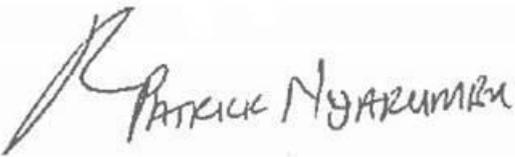




# Fundamental Training Policy

<b>Policy number and category</b>	HR 35	Human Resources
<b>Version number and date</b>	3	March 2021
<b>Ratifying committee or executive director</b>	Transforming our Staff Experience and Culture sub-group of the People Committee	
<b>Date ratified</b>	June 2021	
<b>Next anticipated review</b>	June 2024	
<b>Executive director</b>	Executive Director of Strategy, People & Partnerships	
<b>Policy lead</b>	Induction and Fundamental Training lead	
<b>Policy author</b> (if different from above)		
<b>Exec Sign off Signature (electronic)</b>		
<b>Disclosable under Freedom of Information Act 2000</b>	Yes	

## **POLICY CONTEXT:**

The Trust is committed to supporting and training staff in developing their skills of managing clinical and non-clinical risk as part of a Fundamental Training programme

## **POLICY REQUIREMENT (see Section 2)**

Reducing risk and improving patient safety through a programme of fundamental training is a key objective of the Trust.

All staff are required to attend the identified training set out in the Training Matrix relating to their specific job role in order for them to carry out their role safely and effectively.

The policy applies to all staff (permanent and temporary staff, including whole time and part time staff and TSS staff) employed directly by the Trust.

Agency, Honorary and external contractual staff are **exempt** from this policy and governed by Service Level Agreements.

HMP Birmingham Health Care staff (that are employed by BSMHFT) may access training provided by South PCT or HMP Birmingham as agreed with subject leads where the contents meet Fundamental Training objectives.

## Policy Structure:

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## 1: Introduction

Reducing risk and improving patient safety through a programme of Fundamental Training is a key objective of the Trust.

BSMHFT refer to statutory and mandatory as Fundamental training (FT) as this training is the minimum level of training required for staff to practice safely and effectively in role.

### 1.1 Rationale

**Statutory Training** – The course list for NHS Trusts is dictated by Health Education England (HEE) as prescribed in the Core Skills Training document.

Mandatory training is that which is agreed by the Trust to address particular business or clinical risks and subject areas are drawn from a number of sources including statute, Health Education England, Care Quality Commission assessment criteria as well as the Trust's own management decisions based on need or business priorities.

Mandatory training is compulsory and is directed by the Trust at the corporate level. Managers at all levels have a responsibility for ensuring that mandatory training is undertaken by their staff. Employees are responsible for ensuring they keep up to date with Fundamental Training and to escalate concerns if not able to complete training with their line manager or Learning and Development team.

Subject Matter Experts (SMEs) are responsible for ensuring that training created and delivered is compliant with relevant legislative and regulatory requirements and to ensure that courses are aligned to job roles appropriately. SME's are also responsible for ensuring that capacity meets demand.

### 1.2 Scope

The policy applies to all paid BSMHFT staff.

Agency, Honorary and external contractual staff are **exempt** from this policy and training is governed by Service Level Agreements.

### 1.3 Principles

The Trust positively supports individuals with learning disabilities and ensures that no-one is prevented from accessing the full range of mental health services available. Staff will work collaboratively with colleagues from learning disabilities services and other organisations, in order to ensure that service users and carers have a positive episode of care whilst in our services. Information is shared appropriately in order to support this.

The Trust will reduce as far as is reasonably practicable risks associated with Trust activities, through the support and training of staff in developing core skills and competence

## 2: The policy

All paid staff are required to attend the identified training set out in the ***Fundamental Training Matrix*** relating to their specific job role in order for them to carry out their role safely and effectively. This is available through the Learning & Development Department. Fundamental Training compliance is required before staff can be permitted to attend other non-Fundamental Training courses or address other development needs.

