the TNA.

6.4 Workbooks
Workbooks are effective methods of targeting refreshers, awareness and learning towards individuals, allowing them to absorb information at their own pace. These maybe used to augment other forms of learning.

6.5 Bulletins
Bulletins, newsletters and station notices will be used to provide refreshers/updates for staff as a reminder of core principles and key duties.

6.6 Observation of Practice
The most effective way of ensuring competence and appropriate application of skills and knowledge is through the direct observation and supervision of practice. As the Trust develops its Clinical Leadership structures, the opportunity to provide for direct observation of staff will be explored.

7. Identification of Training Need New and Existing Employees

Staff newly appointed (internal or external) into core operational/patient contact roles will undertake a period of core induction training to develop them into their roles (this applies to both new starters and staff transferring from other areas of the Trust). These training programmes cover all practical and theoretical skills required for the roles; includes mandatory training relevant to the roles; includes the corporate induction requirements; and individuals will be required to demonstrate competence across all areas.

7.1 New employees

New staff are required to attend the Trusts Corporate Induction training programme as described in the Corporate Induction Policy. On completion of the Corporate Induction training the member of staff (and volunteers) are then required to undertake the local induction training (as described in the Corporate Induction Policy and as appropriate to their job role). During the local induction period their line manager will identify any additional mandatory training which was not covered in the Corporate Induction and ensure that the member of staff completes this training before they are signed off as competent to work.

7.2 The Assistant Director of Education will ensure that all relevant documentation which records that statutory/ mandatory has been completed is recorded onto the member of staffs training records.

7.3 Existing Employees

7.3.1 The E-learning ECARS System alerts all staff and managers of the dates statutory and mandatory training covered by e-learning is required by individual members of staff. Employees can check their own learning history on their e-learning accounts and undertake training as required using the Electronic Staff Records.

7.3.2 The Education Department will liaise with Operational Scheduling or appropriate line managers to ensure staff attend as required the 'formal' Statutory and Mandatory training, including Face to Face training.

7.3.3 Managers must review every employee's statutory and mandatory training record using the ECARS system at their annual appraisal and ensure that all relevant documentation to show that the required statutory/ mandatory training has been completed and recorded onto the member of staffs training records. Should any member of staff not have completed their training the line manager will devise an appropriate timetable and action plan to ensure the member of staff attends the relevant statutory and/or mandatory training as soon as possible.

7.4 The practical implementation of Statutory and Mandatory training by this Trust

- Will make certain that the Statutory and Mandatory training it provides ensures the following:-
- It champions the importance of Statutory and Mandatory training at all levels
- It ensures that an effective system of Statutory and Mandatory training is in place for all staff, appropriate to the needs and requirements of the roles they undertake
- It identifies any gaps in the availability or provision of Statutory and Mandatory training and reports this to the appropriate committee and takes appropriate remedial action to rectify any omissions
- It ensures that appropriate and relevant records are kept of Statutory and Mandatory training activities and arrangements, all training records are kept electronically on the Learning Management System
- It ensures that Statutory and Mandatory training is actively supported within the Trust and that all staff are provided with sufficient and appropriate protected time to enable them to undertake mandatory and essential training
- It links systems of Statutory and Mandatory training to Governance and CPD

8. Identification of the training needs of all permanent staff

8.1 The designated subject matter expert will undertake a review of the provision it makes of statutory and mandatory training on an annual basis (see below). The Education Department will liaise with all departments to ensure that individual professional groups receive the training and support they require to perform their duties safely and effectively. The Education Department will produce a Training Needs Analysis (TNA) annually which will inform the statutory and mandatory training programme for that year and will form part of the training prospectus. See Appendix 2, 3 and 6 for details of the process.

8.2 The individual departments will consider the following when reviewing the training needs of their staff

8.2.1 The information they have drawn from staff appraisal undertaken that year

8.2.2 The departmental business plans

8.2.3 Any government initiative or statutory / mandatory requirement from the Department of Health or other Government body which affects the operation of their department

8.2.4 Requests by individual departments for additions, revisions or subtractions from the prospectus following their review of the provision are made to the Education Department. The Senior Education Managers responsible for various areas will evaluate each request against the objectives of the Trust for the coming year.

