Fundamental Training Policy

Policy number and category	**HR 35**	**Human Resources**
Version number and date	**4**	**April 2024**
Ratifying committee or executive director	**Transforming our Staff Experience and Culture sub-group of the People Committee**	
Date ratified	**June 2024**	
Next anticipated review	**June 2027**	
Executive director	**Executive Director of Strategy, People & Partnerships**	
Policy lead	**Fundamental Training and Induction Lead**	
Policy author (if different from above)	**Fundamental Training and Induction**	
Exec Sign off Signature (electronic)	*Patrick Nyarumbu*	
Disclosable under Freedom of Information Act 2000	**Yes**	

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.

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.

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1: Introduction

This policy applies to Birmingham and Solihull Mental Health Foundation Trust (BSMHFT).

BSMHFT has a responsibility for ensuring that there is a robust, consistent and effective programme of statutory and mandatory training available for all employees to enable them to undertake their roles safely, effectively and in compliance with legislation. 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).

1.1 Rationale

Statutory Training is that which BSMHFT is legally required to provide as defined in law, or where a statutory body has instructed organisations to provide training on the basis of legislation. The course list for NHS Trusts is dictated by NHS England as prescribed in the Core Skills Training Framework (CSTF) 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 law, Health Education England, CSTF, 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. SMEs will be asked to review their subject area programme to confirm/update as required, on an annual basis.

The Learning & Development team will also work with SMEs to produce action plans for delivery of all fundamental training. These action plans may involve, for example, reviewing the current format or delivery method for fundamental training, changing the staff groups to which the subject applies, or introducing a new training content to the fundamental training programme to align with CSTF.

1.2 Scope

1.2.1 BSMHFT requires this policy to be followed by:

- All employees of BSMHFT (including permanent and temporary staff, full-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.

1.3 Principles

The Trust positively supports individuals with disabilities and ensures that no one is prevented from accessing any training at BSMHFT.

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

2: The policy

This policy addresses the requirement for all staff to complete fundamental training. It is designed to ensure that the Trust meets the requirements for compliance with the relevant risk management standards and current legislative requirements. All staff members are required to comply with this policy and managers are required to ensure it is fully implemented and monitored within their areas of control.

All paid staff are obliged 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.

Failure to comply with this policy will be investigated and, where appropriate, will be managed in accordance with the Trust's performance and disciplinary policies. It is therefore essential that all employees complete their relevant fundamental training, whether staff are temporary or permanent, whatever their occupation or profession and whatever their grade. However, 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:

Topic	Frequency
The Oliver McGowan Mandatory Training on Learning Disability and Autism Part 1 Elearning	Once Only
Fire Safety	Annually
Information Governance and Data Security	
Conflict Resolution (AVERTs)	3 Yearly
Equality, Diversity and Human Rights	
Health and Safety	
Infection Prevention and Control	
Moving and Handling	
Prevent Awareness	
Safeguarding Adults	
Safeguarding Children	

Should a non-BSMHFT staff member not have these compliances upon joining the trust, they can access BSMHFT eLearning packages on Trust Learning Management system. The manager can also ask the Agency, Honorary, and external contractual staff for whom they are responsible to complete alternative mandated training if they believe it is necessary for their role.

The compliance for these staff 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. Following induction, new staff members are required to complete all Fundamental Training on the Trust Learning Management system within the first two weeks. Any additional Fundamental Training subjects will be completed within the first 3 months of employment, as outlined in the **Corporate Induction Policy HR24**. Prior to employees starting at the trust, CSTF aligned courses will be transferred via the Inter-authority transfer on ESR and if there are any discrepancies, employees should contact Learning and Development

Pay progression for new, and newly promoted staff (on or after 1 April 2019), is reliant upon completion of fundamental training. Staff must demonstrate all training

are completed, and up-to-date, in order to **receive their increment.** It is important that staff's fundamental training is reviewed during their annual Values Based appraisal (See the BSMHFT's Pay Progression Policy HR23).

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 connect page on the insight reporting system at team or at directorate level.