Whilst Agency, Honorary and external contractual staff are **exempt** from this policy and governed by Service Level Agreements, it's important to note that the Trust expect non BSMHFT staff working within our organisation to have a minimum level of statutory training provided by their host organisation, including but not limited to:

- Health and Safety
- Information Governance
- Infection Prevention and Control
- Manual Handling
- Fire Safety

Should a non BSMHFT staff member not have this compliance on entering the trust they can access BSMHFT eLearning packages, the manager can also request that the Agency, Honorary and external contractual staff they are responsible, to complete alternate mandated training as they deem necessary for their role.

The compliance for this must be managed by the responsible manager within the Trust and the host organisation.

The requirements of training set out in this policy will be reviewed and updated by the appropriate ratifying group on an annual basis or before if required and the group will decide upon the addition or removal of Fundamental Training subjects, (as demonstrated in the ***Process for mandating courses*** (Appendix 2).

Corporate Induction training is given to all new members of staff who commence work within the Trust. Prior to commencement in post, all new starters can complete their Fundamental Training through the eLearning portal. Any additional Fundamental Training subjects will be completed within the first 3 months of employment, as outlined in the ***Corporate Induction Policy HR24***.

Compliance reports are generated which feed data to an individual's Training statement. These statements are accessible by all managers and individual staff through the Trust intranet.

## 3: The procedure

3.1 Each Subject Matter Expert (SME) will develop an annual Training Plan which will outline the legislative/national/business need, the target audience, delivery methodology, evaluation methodology, compliance trajectory, and the process for ensuring competence, and setting the context as to why the subject needs to become or remain as a Fundamental Training subject. (*Appendix 2*).

By exception, new topics may be reviewed/added throughout the year subject to national, legislative or local business drivers.

3.2 The Training Plans will be presented to the appropriate authorising group who will review them against the business drivers, strategic objectives, national and legislative imperatives and will make recommendations for inclusion/exclusion on the Fundamental Training Annual Plan (and by exception)

3.3 The Subject Matter Expert with the support of Learning and Development will communicate the recommendations to the LD/OD Oversight Group for ratification for inclusion in the annual Fundamental Training plan, and by exception throughout the year as required.

#### 4: Responsibilities

Post(s)	Responsibilities	Ref
<b>People Committee</b>	Will ratify the annual Fundamental Training plan proposed by Learning and Development	
<b>All Staff</b>	<p>To ensure that</p> <ul style="list-style-type: none"> <li>⊕ they become compliant and sustain compliance with all aspects of their Fundamental Training (FT)</li> <li>⊕ submit booking form, <a href="#">Electronic booking form</a> by email to <a href="mailto:bsmhft.lidbookings@nhs.net">bsmhft.lidbookings@nhs.net</a></li> <li>⊕ they arrive on time for all training sessions because late arrival may result in being turned away from the training</li> <li>⊕ they inform L&amp;D within 48 hours of the training if are unable to attend to allow time for L&amp;D to fill the space. Failure to cancel within this timeframe may result in this being recorded as a DNA. Cancellations should be sent to <a href="mailto:bsmhft.cancellations@nhs.net">bsmhft.cancellations@nhs.net</a></li> </ul>	
<b>Service, Clinical, Operational and Corporate Directors</b>	<ul style="list-style-type: none"> <li>⊕ ensure that their staff attend the relevant training for their role and to ensure that completion is reviewed at the Annual Development Review and during Regular Management Supervision</li> <li>⊕ monitor attendance at the FT courses/completion of eLearning through staff training statements and ensure that their staff are up to date with their FT</li> <li>⊕ ensure that staff are given the opportunity to be released from their duties in order to attend fundamental training or complete eLearning in order to reduce waste through DNA</li> </ul>	

