Pennine Care **NHS**

NHS Foundation Trust

Policy Document Control Page

Title

Title: Core & Essential Skills (Mandatory Training) Education Policy

Version: 3

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Supersedes

Supersedes: Core & Essential Skills (Mandatory Training) Education Policy V2

Description of Amendment(s):
- Harmonisation of terminology for Core and Essential Skills Training
- Removal of the Internal Booking Form
- Core and essential training matrix updated and replacing the risk training matrix
- Core Skills and the Workforce Passport described in preparation for Devolution Greater Manchester project
- Key Performance Indicator contractual core training added

Originator

Originated By: Chris Heath

Designation: Violence Reduction & Core & Essential Skills Manager

Equality Impact Assessment (EIA) Process

Equality Relevance Assessment Undertaken by: C Heath

ERA undertaken on: 19-10-15
ERA approved by EIA Work group on: 19-10-15

Where policy deemed relevant to equality-

EIA undertaken by: C Heath

EIA undertaken on : 19-10-15

EIA approved by EIA work group on : 27-10-15

Approval and Ratification
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Review
Review Date: March 2019
Responsibility of: Chris Heath
Designation: Violence Reduction & Core & Essential Skills Manager
This policy is to be disseminated to all relevant staff. **This policy must be posted on the Intranet.** **Date Posted: 19th April 2016**

TABLE OF CONTENTS

1.0 Introduction

This policy describes the Core and Essential Skills training requirements for staff employed by Pennine Care NHS Foundation Trust. The details set out, explain the key responsibilities of the organisation to ensure new and existing staff are facilitated to compete Core and Essential Skills training.

The policy aims to ensure that all employees, (permanent, temporary and seconded staff) complete their Core and Essential Skills training in the time scales and refresher periods required. The minimum core training requirements that all employees of the organisation must adhere to are outlined within the policy. A robust Core and Essential Skills training programme ensures that the organisation and staff are compliant with statutory requirements and acts as a foundation for future development opportunities. The Trust embraces the principles of Continuing Professional Development, (CPD) and Life Long Learning.

2.0 Policy Statement

The purpose of the policy is to establish the Core and Essential Skills requirements for all staff in order to support the risk management strategies of the organisation as well as promoting improved standards of service delivery.

The purpose for staff of Core and Essential Skills Training is to minimise risk appropriate to the staff group they are part of in the time scale required in order to contribute to the delivery of high quality services and care.

The policy places the reduction of risk whether to staff or service users at the heart of its operation.

2.1 Definitions

CORE & ESSENTIAL SKILLS Training (STATUTORY & MANDATORY) REQUIREMENTS:
Training that the organisation 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. For example Fire Safety required by statute of the Management of Health and safety at work Regulations 1997 amended 1999. Under core requirements, higher core training that is also stipulated by legislation and guidance is included e.g. Restrictive Interventions & Violence Reduction Training stipulated by Positive & Proactive Guidance (DoH 2014)

It can also include a training requirement determined by the organisation. Mandatory training is concerned with minimising risk, providing assurance against policies and ensuring that the organisation meets external standards e.g. Insurance & Litigation Reduction Schemes

Core and Essential Skills training is required because:-

- Without such training the individual would be unable to carry out the full range of duties
- The training has been designated as necessary as a result of Governance directed learning from incidents, complaints, adverse events and positive feedback as an organisation with a memory.
- Without such training the individual would be unable to practice e.g. Basic Life support, within their role
- It ensures safe practice or compliance with health and safety procedures
- It is essential to take forward the organisations strategic aims, objectives and values

2.2 Additional definitions

The below definitions assist staff to clarify which type of mandatory/statutory training is appropriate to attend:-

CORE SKILLS FRAMEWORK:
An identified range of mandatory and statutory topics agreed as core learning for staff by regional and national agreement. Content, learning outcomes, format of learning, initial and refresher course lengths and frequency are suggested within the framework.

KEY PERFORMANCE INDICATOR, ADDITIONAL CORE SKILLS
Extra subjects required or existing subjects at a higher compliance level specified by external commissioning bodies

CORE SKILLS PASSPORT & THE WORKFORCE PASSPORT:
A scheme which enables those staff who have completed the core skills framework in total or in part to transfer into a new organisation and have their accredited and in date core skill subjects recognised without repeating the training until their next accreditation date. The Core Skills Passport scheme remains in development however via the Devolution Manchester project the Core Skills Framework will form part of the local Greater Manchester Public Body Workforce Passport, recognition and transfer of learning scheme.

FRONT LINE STAFF:
Staff who come into direct contact on a regular basis with service users and the public as part of their employment. These can include administration and clerical staff, estates and ancillary staff, as well as managerial, executive and non executive staff depending on job role and tasks. This can be in person or by telephone contact.