The Trust aims for a minimum of 95% of staff to be compliant with their Fundamental training. Compliance records forms part of the regular reporting to the People Committee and Commissioners.

3: The procedure

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.

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).

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
People Committee	Will ratify the annual Fundamental Training plan proposed by Learning and Development	

All Staff	All staff are responsible to • be compliant and sustain compliance with all aspects of their Fundamental Training (FT) • request to be booked onto FT face-to-face training by emailing to **bsmhft.ldbookings@nhs.net** • prioritise attendance on FT training before attending any other training or course of study • Arrive on time for all training sessions because late arrival may result in being turned away from the training. • inform L&D within 48 hours of the training if are unable to attend to allow time for L&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 **bsmhft.ldbookings@nhs.net**	
Service, Clinical, Operational and Corporate Directors	They all are responsible to: • ensure that their staff attend and will proactively undertake the relevant training for their role and to ensure that completion is reviewed at the Annual Valeus Based Appraisal and during Regular Management Supervision. • monitor attendance at the FT training /completion of eLearning through staff training statements and ensure that their staff are up to date with their FT. • ensure that staff are given the opportunity to be released from their duties to complete eLearning or attend fundamental training in order to reduce waste through DNA. • To performance manage staff member who continually DNA or remain non-compliant. • ensure fundamental training is given priority over other learning and development activity	

Policy Lead	Policy Lead is responsible to:
	
	• monitor Corporate Induction and Fundamental Training reporting.
	• ensure that the Fundamental Training team complete the following administration tasks:
	
	   ○ all fundamental training courses are created onto the OLM.
	   ○ all fundamental training courses request by staff to attend are booked via the OLM system.
	   ○ confirmation emails are sent to delegates.
	   ○ sign-in sheets are generated for fundamental training courses.
	   ○ all attendances/cancellations and non - attendances are entered onto the system for all fundamental training courses and individuals contacted to facilitate	

	re-booking. ○ Did Not Attend (DNA) reports are generated. ○ Cancellations and withdrawals from training are monitored	
Executive Director	Executive Director is responsible to: • monitor compliancy rates against to agreed performance targets. • action is taken to address any shortfall.	
Subject Matter Experts	SMEs are responsible to: • ensure that their training courses are set up on the OLM system via Learning & Development. • ensure delivery of training subjects as per submitted Training plan and compliance trajectory. • Learning & Development must be made aware of any course cancellation at the earliest opportunity. • conduct an annual training needs analysis with each of their subject fields. • ensure that training attendance signing in records are provided within 24 working hours of delivery to the Learning & Development Department • ensure the Trust retains appropriate capacity and capability to deliver the agreed training identified within the current Fundamental training plan document. • ensure trainers have the competencies and qualifications to deliver the training. • Review and recommend accreditation of prior learning of external courses where required. • Annually update training sessions and materials (including eLearning packages).	

5: Development and Consultation process:

Training Needs Analysis 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.
- NHS 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 November each year in readiness for presentation to the appropriate BSMHFT Training Committee/group in January.

Consultation summary		
Date policy issued for consultation	January 2024	
Number of versions produced for consultation	1	
Committees / meetings where policy formally discussed	**Date(s)**	
Where received	**Summary of feedback**	**Actions / Response**

6: Reference

Corporate Induction Policy HR24

7: Bibliography:

There are no documents.

8: Glossary

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.
Fundamental Training (Statutory and Mandatory Training) (These subjects report to CQC and other legal bodies.)	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). Learning that all staff must undertake to ensure an organisation is meeting its legislative duties. These courses are stipulated by Health Education England.
	Mandatory training: Learning deemed essential for safe and efficient service delivery and personal safety. It reduces organisational risks and complies with local policies and/or government guidelines. These courses are agreed by the organisation.
Role Recommended Training	Learning required by a department in order to improve staff awareness, knowledge or competently to fulfil the requirements of their job role. It is pre-approved and planned by Heads of Service and/or Professions in conjunction with the Learning & Development team. • Reportable internally or to professional body.
Continues Professional Development (CPD) Training	CPD Training is personal and/or professional development which helps manage an individual's own learning and growth throughout their career. CPD training opportunities are usually instigated by the individual and are outlined within annual appraisals and 1:1 sessions (Values Based Appraisal process), seeking manager approval as required. Reporting to a professional body* may be required for some roles. Study Leave: • Study leave form may be required • Any funding to be negotiated with line manager.
Did not Attend - DNA	Member of staff booked on a mandatory training course that has failed to attend.