	<ul style="list-style-type: none"> <li>✦ To performance manage staff member who continually DNA or remain non-compliant.</li> <li>✦ ensure fundamental training is given priority over other learning and development activity</li> </ul>	
<b>Policy Lead</b>	<p>To ensure that the Fundamental Training team administration:</p> <ul style="list-style-type: none"> <li>✦ all requested fundamental training courses are booked</li> <li>✦ booked places are entered onto the OLM system</li> <li>✦ confirmation emails are sent to delegates</li> <li>✦ sign in sheets are generated for fundamental training courses</li> <li>✦ all attendances/ cancellations and non - attendances are entered onto the system for all fundamental training courses and individuals contacted to facilitate re-booking</li> <li>✦ Did Not Attend (DNA) reports are generated</li> <li>✦ Cancellations and withdrawals from training are monitored</li> </ul>	
<b>Executive Director</b>	<ul style="list-style-type: none"> <li>✦ Compliancy rates are monitored against agreed performance targets</li> <li>✦ Action is taken to address any shortfall</li> </ul>	
<b>Subject Matter Experts</b>	<ul style="list-style-type: none"> <li>✦ ensure that their training courses are set up on the OLM system via L&amp;D</li> <li>✦ ensure delivery of training subjects as per submitted Training plan and compliance trajectory</li> <li>✦ Learning &amp; Development must be made aware of any course cancellation at the earliest opportunity</li> <li>✦ conduct an annual training needs analysis with each of their subject fields</li> <li>✦ ensure that training attendance signing in records are provided within 24 working hours of delivery to the Learning and Development Department</li> <li>✦ ensure the Trust retains appropriate capacity and capability to deliver the agreed training identified within the current Fundamental training plan document</li> <li>✦ ensure trainers have the competencies and qualifications to deliver the training</li> <li>✦ Review and recommend accreditation of prior learning of external courses where required.</li> <li>✦ Annually update training sessions and materials (including eLearning packages)</li> </ul>	

## 5: Development and Consultation process:

Training Needs Analyses will be developed with reference to training needs which have been identified as compulsory within:

- Specific Trust policies, business drivers and national priorities
- All associated legislative guidance.
- Health Education England ( Core Skills Training Framework)
- CQC's Essential Standards of Quality and Safety
- Department of Health guidance  
(This list is not exhaustive)

Subject Matter Experts are responsible for completing required quality assurance documents for training delivery by the end of December each year in readiness for presentation to the appropriate BSMHFT Training Committee/group in January.

Consultation summary		
Date policy issued for consultation	12 <sup>th</sup> March 2021	
Number of versions produced for consultation	1	
Committees / meetings where policy formally discussed	Date(s)	
Where received	Summary of feedback	Actions / Response

## 6: Reference

[HR 24 Staff Induction Policy](#)

## 7: Bibliography:

There are no documents.

## 8: Glossary

## Definitions

Statutory Training	Training which is prescribed by law and is covered by a Statutory Instrument (e.g. Health & Safety at Work Act 1974, Regulatory Reform (Fire Safety Order 2005).
Mandatory training (includes statutory requirements)	Training which the Trust has determined is required and compulsory, in order to comply with legislation or applicable NHS guidance and the needs of the organisation.
Role Specific Training	Training which is required by certain staff groups within the Trust. In addition, training required to ensure professional registration is maintained.
Trust's Mandatory Training Needs Analysis	Documents produced through a process of consultation with Subject Leads to keep this policy current in its identification of mandatory training requirements.
Mandatory /Role Specific Training Checklist	A checklist for staff groups identifying mandatory training
Did not Attend - DNA	Member of staff booked on a mandatory training course that has failed to attend.
Agency / Contractor Staff	Person given work by the Trust that has a contractual agreement with another external Organisation hence employed via a third party for specified period of time within the Trust.
Oracle Learning Management System- OLM	All face to face Statutory and Mandatory training will be aligned onto the Oracle Learning Management System (OLM), which is a module of the Electronic Staff Record System (ESR).
Training Course Information System- TCIS	The Training Course Information System (TCIS) can be found on the Trust Connect website, and will provide information on courses available within Birmingham & Solihull Mental Health Foundation Trust (BSMHFT). Through TCIS, staff can also access their individual personal training statement that displays their completed/ required fundamental training requirements.

