

# INDUCTION, MANDATORY AND ESSENTIAL TRAINING POLICY

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<b>VERSION NUMBER:</b>	2
<b>AUTHOR:</b>	Workforce Development Lead
<b>CONSULTATION GROUPS:</b>	Workforce Planning and Organisational Development Group/Workforce Development Strategy Group Clinical Governance and Quality SMT/Committee Joint Consultative Committee Clinical Board Health Safety and Security Committee/Risk Management Mandatory Training Leads Medical Director ESR Leads HR Work stream
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<b>POLICY SUMMARY</b>	
<p>The policy sets out the responsibilities for the delivery, completion and monitoring of corporate induction, local induction mandatory and essential training. It covers timescales, notifications and the appendices cover the required components. It applies to all staff, including Bank and Agency workers.</p>	
<b>The Trust monitors the implementation of and compliance with this policy in the following ways;</b>	
Through monthly monitoring of compliance figures and regular internal audits	

<b>Services</b>	<b>Applicable</b>	<b>Comments</b>
Trustwide	✓	

**The Director responsible for monitoring and reviewing this procedure is  
Executive Director Mental Health and Deputy CEO**

**ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST**

**INDUCTION/MANDATORY AND ESSENTIAL TRAINING POLICY**

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SAMPLE - DO NOT USE

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**INDUCTION, MANDATORY AND ESSENTIAL TRAINING POLICY**

**Assurance Statement**

The purpose of this policy is to ensure that the Trust's workforce receive the required training components as set out and agreed by the organisation. This policy also covers corporate induction training for new starters and local workplace induction. This policy will provide a systematic approach to the structure and monitoring of induction mandatory and essential training. The curriculum is based on relevant statutory guidelines and regulations

The purpose of this policy is to reinforce the Values of the Trust in order to deliver our Core Principles in line with the Clinical / Corporate Governance agenda. The management and staff of EPUT agree to follow this policy and the associated procedural guidelines for staff induction, mandatory and essential training requirements.

**1.0 INTRODUCTION**

- 1.1 The Trust recognises the importance of Corporate Induction, and Mandatory/Essential Training to assist staff in maintaining a safe working environment and ensuring that our service users receive a quality service.
- 1.2 Induction and Mandatory/Essential Training is a dual responsibility shared by the staff member and their line manager. The individual's responsibility is to ensure that they attend mandatory/essential training; the manager's responsibility is to enable this to happen. The role of the Workforce Development and Training Department is to assist in this process by providing tools such as checklists, organising courses, and monitoring and reporting on compliance.
- 1.3 The Trust is committed to releasing staff from duties to attend their Induction/ Mandatory/Essential Training requirements.
- 1.4 All Trust staff and managers will have access to data to enable them to check their individual and their team's compliance.
- 1.5 Mandatory/Essential Training updates for existing staff must be attended according to the timings specified in the Training Needs Analysis chart (Appendix 1a and 1b) of the procedural guidelines. Some updates will be delivered through e-learning packages. Compliance targets have been set for all Mandatory/Essential Training:

90% Safeguarding  
90% TASI Training  
90% Inpatient Fire safety  
85% all other Mandatory Training

Mandatory training should be seen as the top priority for completion but all elements of the training outlined in this policy should be seen as required training and compliance will be monitored.