Agency / Contractor/ Honorary 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. These employees anticipated receiving training from their own Trust or Agency in all Fundamental Training (FT) subjects and they are up to date. If they are not current with FT Subjects then the recruitment manager is in charge of making sure they complete Trust's FT subjects before they begin working at BSMHFT.
Volunteers	All volunteers are required to complete the priority 'mandatory Volunteer fundamental training' and attend Volunteer Trust induction which will be facilitated virtually to discuss the use of the volunteer handbook and volunteer agreement. *The volunteer recruiting manager must complete, the local induction including security for secure sites.* Volunteers with face-to-face service user contact will also be required to undertake additional safeguarding training prior to placement. (as outlined in the **Volunteers Policy HR25**).
Oracle Learning Management System- OLM	All 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.
Reducing Restrictive Intervention training (AVERTS)	The safety of staff working in the Trust is paramount and is as important as the safety of service users. Members of staff require appropriate training to identify potentially unsafe situations and how to prevent or manage situations where there is escalating risk of violence and aggression towards self or others. BSMHFT refer to such training as **A**pproaches to **V**iolence through **E**ffective **R**ecognition and **T**raining for **S**taff (AVERTS). For more information please refer to Appendix 4

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.

Element to be monitored	Lead	Tool	Frequency	Reporting Arrangements
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

10: Appendices

10.1 Appendix 1 Equality Analysis Screening Form

Equality Analysis Screening Form

Title of Policy	HR35 Fundamental Training Policy		
Person Completing this policy	Estelle Patil	**Role or title**	Fundamental Training and Induction Lead
Division	Strategy, People and Partnerships	**Service Area**	Learning and Development
Date Started	5th September 2023	**Date completed**	5th September 2023

Main purpose and aims of the policy and how it fits in with the wider strategic aims and objectives of the organisation.
Reducing risk and improving patient safety through a programme of fundamental (statutory and mandatory) training is a key objective of the Trust.

Who will benefit from the policy?
The policy applies to all paid BSMHFT staff employed directly by the Trust

Does the policy affect service users, employees or the wider community?   ***Add any data you have on the groups affected split by Protected characteristic in the boxes below. Highlight how you have used the data to reduce any noted inequalities going forward***
This policy applies to BSMHFT staff. Fundamental Training is designed to assist reduce risk and improve patient safety.

Does the policy significantly affect service delivery, business processes or policy?   ***How will these reduce inequality?***
No – this is a review of a current policy so service delivery, business processes and policy are already in place

Does it involve a significant commitment of resources?   ***How will these reduce inequality?***
No – this is a review of the current policy so resources are already in place.

Does the policy relate to an area where there are known inequalities? (e.g. seclusion, accessibility, recruitment &

progression)

This policy applies to all BSMHFT staff but is designed to educate around inequalities

Impacts on different Personal Protected Characteristics – *Helpful Questions:*

Does this policy promote equality of opportunity?	*Promote good community relations?*
Eliminate discrimination?	*Promote positive attitudes towards disabled people?*
Eliminate harassment?	*Consider more favorable treatment of disabled people?*
Eliminate victimisation?	*Promote involvement and consultation?*
	Protect and promote human rights?