## **9: Audit and assurance.**

Fundamental Training compliance reports and action plans for any subjects falling below the projected trajectory target will be submitted to People Committee, IQC and commissioners where appropriate and as required

## **10. Appendices**

## Appendix 1

### Equality Analysis Screening Form

<b>Title of Proposal</b>	HR35 Fundamental Training Policy			
<b>Person Completing this proposal</b>	Lucy Thomas	<b>Role or title</b>	Induction and Fundamental Training Lead	
<b>Division</b>	Corporate	<b>Service Area</b>	Learning & Development	
<b>Date Started</b>	12 <sup>th</sup> March 2021	<b>Date completed</b>	12 <sup>th</sup> March 2021	
<b>Main purpose and aims of the proposal and how it fits in with the wider strategic aims and objectives of the organisation.</b>				
Reducing risk and improving patient safety through a programme of fundamental (statutory and mandatory) training is a key objective of the Trust.				
<b>Who will benefit from the proposal?</b>				
The policy applies to all paid BSMHFT staff employed directly by the Trust				
<b>Impacts on different Personal Protected Characteristics – Helpful Questions:</b>				
<i>Does this proposal promote equality of opportunity? Eliminate discrimination? Eliminate harassment? Eliminate victimisation?</i>		<i>Promote good community relations? Promote positive attitudes towards disabled people? Consider more favourable treatment of disabled people? Promote involvement and consultation? Protect and promote human rights?</i>		
<b>Please click in the relevant impact box or leave blank if you feel there is no particular impact.</b>				
<b>Personal Protected Characteristic</b>	<b>No/Minimum Impact</b>	<b>Negative Impact</b>	<b>Positive Impact</b>	<b>Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.</b>
<b>Age</b>	✓			The only impact would be a lack of familiarity with the technology
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your proposal? Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
<b>Disability</b>	✓			Where there is impact to the learner due to physical or sensory impairment.

Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues Do you currently monitor who has a disability so that you know how well your service is being used by people with a disability? Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families?				
<b>Gender</b>				
This can include male and female or someone who has completed the gender reassignment process from one sex to another Do you have flexible working arrangements for either sex? Is it easier for either men or women to access your proposal?				
<b>Marriage or Civil Partnerships</b>				
People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters Are the documents and information provided for your service reflecting the appropriate terminology for marriage and civil partnerships?				
<b>Pregnancy or Maternity</b>				
This includes women having a baby and women just after they have had a baby Does your service accommodate the needs of expectant and post natal mothers both as staff and service users? Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity?				
<b>Race or Ethnicity</b>				
Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees What training does staff have to respond to the cultural needs of different ethnic groups? What arrangements are in place to communicate with people who do not have English as a first language?				
<b>Religion or Belief</b>				
Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met?				
<b>Sexual Orientation</b>				
Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea?				

<b>Transgender or Gender Reassignment</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This will include people who are in the process of or in a care pathway changing from one gender to another Have you considered the possible needs of transgender staff and service users in the development of your proposal or service?				
<b>Human Rights</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affecting someone's right to Life, Dignity and Respect? Caring for other people or protecting them from danger? The detention of an individual inadvertently or placing someone in a humiliating situation or position?				
<b>If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e. Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998)</b>				
	<b>Yes</b>	<b>No</b>	<input checked="" type="checkbox"/>	
<b>What do you consider the level of negative impact to be?</b>	<b>High Impact</b>	<b>Medium Impact</b>	<b>Low Impact</b>	<b>No Impact</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If the impact could be discriminatory in law, please contact the <b>Equality and Diversity Lead</b> immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required.				
If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the <b>Equality and Diversity Lead</b> before proceeding.				
If the proposal does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the <b>Equality and Diversity Lead</b> .				
<b>Action Planning:</b>				
How could you minimise or remove any negative impact identified even if this is of low significance?				
Communication of support mechanisms available for staff				
How will any impact or planned actions be monitored and reviewed?				