## **2.0 DUTIES**

- 2.1 The Mandatory Training Administrators will pre-book all Mandatory/Essential Training for all new starters, and will also send out reminders for Mandatory/Essential Training updates. Medical staff can contact the Medical Education Manager for assistance
- 2.2 Staff and managers are responsible for ensuring compliance timescales are adhered to, when training is requested.
- 2.3 It is the responsibility of the Mandatory Training Administrators to inform of any capacity issues that arise when booking staff on courses.
- 2.4 Human Resources will be responsible for notifying the Mandatory Training Administrators of all new starters. Human Resources and the Mandatory Training Administrators will work together to send pre-booked training dates to all new starters and their managers. All mandatory/essential training must be completed within the first 12 weeks of employment; extenuating circumstances can be taken into consideration.
- 2.5 The Mandatory Training Administrators will be responsible for providing the statistics relating to Mandatory/Essential Practice Training by the 5<sup>th</sup> working day of each month.
  - 2.5.1 Staff who do not complete a Mandatory/Essential course will receive notification from the Mandatory Training Administrators, informing them and their managers of their non-compliance with mandatory/essential training. It is the Line Manager's responsibility to ensure training is re-booked.
  - 2.5.2 Action will be taken by Workforce Development and Training to notify relevant corporate departments about repeated DNAs.
- 2.6 Line Managers will ensure that staff attend the appropriate Mandatory/Essential Training & update courses relevant to their area of work, as set out within this guidance and the training needs analysis (Appendix 1 a and 1 b).
- 2.7 Line Managers will monitor the Mandatory and Essential requirements of the staff working within their areas through supervision/ appraisal and the compliance lists
- 2.8 The individual is responsible for the completion of their identified Mandatory/Essential Training requirements and the subsequent updating of their skills in accordance with this guidance.
- 2.9 The individual is responsible for ensuring they sign any attendance register at face to face Mandatory/Essential Training sessions.

- 2.10 All Staff will also complete the local workplace induction in accordance with procedural guidelines.
- 2.11 The process of delivering and monitoring Corporate Induction, Mandatory and Essential Training will be coordinated by the Workforce Development and Training Department.
- 2.12 The Workforce Development and Training Department is responsible for the annual review of mandatory and essential training and the updating of the appendices. When amendments are made all staff will be notified.
- 2.13 All staff should complete a course evaluation form.
- 2.14 The Workforce Development and Training Department is responsible for ensuring that all Mandatory/Essential training is provided by suitably qualified staff. This will include the validation of credentials of all trainers prior to engaging them to deliver mandatory training.
- 2.15 All external providers of Mandatory/Essential training must be registered on the database held by Workforce Development and Training.
- 2.16 Managers are responsible for creating an appropriate risk assessment for any staff who are unable to complete any training requirements. For on-going issues, the risk assessment should be repeated after 6 months and a decision taken as to whether this course should be removed from their curriculum.
- 2.17 If managers feel an additional skill or course is required by a staff member outside the mandatory/essential requirements a study leave request will need to be made by the staff member in the normal study leave process. This is to ensure capacity is available for non-mandatory needs.
- 2.18 It is the manager's responsibility to ensure compliance if they have classified as training as 'required' by a member of staff and it is not classified as mandatory or essential within the policy. The staff member will not be added to the training tracker and the manager takes responsible for ensuring updates are completed.

### **3.0 DEFINITIONS**

#### **3.1 Mandatory**

Mandatory Training can be defined as a statutory or legal obligation. It is required in order for the Trust to meet Health and Safety legislation and other relevant guidance. (Appendix 1a)

#### **Essential**

Additional training needs as determined by the outcome of risk assessments for the relevant staff groups (Appendix 1b).

### 3.2 Corporate Induction

This is a three part process which consists of a face to face corporate induction to the Trust; this is followed by an e-learning induction programme and local workplace induction. Staff must complete all parts of this process within the first 3 months with corporate induction within the first 2 weeks of employment within the Trust.

### 3.3 Local workplace induction

Permanent staff – The local workplace induction (Appendix 2) is a checklist designed to introduce the new member of staff to their workplace. Completion of the checklist can take up to a week and incorporates health and safety guidance, communication systems and local policies and procedures. Medical staff need to complete their checklist.

Locum, bank and agency staff – The local workplace induction checklist (Appendix 3) is intended to take between 15 and 30 minutes to complete and must be completed at the beginning of the shift. It includes orientation to the workplace and general responsibilities and duties, including those under health and safety guidance. It should be completed if 3 months or more has elapsed since the individual worked at that base.

### 3.4 Junior Doctors assessment of competency

Assessment of competency checklists must be completed for all junior doctors within the first week of each new placement and before completing their first on-call. (Appendix 4). This checklist will record the acquired skills and competence of the doctor to date. Learning needs must be identified by the supervisor and junior doctor.