Please click in the relevant impact box and include relevant data

Personal Protected Characteristic	No/Minimum Impact	Negative Impact	Positive Impact	Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.
Age	X			No impact, training is required for all BSMHFT regardless of age
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your policy? Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
Disability	X			No impact as training is required for all BSMHFT staff however in the cases of webinar, e-learning and face to face sessions employees are encouraged to contact L&D for adjustments to be made
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?				
Gender	X			No impact, training is required for all BSMHFT regardless of gender
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 policy?				
Marriage or Civil Partnerships	X			No impact, training is required for all BSMHFT
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?				
Pregnancy or Maternity	X			No impact, training is required for all BSMHFT
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?				
Race or Ethnicity	X			No impact, training is required for all BSMHFT
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?				
Religion or Belief	X			No impact, training is required for all BSMHFT
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?				
Sexual Orientation	X			No impact, training is required for all BSMHFT
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?				
Transgender or Gender Reassignment	X			No impact, training is required for all BSMHFT
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 policy or service?				
Human Rights	X			No impact, training is required for all BSMHFT
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?				
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)				
	Yes		**No X**	

What do you consider the level of negative impact to be?	High Impact	Medium Impact	Low Impact	No Impact
				X

If the impact could be discriminatory in law, please contact the **Equality and Diversity Lead** 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 **Equality and Diversity Lead** before proceeding.
If the policy 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 **Equality and Diversity Lead.**

Action Planning:

How could you minimise or remove any negative impact identified even if this is of low significance?

How will any impact or planned actions be monitored and reviewed?

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.

Please save and keep one copy and then send a copy with a copy of the policy to the Senior Equality and Diversity Lead at bsmhft.edi.queries@nhs.net. 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

10.2 Appendix 2- Process for mandating courses (proposed July 2020)

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┌─────────────────────┐     ┌─────────────────────┐     ┌─────────────────────┐
│ Gap in Knowledge    │     │ Subject Matter      │     │ SME sends documents │
│ skill or behaviour  │ ──▶ │ Expert (SME)        │ ──▶ │ to The Core,        │
│ identified for      │     │ completes Training  │     │ Fundamental and     │
│ staff group         │     │ Need Analysis,      │     │ Professional        │
│                     │     │ Equality Impact     │     │ Training manager    │
│                     │     │ Assessment doument  │     │ for advice and      │
│                     │     │ and training plan   │     │ guidance            │
│                     │     │ for proposed course │     │                     │
│                     │     │ which includes      │     │                     │
│                     │     │ rationale for the   │     │                     │
│                     │     │ course              │     │                     │
└─────────────────────┘     └─────────────────────┘     └─────────────────────┘
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┌─────────────────────┐     ┌─────────────────────┐
│ The Core,           │     │ L&D Oversight group │
│ Fundamental and     │     │ make                │
│ Professional        │     │ recommendations as  │
│ Training manager    │ ──▶ │ to whether the      │
│ arranges date for   │     │ course should be    │
│ SME to present      │     │ mandated. The       │
│ course to be        │     │ course will be an   │
│ mandated to the     │     │ agenda item for the │
│                     │     │ subsequent          │
│ L&D Oversight       │     │ Transforming        │
│ meeting             │     │ Culture and staff   │
│                     │     │ Experience Sub      │
│                     │     │ Committee           │
│                     │     │ and SME will present│
└─────────────────────┘     └─────────────────────┘
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┌─────────────────────┐     ┌─────────────────────┐     ┌─────────────────────┐
│ Subsequent          │     │ The Core,           │     │ SME will ensure     │
│ transforming        │     │ Fundamental and     │     │ that the            │
│ Culture and staff   │     │ Professional        │     │ organisation is     │
│ Experience SC make  │ ──▶ │ Training manager    │ ──▶ │ aware of new        │
│ binding decision    │     │ updates associated  │     │ course using multi- │
│ whether to mandate  │     │ documents           │     │ media               │
│ the course i.e.     │     │ accordingly         │     │ communications      │
│ will be             │     │                     │     │                     │
│ commissioner        │     │ Inform contracts    │     │                     │
│ reportable          │     │ team.               │     │                     │
│                     │     │                     │     │                     │
│ Any area of concern │     │                     │     │                     │
│ will be escalated   │     │                     │     │                     │
│ to the People       │     │                     │     │                     │
│ Committee           │     │                     │     │                     │
└─────────────────────┘     └─────────────────────┘     └─────────────────────┘
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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 Team. The contracts team will be informed of the change.