Detailed log of requests for support, reported quarterly to Workforce Committee

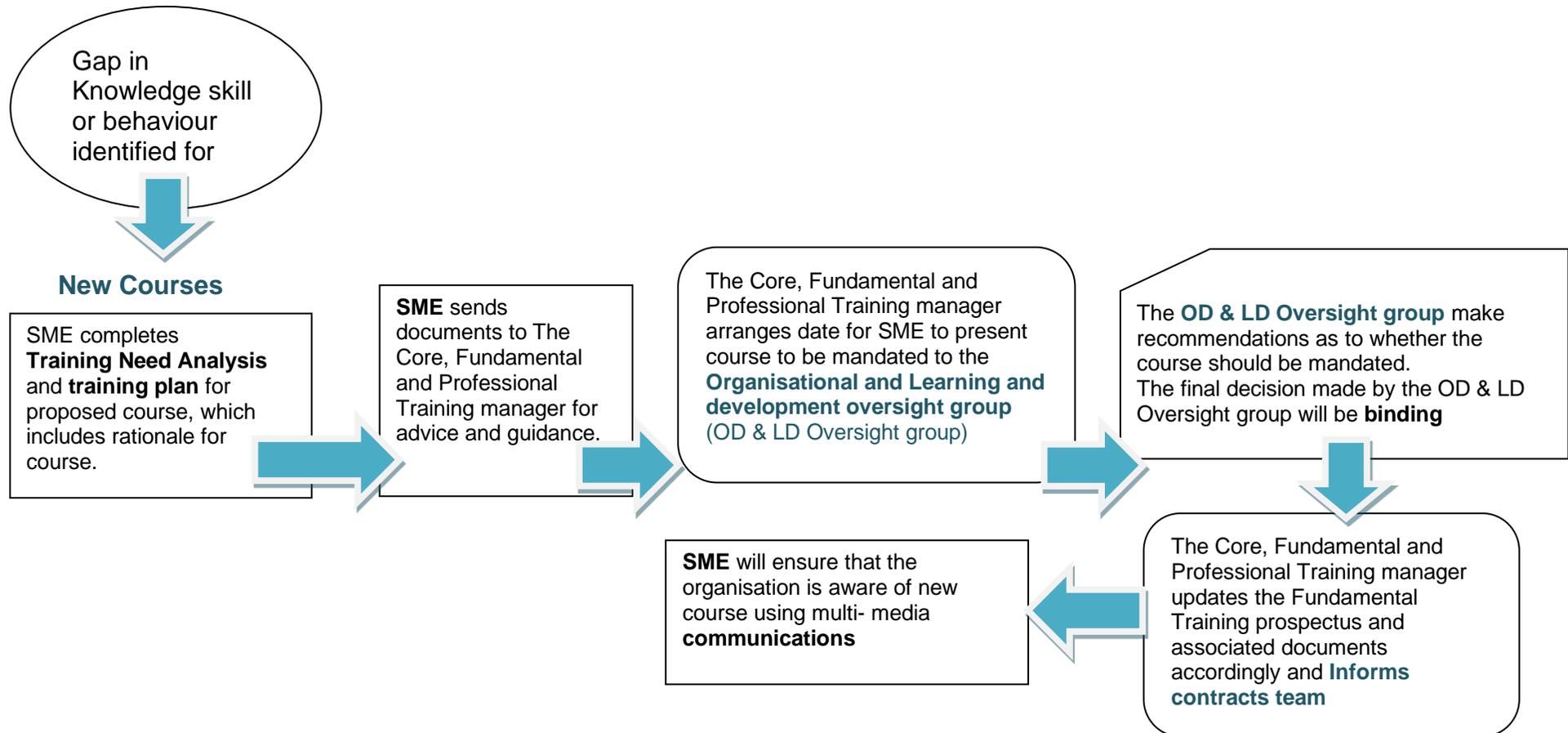
How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.