REGISTERED CLINICAL & SOCIAL CARE STAFF:
Staff who hold a registration with a registered clinical or social care body and are required to maintain that registration by undertaking continuing professional development (CPD).

Additionally unregistered members of staff who have a clinical or social care role/work in an area will need to undertake all relevant training referred to in this category.

NON-REGISTERED CLINICAL & SOCIAL CARE STAFF:
All staff who work in a clinical or social care area but do not possess a registration with a Health or Social Care Professional Accrediting body. These staff are however required to undertake and obtain the competencies identified in the Fundamental Care Certificate, that are relevant to their role.

PERMANENT STAFF
All staff directly employed either by a contract of employment or secondment arrangement with the organisation

TEMPORARY STAFF (including bank staff)
Those who are employed by the organisation in a specific role for a set (usually short) period of time. This may be on a full time or part-time basis. In the case of volunteers, this means individuals who are engaged in an agreed activity with the organisation. Bank staff in this definition have no other substantive role within the organisation.

AGENCY STAFF
Staff who work within Pennine Care but employed and supplied by a procurement framework compliant staffing agency. These staff should be compliant with all core skills framework training and essential to role training as specified by the procurement framework. They will require local induction.

STUDENTS
Professional staff in training or pre-training work experience on placements in the Trust.

TRAINING NEEDS ANALYSIS (TNA)
A breakdown, usually presented in the form of a spreadsheet or table, which contains as a minimum: all staff groups; all training required by each group; and the frequency of training required by each group. Within the Trust, the TNA is termed the Core & Essential Skills Training Matrix.

MINIMUM DATA SET (MDS)
Key subject areas in relation to risk which incorporate aspects of training. These are included within the TNA (Core & Essential Skills Training Matrix).

The mandatory requirements have been decided internally in terms of programme content and frequency of updates required for existing staff in accordance with risk management strategies and current legislative requirements. Therefore this policy will be subject to regular review.

As mandatory, statutory and induction training are mainly concerned with the reduction of risk, all staff will complete the required risk management training appropriate to the staff group they are part of in the time scale (whether initial

or refresher training) required, in order to contribute to the delivery of high quality, safer services and care.

Risk Management Training – A training event or activity which has been approved and deemed as essential by the organisation after taking into account current legislation and guidance and the needs of the organisation.

Subject Matter Expert (SME) – A recognised Trust Lead(s) or expert in a given core, mandatory field that the Trust uses for leadership, management, guidance or expertise in that subject area.

2.3 RISK MANAGEMENT TRAINING PROGRAMME
The TNA is shown in the format of the Risk Management Training Matrix in Appendix 1.

Appendix 1 details the risk management training required by each staff group.

3. ROLES AND RESPONSIBILITIES
The responsibilities of key groups and individuals in relation to Mandatory Training are outlined below:

3.1 Responsibility of the Chief Executive
The Chief Executive is committed to ensuring that all staff attend Mandatory Training as required by their role.

3.2 The Executive Director of Performance establishes the structure, resource deployment and continuous quality review of training to ensure that mandatory training needs are being met.

3.3 Responsibilities of Service Directors and Heads of Service
Service Directors and Heads of Service will ensure that:

- This policy is cascaded throughout their services, supported by the Workforce & Organisational Learning and Development Team (W &OD Team).

- Issues impacting on the efficacy of the programme are fed back to the Director of Workforce & Organisational Development for consideration and possible action.

- Staff within their operational remit are released to attend/complete mandatory training.

- Follow up action resulting from non-attendance or non-compliance occurs.

- Local compliance in relation to this policy is monitored.

3.4 Responsibilities of Service Managers

Service Managers are responsible for ensuring that:

- This policy is applied within their own area.

- Employees and others for whom they are responsible meet their Core and Essential skills training requirements according to the policy and the staff group they are a part of. These requirements must be met before consideration is given to any other training or development opportunities. Core and essential training must be completed before staff are given leave/access to other training opportunities. This should be reviewed, monitored and signed off as part of each staff members' individual performance and development annual review cycle.

- Employees and others for whom they are responsible are released to attend the relevant Core & Essential Skills Training required for their particular job role as identified in the risk management TNA.

- Non-attendance is investigated for employees and others for whom they have responsibility.

- This policy is applied to employees and others for whom they are responsible, who change their role or work locations as this may impact on specific mandatory training requirements.

- Employees and others, for whom they are responsible, are aware of and understand the requirements of this policy.

- When considering the risk management training requirements of temporary staff (see section 3) whether through agency, locum, secondment or casual arrangements, managers should bear in mind the requirements for permanent staff working in a similar role or capacity and the need to ensure that temporary staffs are trained to allow them to work safely.

- Temporary members of staff must be booked onto the Risk Management Training Programme (or partial elements of it) if this is deemed to be appropriate by their manager. In making this decision, the manager should consider the tenure of contract, the requirements of the post to which the individual staff member has been appointed and risk assess accordingly.