10.3 Appendix 3- Booking Process

Fundamental Training is statutory and mandatory. Managers must prioritise this and access **Traffic light system (TCIS)** on the Connect to check employee's compliance.

Employee or Manager checks the **Training Calendar** and emails L&D Bookings (**Bsmhft.ldbookings@nhs.net)** with the course and date requested.

For ELS, ILS, or CRAM they are also required to send the e-learning certificate

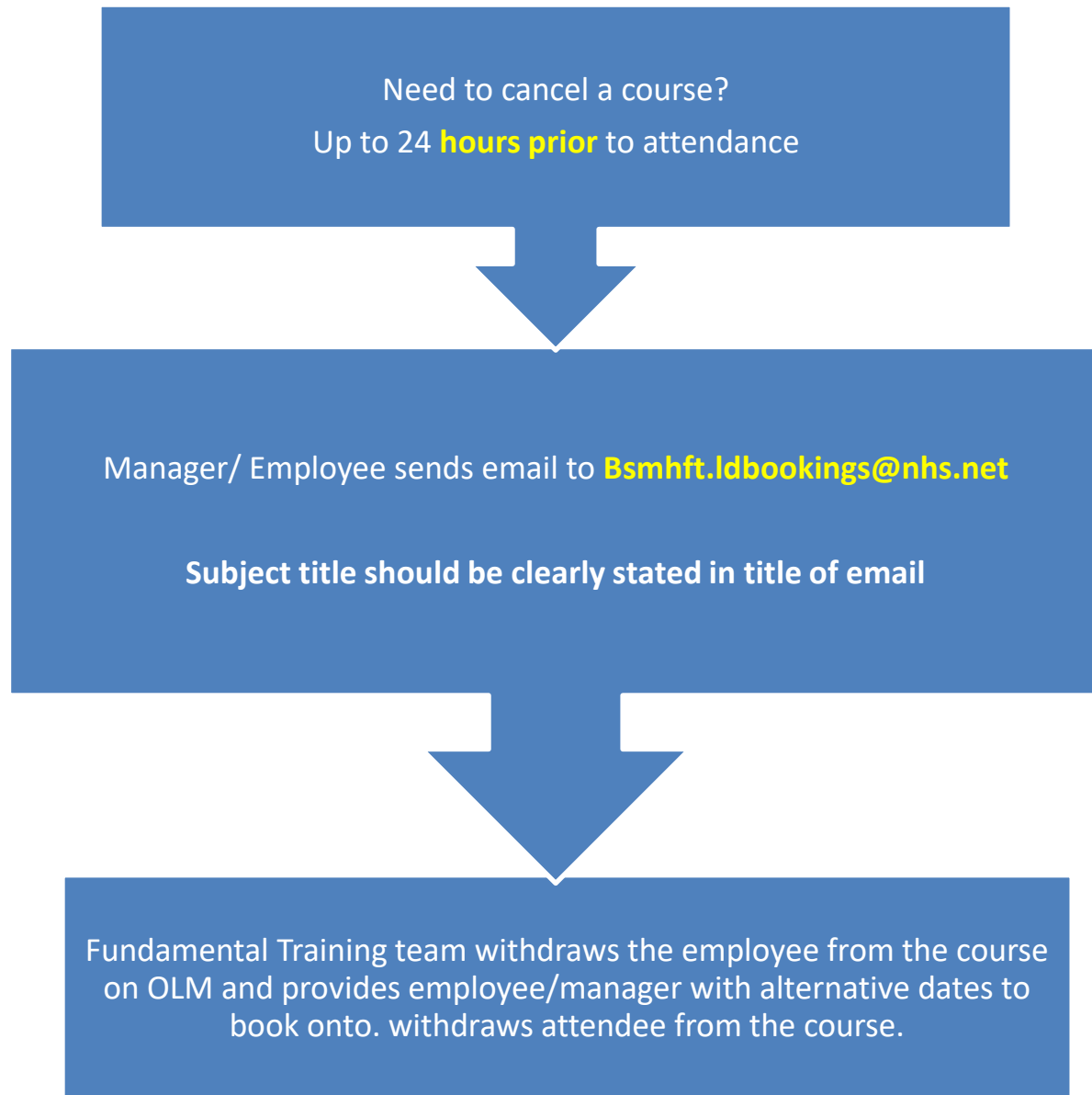Manager agrees course and the date with staff member and sends email to **Bsmhft.ldbookings@nhs.net**