Through the Learning & Development pages on the Trust Intranet, inclusion of support mechanisms on the booking forms

Please save and keep one copy and then send a copy with a copy of the proposal to the Senior Equality and Diversity Lead at [hr.support@bsmhft.nhs.uk](mailto:hr.support@bsmhft.nhs.uk). The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis.

## Appendix 2

### Process for mandating courses (proposed July 2020)

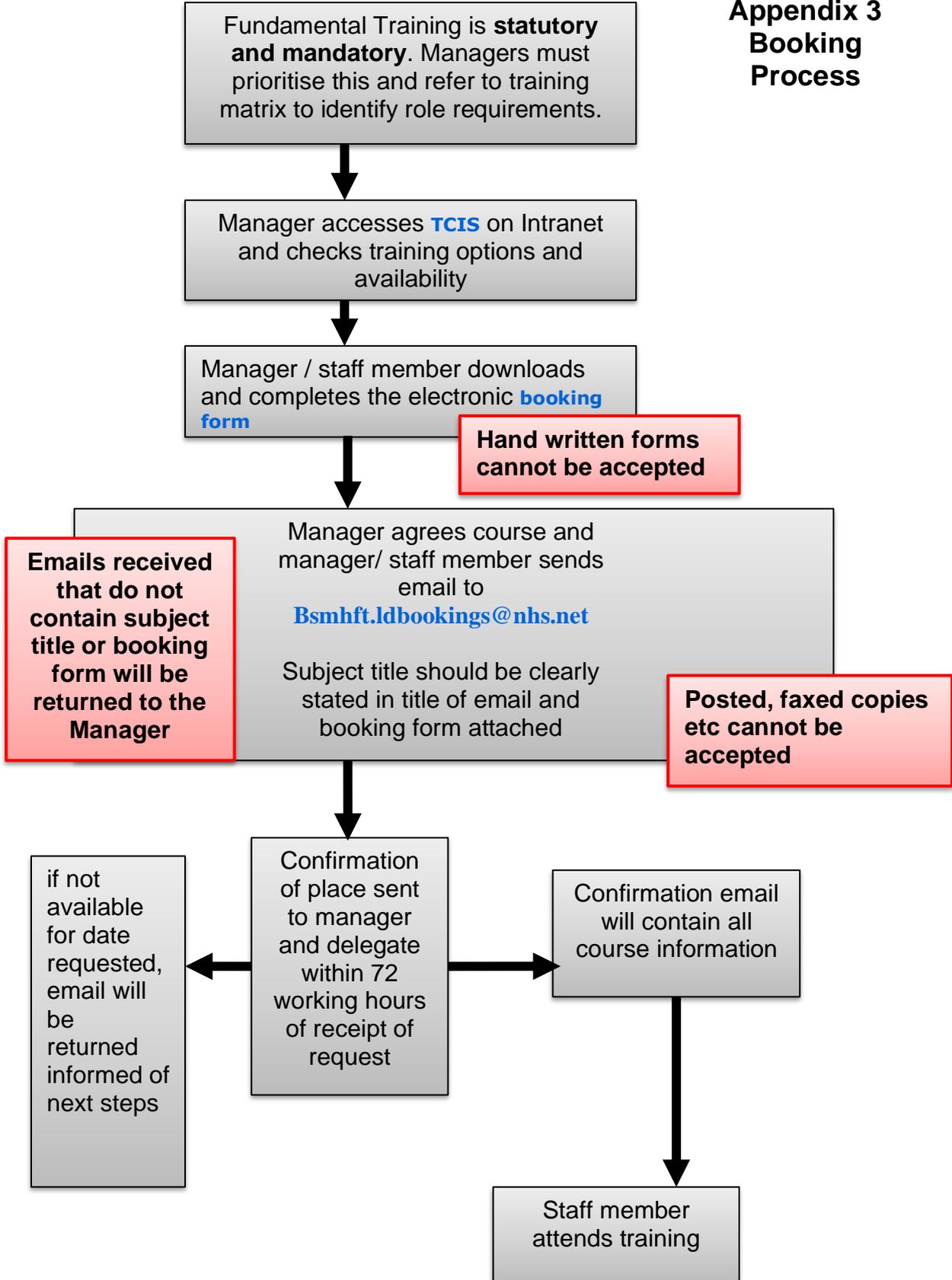