For the full current list see Appendix 1

9. Delivery of the identified training

The Statutory and Mandatory Integrated Workforce Plan group will consider the training needs of the Trust and will amend accordingly which will be reviewed, approved and agreed by the Workforce Board when appropriate.

10. Mandatory Training - Attendance, Recording and Reporting

10.1 Attendance
For statutory and mandatory training attendance days, Scheduling Manager will be responsible for allocating staff to training dates. This may be done in practice by other members of the Scheduling team and the Trust of 'booking' electronically will be explored.

The trainer delivering each session will ask attendees to sign an individual learning log for each day, which includes the learning outcomes.

10.2 For non-attendance or partial attendance on planned courses a number of actions will be taken.

10.2.1 The booker will be notified of any non-attendance and/or partial attendance and will be asked to ascertain the reason for this.

10.2.2 The booker will be responsible for re-allocating the individual to another course date.

10.2.3 Monthly attendance reports will include numbers of non-attendees along with the reason given.

10. 3 Training Records.

10.3.1 The Mandatory Trainers will maintain records of attendances on programmes that they have delivered and these will be communicated to the administration team.

10.3.2 The Training Coordinators will hold all of the Trust's Oracle Learning Management (OLM) primary records of statutory mandatory training completion.

10.3.3 The Training Coordinators will also update the Trust's Oracle Learning Management System (OLM) with details of attendances, to ensure that completion of training is linked to the individual's electronic staff record.

10.3.4 The Education Department will hold the master copy of each mandatory training programme. Where changes are made mid-programme, the Manager will ensure that the change is authorised by an appropriate Subject Matter Expert, Workforce Board and will maintain a change control log.

10.4 The Education Department Coordinators maintain the staff training records electronically on the Learning Management System. This database is linked to the Electronic Staff Record (ESR) which ensures that every permanent member of staff is entered onto the Learning Management System.

10.5 The principle reporting tool for all Executives, Senior Managers, Team leaders and Staff is
ECARS

10.6 The LMS is updated regularly by the Education Department Coordinators to ensure accuracy. The Education Department ensure timely update of all training attended at the earliest appropriate time.

11. Monitoring

11.   1 The Education & Organisational Development Department is responsible for coordinating the review of this procedure on a two yearly basis.

11.2   The Senior Education Manager for Assurance, Statutory & Mandatory Education is responsible for assuring the quality of delivery of all training, through a robust annual quality assurance process.

11.3   Monitoring of this policy will be undertaken by the Assistant Director of Education on an annual basis who will:-

- Ensure that accurate records are maintained detailing the number and percentage of staff completing mandatory and essential training in the year.
- Ensure accurate reports for the Executive Management Team of staff meeting the compliance standard as specified.
- Review the process for non-compliance and recommend actions.
- Review the content of the training programme on an annual basis to ensure it complies with the TNA, as agreed by the Trust.

11.4   Identified issues will be presented to the Statutory & Mandatory Integrated Workforce Plan (IWP), the Clinical Review Group or Health, Safety & Risks depending of subject, attendance problems action plans, which will be reviewed and monitored by the Workforce Board. Exception reports will be provided by the Quality and Safety Committee.

11.5   Uptake of Statutory and Mandatory training by all staff is recorded on the Oracle Learning Management System and will be reported to the Board via Quality and safety Committee. The Departments recorded as showing greater than 5% adverse compliance over a one period will be required to produce an action plan to address the situation.

12. Review

This policy will be reviewed every three years or sooner in the light of any changes in the law or guidance from the GMC, HCPC, NMC, etc., and national and professional standards and guidelines to which the Trust must adhere.

In advance of the review date, the Education team will review and produce recommendations which will be shared via the recognised policy approval process (HR Policy Review Group) in time for the policy review date. An early review can be triggered by the Trust Board, Education or joint staff side if they have serious concerns about the policy or its implementation.

13. Equality Statement

The Trust is committed to promoting positive measures that eliminate all forms of unlawful or unfair discrimination on the grounds of age, marriage and civil partnership, disability, race, gender, religion/belief, sexual orientation, gender reassignment and pregnancy/maternity or any other basis not justified by law or relevant to the requirements of the post. The Trust will therefore take every possible step to ensure that this procedure is applied fairly to all employees regardless of the aforementioned protected characteristics regardless of length of service, whether full or part-time or employed under a permanent or a fixed-term contract or any other irrelevant factor.