Subject title should be clearly stated in title of email

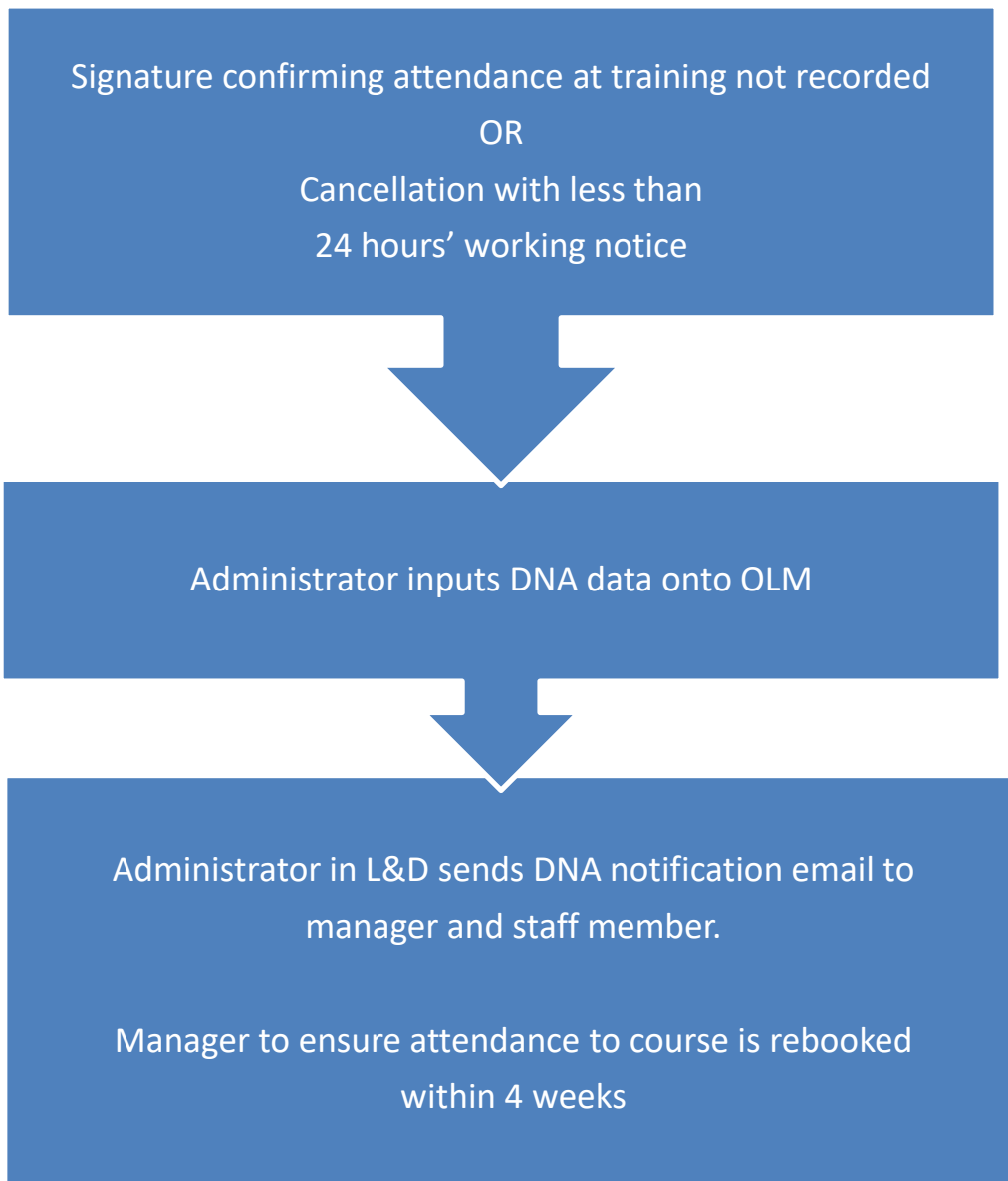**If date is not available, alternative dates will be provided**