**NB-** All existing Fundamental Training courses will be reviewed in regards to inclusion in the BSMHFT offering annually (**November**). Review of courses can happen before annual update if required.

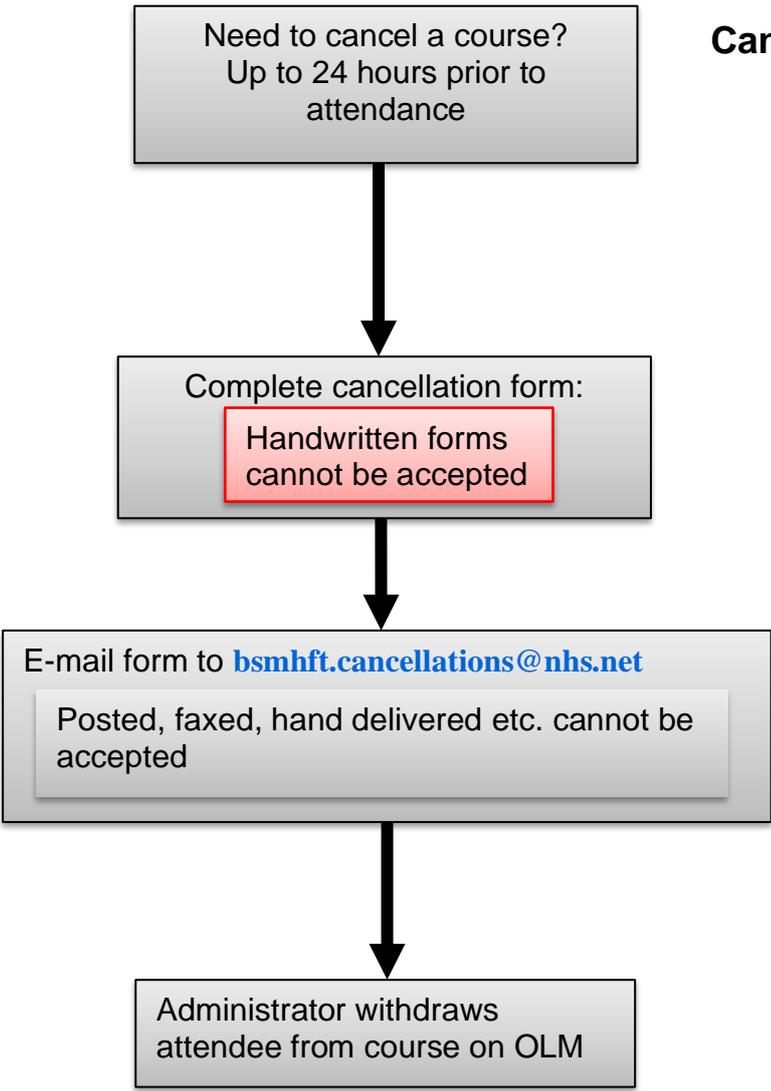
#### Removal of courses from mandated list

If agreed with the SME, OD & LD Oversight group: courses would be removed from training statements. The change would be communicated by SME and Learning and Development. The contracts team will be informed of the change.