By committing to a policy encouraging equality of opportunity and diversity, the Trust values differences between members of the community and within its existing workforce, and actively seeks to benefit from their differing skills, knowledge, and experiences in order to provide an exemplary healthcare service. The Trust is committed to promoting equality and diversity best practice both within the workforce and in any other area where it has influence.

Where there are barriers to understanding; e.g. an employee has difficulty in reading or writing, or where English is not their first language, additional support will be put in place wherever necessary to ensure that the process to be followed is understood and that the employee is not disadvantaged at any stage in the procedure. Further information on the support available can be sought from the HR Department.

Appendix 1: Annual Training Needs Analysis

Summary

This section of the document outlines the Trust's commitment to the professional development of its workforce, and across all levels and disciplines. The aim is to ensure that South Central Ambulance Service has a workforce that is fit for purpose, and can deliver the objectives of the business plan, and to deliver a high quality service to patients' and their families.

The annual training plan is designed to meet the needs of staff based on corporate need, divisional need and as a result of individual appraisal linked to the appraisee's core competencies needed for his/her job.

Training	Trust SME	SCAS Sign-off Group	Who	Level	Frequency	Teaching method	Competency Used
Infection, prevention & Control	Internal	Clinical Review Group	All staff	Level 1	Induction	Face to face	NHS|CSTF|Infection Prevention and Control - Level 1 - 3 Years
Infection, prevention & Control	Internal	Clinical Review Group	All staff	Level 1	Every 3 years	E-learning	NHS|CSTF|Infection Prevention and Control - Level 1 - 3 Years
Infection, prevention & Control	Internal	Clinical Review Group	All 999 & NEPTS	Level 2	Every 1 year	E-learning	NHS|CSTF|Infection Prevention and Control - Level 2 - 1 Year
Fire	External	Health, Safety & Risk	All staff	Not applicable	Induction	Face to face	NHS|MAND|Fire Safety - 1 Year
Fire	External	Health, Safety & Risk	All staff	Not applicable	At least annually	e-learning	NHS|MAND|Fire Safety - 1 Year|
Information Governance	Internal	Information Governance Steering Group	All staff	Not applicable	Induction	Face to face & E-learning	NHS|MAND|Information Governance - 1 Year
Information Governance	Internal	Information Governance Steering Group	All staff	Not applicable	Annually	e-learning	NHS|MAND|Information Governance - 1 Year
Safeguarding Adults	Internal	Clinical Review Group	All staff	Level 1 & 2	Induction	Face to face	NHS|MAND|Safeguarding Adults Level 1 - 3 Years
Safeguarding Adults	Internal	Clinical Review Group	All staff	Level 1	Every 3 years	e-learning	NHS|MAND|Safeguarding Adults Level 1 - 3 Years
Safeguarding Adults	Internal	Clinical Review Group	All 999, NEPTS & CCC	Level 2	Every 3 years	Face to face & e-learning	NHS|MAND|Safeguarding Adults Level 2 - 3 Years
Safeguarding Children	Internal	Clinical Review Group		Level 1 & 2	Induction	Face to face	NHS|CSTF|Safeguarding Children (Version 2) - Level 1 - 3 Years
Safeguarding Children	Internal	Clinical Review Group	All staff	Level 1	Every 3 years	e-learning (level 1)	NHS|CSTF|Safeguarding Children (Version 2) - Level 1 - 3 Years
Safeguarding Children	Internal	Clinical Review Group	All 999, NEPTS & CCC	Level 2	Every 3 years	Face to face & e-learning	NHS|CSTF|Safeguarding Children (Version 2) - Level 2 - 3 Years
Conflict Resolution	External	Health, Safety & Risk	All staff	Level 1&2	Induction	Face to face	HS|MAND|Conflict Resolution - 3 Years
Conflict Resolution	External	Health, Safety & Risk	All staff	Level 1	Every 3 years	e-learning (level 1)	NHS|MAND|Conflict Resolution - 3 Years