Confirmation email will contain all course information. Calendar invite will be automatically sent by ESR to employee.

Employee attends training. L&D Bookings inbox will update attendance register within 48 hours.

10.4 Appendix 4- Cancellation Process

Need to cancel a course?

Up to 24 **hours prior** to attendance

Manager/ Employee sends email to **Bsmhft.ldbookings@nhs.net**

Subject title should be clearly stated in title of email

Fundamental Training team withdraws the employee from the course on OLM and provides employee/manager with alternative dates to book onto. withdraws attendee from the course.

10.5 Appendix 5- DNA Process

Signature confirming attendance at training not recorded

OR

Cancellation with less than

24 hours' working notice

Administrator inputs DNA data onto OLM

Administrator in L&D sends DNA notification email to manager and staff member.

Manager to ensure attendance to course is rebooked within 4 weeks

10.6 Appendix 6 Reducing Restrictive Intervention training (AVERTS)

Reducing Restrictive Intervention training (AVERTS)

1. The safety of staff working in the Trust is paramount and is as important as the safety of service users. Members of staff require appropriate training to identify potentially unsafe situations and how to prevent or manage situations where there is escalating risk of violence and aggression towards self or others. BSMHFT refer to such training as **A**pproaches to **V**iolence through **E**ffective **R**ecognition and **T**raining for **S**taff (AVERTS).

2. The Reducing Restrictive Intervention (RRI) training syllabus - AVERTS incorporates a variety of evidence-based strategies informed by national guidance and statute and positive practice standards. From April 2020 there is a requirement that all training in restrictive physical interventions meets the mandatory standards outlined by the Restraint Reduction Network (RRN) Training Standards (2019) and overseen by BILD ACT and UKAS.

3. RRN (2019) stipulate that training in the management of violence and aggression must ensure that the views and experiences of people with lived experience must inform and be explicit in training content.

4. The "*AVERTS personal safety and risk reduction- in-patients*" is an online, e-learning package that all staff awaiting completion of the RRI 5-day course should complete. The information contained within the package will allow staff to undertake supportive roles on in-patient units but will not allow staff to undertake Restrictive Physical Interventions (Restraint).

5. All RRI face to face course bookings are managed by the Trust's Learning and Development department who will build and populate the classes. Classes will be built in advance in order to ensure staff are able to be allocated onto courses in a timely manner.

6. To manage the demand, spaces on the RRI (AVERTS) 5-day course are allocated in line with the RRI priority training matrix (see appendix 5). This grid is regularly reviewed and based upon restrictive intervention data reported via Insight.

7. All staff who complete the RRI 5-day programme will be required to attend an annual (12 monthly) 1-day update refresher and e-learning package. This is a requirement of the Restraint Reduction Network who accredit RRI training. Failure to attend an annual refresher will require the staff member to repeat the 5-day programme.

8. A 3-month buffer for extenuating circumstances (e.g sickness, emergency leave, events beyond an individual's control) can be applied allowing staff members a maximum of 15 months to complete their annual refresher. The 3-month window is for extenuating circumstances only and should not be utilised routinely.

9. All staff who attend RRI face to face training for their 5-day and 1-day physical skills course will be automatically allocated an update space by the LDBookings Department. If the staff member is unable to attend the date allocated, they must negotiate with the LDBookings team for an alternative date. It is the staff member's responsibility to alert the unit manager or TSS manager of the date that they have been allocated.