## **4.0 PRINCIPLES**

- 4.1 Mandatory and essential training requirements will be linked to service needs.
- 4.2 All training within the Trust is provided in line with the Policy on Equality and Inclusion. Where an individual member of staff has been assessed by Occupational Health as having a disability which impacts on their ability to complete Mandatory/Essential Training, reasonable adjustments will be made in line with the Trust policy on Disability in Employment. If any member of staff has additional learning needs to enable them to complete training they should contact the Workforce Development and Training Department for help and advice.
- 4.3 Exemption from a Mandatory/Essential training component on any grounds, whether this is temporary or long term, will need to be discussed with the line manager and agreed with the Service Director. Exemption will not be detrimental to present or future employment (in line with the Sickness Absence Policy and the Equality & Diversity Policy).

- 4.4 If staff members do not attend the required Induction / Mandatory/Essential training requirements (other than where an agreement has been made with the Line Manager and Service Director) as set out within this policy, this may be addressed under the Trust's Conduct and Capability Policy.
- 4.5 Applications for study leave or extended study leave should not be submitted or authorised by line managers unless all Mandatory and Essential Training is up-to-date,
- 4.5.1 Where a member of staff is unable to attend an element of Mandatory/Essential Training, due to staffing or work related issues within the clinical area, this will always be counted as a DNA if it falls within two weeks of the course commencement.
- Only the Director of the service can give exemption to a member of staff, if the staff member's health status, (e.g. pregnancy) precludes them from completing an element of Mandatory/Essential Training.
- 4.5.2 A manager will not prevent a member of staff from attending Mandatory/Essential Training courses unless in exceptional circumstances. If this does occur the manager is required to submit written rationale for this action to their Director. The individual has the right to seek advice from the Human Resources Directorate or their union / professional body. Applications by that individual for study / extended study leave will be considered as per normal providing written explanation is submitted.
- 4.6 This policy should be read in conjunction with the Training and Study Leave Policy.
- 4.7 Any formal, non-mandatory courses delivered by EPUT staff should be notified to Workforce Development and Training so that attendance can be monitored, trainer credentials verified and quality assurance put in place. It is the responsibility of the trainers delivering the training to make the notification and provide this information.

## **5.0 MONITORING OF IMPLEMENTATION AND COMPLIANCE**

- 5.1 The effectiveness of the Policy and these Procedural Guidelines will be monitored by Workforce, Development and Training. Monitoring will include the production of monthly training reports including statistical information on compliance, DNAs, cancellations etc. to circulate to the appropriate committees within the Trust. Regular audits will also be undertaken.

## 6.0 POLICY REFERENCES / ASSOCIATED DOCUMENTATION

- Health and Safety at Work Act (1974)
- The Management of Health and Safety at Work Regulations 1999
- Resuscitation Council Guidelines
- Equality Act 2010
- Manual Handling Operations 1992
- Food Hygiene
- Fire Safety
- Information Governance and Data Protection Act
- Freedom of Information Act
- The Health and Social Care Act 2008 - Code of Practice on the prevention and control of infections and related guidance
- NICE Guidance
- Nursing and Midwifery Council Code of Practice
- DH Guidance on Restrictive Practice
- General Medical Council Code of Practice
- Mental Health Act Code of Practice (1983 revised 2013)
- HCPC Code of Practice
- Mental Capacity Act
- Display Screen Regulations 1992
- Corporate Manslaughter Act 2007
- Best practice in managing risk
- Intercollegiate Guidance in Safeguarding Adults 2016
- Children Act 1989 and 2004
- Domestic Abuse and Victim of Crime Act 2003
- Sex Offenders Act 2003
- Care Act 2014
- Human Rights Act 1998
- Deprivation of Liberty Safeguards 2007
- Time Back Guidance
- Core Skills Training Framework 2018

This is not an exhaustive list and other regulations and guidance have informed the policy.



**7.0 REFERENCE TO OTHER TRUST POLICIES/PROCEDURES**

This policy should be read in conjunction with:

- Health & Safety Policy
- Equality & Inclusion Policy
- Training *and* Study Leave Policy
- supervision and Appraisal Policy
- KSF Guidelines
- Conduct and Capability Policy
- Moving and Handling Policy
- Rapid tranquilisation policy
- Restrictive Practices Policy
- Clinical Risk Assessment and Management Policy
- Basic Life Support (BLS)
- Infection Prevention and Control policy
- Food hygiene
- Fire policy
- Supervision of Junior Doctors
- Medicine Management Policy
- Safeguarding Adults and Children
- Disability in Employment

**END**