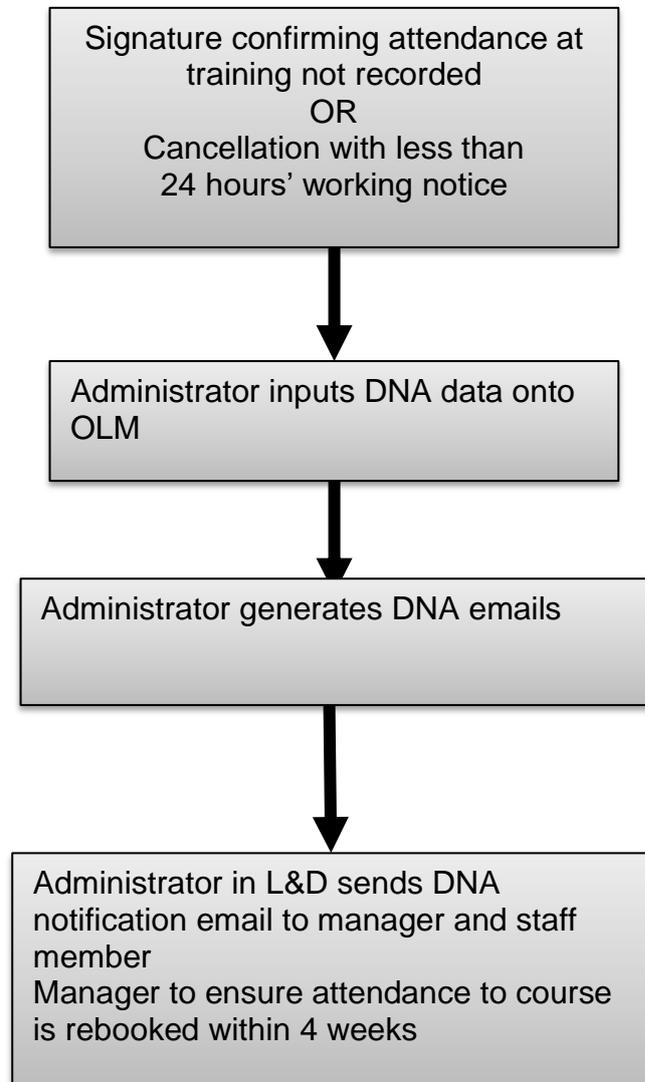
### Appendix 3 Booking Process



**Appendix 4  
Cancellation Process**



DNA Process



## Appendix 6- Risk Management MONITORING TEMPLATE

Element to be monitored	Lead	Tool	Frequency	Reporting Arrangements	Acting on Recommendations and Lead(S)	Change in Practice and Lessons to be shared
To Monitor training plan review for each fundamental training subject.	L&D Manager	BSMHFT TNA template	Annually	Written report to Learning Lead meeting for update report to People committee		
Review to ensure capacity meets demand to enable delivery of the training identified in the Training Plan.	L&D Manager	Report generated from OLM of spaces available versus non-compliance figures as identified via Insight report	BI-Annually	Report to the Executive Director of Strategy, People & Partnerships		
Team and Individual Team members compliance with Fundamental Training	Team Manager	TCIS (Live Online)	Live daily	Shows in date compliance for all Fundamental training for a team of staff. Red - out of date Amber - training booked Green - in date and compliant		

**Appendix 7**

**Training Needs Analysis for courses**

**Course Name-**

**Start date-**

**Review date-**

## **Training Course objective**

What is the expected outcome following training? e.g. change in knowledge, skill or behaviour.

## **What is the driver for the course?**

Legislation, National and Local guidance, Professional Standards CQUINS, or commissioner determined compliance targets

## **Who is the target Audience?**

All staff?

Clinical Staff?

Non Clinical Staff?

Bespoke audience?

## **What are the Risks the potential risks on the trust of failure to meet training needs?**

## **What are the observable Benefits of meeting training needs?**

## **What Costs will be incurred in deliver the course?**

## Training schedule

Training course	
Staff group(s)	
Training method	(circle methods used)  Face-to-face e Learning Blended Approach Multi-agency Individual sessions Team sessions Co-production
Duration of course	
Number of trainers	
Class size/trainees per session	
Number of sessions required	
Course refresher schedule	Once only Annual Bi-Annual 3 Yearly