Training	Trust SME	SCAS Sign-off Group	Who	Level	Frequency	Teaching method	Competency Used
Conflict Resolution	External	Health, Safety & Risk	All 999 & NEPTS	Level 2		Face to face (Level 2)	NHS|MAND|Conflict Resolution - Physical Intervention Skills - 3 Years|
Adult	Internal & Medical Director	Clinical Review Group	All staff	Level 1	Induction	Face to face & E-learning	NHS CSTF
Paediatric & Newborn			All 999, NEPTS & CCC	Level 2			NHS CSTF
Paediatric & Newborn			All 999 & Clinical Managers	Level 3			NHS CSTF
Adult			All 999, NEPTS & CCC	Level 2	Annually	Face to face & E-learning	NHS CSTF
Adult			All 999 & Clinical Managers	Level 3			NHS CSTF
Paediatric & Newborn			All 999, NEPTS & CCC	Level 2	Annually	Annual E-learning & F2F 2 yrs	NHS CSTF
Paediatric & Newborn			All 999 & Clinical Managers	Level 3	Annually	Annual E-learning & F2F 2 yrs	NHS CSTF
Moving & Handling	External	Health, Safety & Risk	All staff	Level1 & 2	Induction	Face to face	NHS|MAND|Moving and Handling - 3 Years
Moving & Handling			All staff	Level 1	Every 3 years	e-learning	NHS|MAND|Moving and Handling - 3 Years
Moving & Handling			All 999 & NEPTS	Level 2		Face to face	NHS|MAND|Moving & Handling for People Handlers - 3 Years
Equality & Diversity	Internal	Workforce Board	All staff	Not applicable	Induction	Face to face	NHS|CSTF|Equality, Diversity and Human Rights - 3 Years
Equality & Diversity			All staff	Not applicable	No statement	E-learning	NHS|CSTF|Equality, Diversity and Human Rights - 3 Years
Health, Safety & Risk	Internal	Health, Safety & Risk	All staff	Not applicable	Induction	Face to face	NHS|MAND|Health and Safety - 3 Years
Health, Safety & Risk			All staff	Not applicable	Every 3 years	E-learning	NHS|MAND|Health and Safety - 3 Years

Training   Mental Health
SCAS Sign off Group   Clinical Review Group
Who   Patient Facing Staff
Frequency SCAS   Induction and Every 3 Years

Training   Dementure
SCAS Sign off Group   Clinical Review Group
Who   Corporate Staff
Frequency SCAS   E-Learning
Who   Patient Facing Staff
Frequency SCAS   Every 3 years

Training   End of Life
SCAS Sign off Group   Clinical Review Group
Who   Patient Facing Staff
Frequency SCAS   Induction and Every 3 Years

Training   Learning Disabilities
SCAS Sign off Group   Clinical Review Group
Who   Patient Facing Staff
Frequency SCAS   Induction and Every 3 Years

Training   Personalised Care
SCAS Sign off Group   Clinical Review Group
Who   Patient Facing Staff
Frequency SCAS   Induction and Every 3 Years

Training   Making Every Contact Count (MECC)
SCAS Sign off Group   Clinical Review Group
Who   Patient Facing Staff
Frequency SCAS   Induction and Every 3 Years

The training currently considered by this Trust as Statutory to all staff includes:-

- Conflict Resolution (Level 1) Staff
- Equality, Diversity & Human Rights
- Fire Safety
- Health & Safety
- Infection, Prevention & Control including Hand Hygiene (Level 1)
- Information Governance
- Moving and Handling
- Safeguarding of Children (Level 1)
- Safeguarding Adults (Level 1)
- Preventing Radicalisation
- Resuscitation (Level 1)
- Dementia Awareness

In addition all patient facing staff in either front line 999 and Non-Emergency Patient Transport Services will undertake the above Statutory education (in line with individual competence requirements) plus:

- Conflict Resolution (Level 2)
- Infection Control (Level 2)
- Moving & Handling (Level 2)
- Safeguarding of Children (Level 2 &3)
- Safeguarding Adults (Level 2&3)
- Resuscitation (Level 2)
- In addition all 999 Clinicians must undertake Resuscitation Level 3

The training considered by this Trust as Mandatory from April 2019 onwards for relevant staff includes:-