10. All staff are required to complete a health declaration prior to the commencement of any course containing physical skills. Where there are concerns regarding an individual's ability to undertake training owing to health reasons there should be a consultation between the respective unit manager and the Occupational Health team. The RRI Core Skills Trainers (CST) should be alerted to any concerns held by the unit management team.

11. An individual's competency will be assessed during training. If an individual is unable to demonstrate a skill element their line manager will be notified via letter. It is the line

manager's responsibility to discuss and manage such information with the individual upon their return to work.

12. A member of staff who is pregnant or has an injury preventing them from participating in the physical skills elements of the course, who has already completed a 5-day course and remains 'live' with regards to their RRI refresher training, may observe a 1-day refresher to remain in date.

13. Any staff member who observes training to remain in date should re-book onto another annual refresher to complete the physical skills component and competency assessment when cleared to do so by Occupational health.

14. The pregnant member of staff should complete their next annual 1-day refresher and e-learning update within the agreed time parameters to remain in date.

15. There is a mandatory e-learning component as part of the refresher/ update process. All staff must complete and pass the e-learning component to be considered live and in-date for their RRI training.

16. For further information regarding the prevention and reduction of restrictive interventions please refer to the Prevention and management of Violence policy (this is subject to change)

10.7 Appendix 7 AVERTS RRI Priority Training Matrix

CLINICAL AREA	PRIORITY LEVEL
All PICU's –EDEN, Caffra, Meadowcroft, Severn, Sycamore	Very High- where possible staff should receive training on the next available course when commencing within the trust.
Acute in-patient areas; Oleaster, Zinnia, Mary Seacole, Larimar House, Northcroft site	High – where possible training should be given as close to commencement within the trust as practicable
Ardenleigh Site; Coral, Citrine, Women's Blended, FCAMHS (Adriatic, Pacific, Atlantic)	High – where possible training should be given as close to commencement within the trust as practicable
Reaside and Tamarind Acute units; Avon, Blythe, Hibiscus, Myrtle, Laurel	High – where possible training should be given as close to commencement within the trust as practicable
Juniper Centre; Rosemary, Sage, Bergamot	High – where possible training should be given as close to commencement within the trust as practicable
Other Medium Secure SCOH units; Tourmaline, Kennet, Dove, Swift, Trent, Lobelia, Cedar, Acacia	Medium- if no spaces are immediately available, the staff should liaise with the AVERTS team who will hold an emergency waiting list and allocate places in order of priority. Staff should book onto the next available AVERTS 5 day course.
Stand-alone acute/ complex care/ HDU units; Newbridge house, Ashcroft, Reservoir court, Dan Mooney House, David Bromley, Endeavour House, Endeavour Court	Medium- if no spaces are immediately available, the staff should liaise with the AVERTS team who will hold an emergency waiting list and allocate places in order of priority. Staff should book onto the next available AVERTS 5 day course.
SCOH Hillis Lodge Low secure	Low- a place will be allocated if available however staff will routinely be expected to book onto the next available AVERTS 5 day course. The AVERTS team will hold a waiting list and may be able to offer last minute cancellation places.
OT's, OTA's, Psychology assistants (Who do not work in high-risk areas).	Low- a place will be allocated if available however staff will routinely be expected to book onto the next available AVERTS 5 day course. The AVERTS team will hold a waiting list and may be able to offer last minute cancellation places.
Specialities based at Barberry; Cilantro, Jasmine and Chamomile	Low- a place will be allocated if available however staff will routinely be expected to book onto the next available AVERTS 5 day course. The AVERTS team will

	hold a waiting list and may be able to offer last minute cancellation places.
S2R; Rookery Gardens, Hertford House, Grove Avenue, Forward house. Staff who don't have AVERTS 5-day as a traffic light.	Low- a place will be allocated if available however staff will routinely be expected to book onto the next available AVERTS 5-day course.

TSS will continue to be offered 4 places per regular RRI (AVERTS) 5-day course, any spaces not taken by substantive new starters will also be offered to TSS