- Driving Standards
- Mental Health
- End of Life care
- Learning Disability
- Person Centered Care (Care Certificate)

Appendix 2: References

References and Reading Trust policies

- SCAS Infection Control Policy (including Hand Hygiene) SCAS Minimal Lifting Policy (Moving and Handling) SCAS Child & Vulnerable Adults Policy
- SCAS Slips Trips and Falls Policy SCAS Paediatric Care Policy SCAS Obstetric Care Policy SCAS Resuscitation Policy
- SCAS Adverse Incident and Investigation Policy SCAS Violence and Aggression Policy
- SCAS Medicines Management Policy
- SCAS Clinical Supervision in Training Policy SCAS Complaints Policy
- SCAS Claims Policy
- SCAS PALS Policy SCAS Corporate Induction Policy SCAS Information Governance Policy

Guidelines and Standards

- Association of Ambulance Chief Executives (AACE) UK Ambulance Services Clinical Practice Guidelines (2013). (Formally known as JRCALC) and subsequent guideline revisions
- NMC Guidelines
- NHSLA Risk Management Standard for the provision of Pre Hospital Care in the Ambulance Service
- Health Protection (Notification) Regulations (2010) Health Act (2009)
- Health and Social Care Act (2008)
- College of Paramedics (2008) Paramedic Curriculum Guidance and Competence Framework Health Professions Council (2005), Standards of Proficiency
- Institute of Health and Care Development Paramedic Syllabus (2005)
- Department of Health (June 2007) The Competence and Curriculum Framework for Emergency Care Practitioner, Skills for Health Delivering the NHS Plan (2002) Department of Health Improving Working Lives (2002) Department of Health

Statutory and Mandatory Legislation

Statutory and Mandatory training covers the core skills identified by Skills for Health and the requirements of the NHSLA, CQC etc as identified below:-

Fire Safety and Awareness

- Legislation: The Regulatory Reform (Fire Safety) Order 2005 Expert Guidance
- FIRECODE HTM 05
- DCLG Guide (Green Guide) for Healthcare Premises Expert Organisation

- National Association of Healthcare Fire Officers (NAHFO) SCAS SME
- Risk Department
- Fire safety awareness training is an annual requirement for all grades of staff

Equality, Diversity and Human Rights

- Legislation: Human Rights Act 1998
- Equality Act 2010 Key Guidance
- NHS Constitution Equality Delivery System
- Knowledge and Skills Framework
- Equality Race Commission
- Department of Human Rights in Healthcare Expert Organisation
- Equality and Human Rights Commission (England and Wales) The NHS Centre for Equality and Human Rights

Conflict Resolution

- Expert Guidance
- Tackling Crime against the NHS: a Strategic Approach
- A Professional Approach to Managing Security in the NHS Expert Organisation
- NHS Protect
- Bill Fox, Maybo under license SCAS SME

Infection Prevention and Control

- Legislation: Health and Safety at Work Act 1974
- The Control of Substances Hazardous to Health Regulations 2002 Public Health (Control of Disease) Act 1984
- Health and Social Care Act 2008 Health Act 2009
- The Health Protection (Notification) Regulations 2010 Key Guidance
- Infection Control: Prevention and control of healthcare-associated infection in primary and community care (National Institute for Clinical Excellence) (2012)
- Pratt RJ, Pellowe CM, Wilson JA, Loveday HP, Harper PJ, Jones SRLJ, McDougall C, Wilcox MH. epic2: National Evidence-Based Guidelines for Preventing Healthcare-associated Infections in NHS Hospitals in England. Journal of Hospital Infection January 2007;65(1): supplement 1: S1- 69
- Code of Practice on the prevention and control of infection and related guidance (Dec 2010) (file updated 31st Jan 2011)
- Expert Organisations Infection Prevention Society
- Healthcare Infection Society
- National Resource for Infection Control Health Protection Agency (England) World Health Organization

Moving and Handling

- Health and Safety at Work etc Act 1974
- The Manual Handling Operations Regulations 1992
- Reporting Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR) 1995 Lifting Operations and Lifting Equipment Regulation (LOLER), 1998
- Management of Health and Safety at Work Regulations, 1999 Provision and Use of Work Equipment regulations (PUWER), 1998 The Health and Safety (Miscellaneous Amendments) Regulations 2002 Expert Guidance
- The Guide to the Handling of People (HOP 6 edition). Backcare: London
- Ruszala, S et al. (2010). Standards in Manual Handling, (3rd edition). National Back Exchange: Towcester
- Health Safety Executive the Manual Handling Operations Regulations 1992 (as Amended 2002) Health Safety Executive. Getting to grips with manual handling
- ISO Technical Report 12296 Ergonomics – Manual Handling Of people in the Health Care Sector Expert Organisation
- The Health and Safety Executive (HSE) National Back Exchange

Safeguarding Adults

- Human Rights Act 1998
- Public Interest Disclosure Act 1998 Data Protection Act 1998
- Freedom of Information Act 2000 Mental Capacity Act 2005
- NHS Act 2006
- Safeguarding Vulnerable Groups Act 2006
- The Mental Capacity Act Deprivation of Liberty Safeguards Equality Act 2010
- Expert Guidance
- No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse, Department of Health 2000
- Clinical governance and adult safeguarding: an integrated process Department of Health 2010
- Safeguarding Adults: The role of health service managers and their boards Department of Health 2011
- National Competence Framework for Safeguarding Adults (Bournemouth University) Care Quality Commission: Our Safeguarding Protocol
- Safeguarding adults at risk of harm: A legal guide for practitioners Social Care Institute for Excellence

Safeguarding Children

- United Nations Convention of the Rights of the Child 1989 Children Act, 1989
- Children Act, 2004
- Children and Young Persons Act 2008 Protection of Freedoms Act 2012 Expert Guidance

- Safeguarding Children and Young people: roles and competences for health care staff. Intercollegiate Royal College of Paediatrics and Child Health (2010)
- Safeguarding Children and Young People: A toolkit for General Practice, Royal College of General Practitioners (2011)
- National Competence Framework for Safeguarding Children
- General Medical Council (2012) Protecting Children and Young People: The responsibilities of all doctors. General Medical Council
- Looked after children: knowledge, skills and competence of health care staff. Intercollegiate Report Published by Royal College of Nursing and Royal College of Paediatrics and Child Health (2012)
- National Institute for Health and Clinical Excellence (2009) When to suspect child maltreatment. National Institute for Health and Clinical Excellence
- HM Government (2010) Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children 2010 London: DSCF
- Department of Education (2012) The Munro Review of Child Protection: a child-centered system (2012)
- Report of the Children and Young People's Health Outcome Forum (2012) Office of the Children's Commissioner
- Intercollegiate Royal College of Paediatrics and Child Health (2010);

Resuscitation

- Policy Guidance: HSC 2000/028: Resuscitation Policy
- Resuscitation Council 2010 Resuscitation Guidelines
- Cardiopulmonary Resuscitation – Standards for clinical practice and training Joint Statement Decisions relating to cardiopulmonary resuscitation. A joint statement from the British Medical Association, the Resuscitation Council (UK) and the Royal College of Nursing
- General Medical Council Treatment and care towards the end of life: good practice in decision making (2010) General Medical Council
- Expert Organisation Resuscitation Council (UK)

Information Governance

The Data Protection Act 1998
The Freedom of Information Act 2000The common law duty of confidentiality in accordance with relevant Case Law Expert Guidance
NHS Information Governance Toolkit (IGT)
Information Security Management: NHS Code of Practice Confidentiality: NHS Code of Practice
Records Management NHS Code of Practice (Parts 1 and 2)
The Care Record Guarantee Our Guarantee for NHS Care Records in England, The NHS Constitution Information Governance Assurance: Joint Letter from Department of health and Information Commissioner's
Office (2011)

Management of Health, Safety and Risk at Work Regulations 1997, amended 1999
Race Relations Amendments Act (2000) as interpreted by the Commission for Racial Equality

Equality impact assessment - screening

Employees exercising their rights and entitlements under the regulations will suffer no detriment as a result.

The Screening element of the 'Equality Impact Assessment' is available on request.

Equality impact assessment – full assessment

Employees exercising their rights and entitlements under the regulations will suffer no detriment as a result.

A full 'Equality Impact Assessment' is available on request.