- As a minimum, staff employed on short term contracts must complete a local induction checklist. For further information, please refer to the Induction Policy.

3.5 Responsibilities of Workforce & Organisational Development

The Director of Organisational Workforce & OD will oversee the introduction, operation, monitoring and implementation of this policy to ensure the fair and consistent application of the policy throughout the Trust.

The Core & Essential Skills Training Manager will lead content and framework reviews of the Core Skills Training programme in consultation with stakeholders annually.

The Core & Essential Skills Training Manager and the Director of Workforce & OD will lead on compliance with mandatory training monitoring and reporting. Compliance will be reported to the Board and to Service Managers who are responsible for taking action where there is a shortfall.

The W&OD Department will be responsible for:

- Organising Core & Essential Skills training in sufficient capacity to meet the needs of the staff groups concerned in accordance with the agreed programme.

- Developing new ways of effective training that promotes practice based learning, minimises disruption to service provision and encourages Core & Essential Skills training objectives to be translated into practice.

- Liaising with Core & Essential Skills Training Leads and Subject Matter Experts to agree programme provision.

- Develop and promoting the Core & Essential Skills Training prospectus (dates and sessions) through Trust Communications including the L&D intranet site, with sufficient advance notice to facilitate booking without causing detriment to services.

- Entering all data relating to mandatory and non mandatory training attendance onto the designated learning management system. This will identify individual staff members training record.

- Following up non-attendance at and non-compliance with Core & Essential Skills Training with line managers.

3.6 Responsibilities of Core & Essential Skills (CEST) Group

The CEST group will have responsibility for the annual review and content of the TNA which includes the topic areas, the staff groups and the refresher periods.

The CEST will use the following to develop and review the TNA

- Statutory guidance & external investigation recommendations

- the broader training needs analysis undertaken by service areas and work programme groups.

- Issues deriving from Serious Untoward Incidents (SUI's)

- Policies (local, regional and national)

- Reports and / or Inquiries (local regional and national)

- New techniques and / or equipment to enhance clinical skills

- Relevant research findings

- Feedback from training evaluations

- CQC registration outcomes

- Other informal feedback

3.7   The Process for Developing an Annual Training Prospectus which reflects the Training Needs Analysis.

The quarterly CEST group will, in its terms of reference and as a standing item on its agenda review Trust Training Needs Analysis (the Risk Management Training Matrix – Appendix 1). The review will take place at each meeting to consider new and existing TNA drivers as listed in *3.6* above.

Where changes are of the level that they can be incorporated into existing programmes and methods of learning they will be implemented immediately into those programmes.

Where changes or new programmes of learning are required as a result of the review of drivers listed in *3.6* the CEST group will report this into the W&OD annual business planning cycle to ensure that it is developed into the business plan and published as part of the following years Annual Training Prospectus.

3.8   Responsibilities of Subject Matter Expert Training Leads
SME Training Leads are responsible for developing an action plan for delivery of the TNA for their subject areas

- Liaising with the W&OD team to agree dates for the annual training calendar.

- Identifying the training required to meet the Trust's needs in relation to their area of expertise. This will involve undertaking specific training needs analyses where necessary, which may be derived from or supplemented by:

  - the broader training needs analysis undertaken by service areas which in turn will arise from the annual IPDR process

  - Issues deriving from Serious Untoward Incidents (SUI's)

  - Policies (local, regional and national)

  - Reports and / or Inquiries (local regional and national)

  - New techniques and / or equipment to enhance clinical skills

  - Relevant research findings

  - Feedback from training evaluations

  - CQC registration outcomes

  - Other informal feedback

- Designing the training to meet the needs identified within their area of expertise in line with Trust guidelines where available.

- Reviewing their training content to ensure that it is up to date and meets the diverse needs of staff attending the training. Handout material should also be current and dated.

- Cascading these standards to other Trainers who train with them.

- Identifying any shortfall in the capacity to deliver the training required

- Using appropriate Trust evaluation forms. These must be returned by the Trainer to the W&OD Team.

- Deciding what constitutes a sufficient proportion of time to be deemed trained updated or where relevant, competent, with regard to staff attendance at particular mandatory training events. This relates specifically to staff who request leaving an event early or arriving late. Additionally, trainers are responsible for noting such

incidences on the attendance register or removing names from the register with stated reasons.

- Informing the W&OD department on the day of staff who did not attend.

3.9 Permanent Employees' & Temporary Staff Responsibilities
Permanent employees are responsible for identifying where they do not feel competent and arranging a booking on the training through their manager. Personal Training Records are available on request from the W&OD Customer Support team, although as ESR2 and the Self Service Project is implemented across the organisation, managers and staff can access these themselves.

Individuals are responsible for confirming their intention to attend/not attend risk management training sessions (whether initial or update) with the W&OD Customer Support team. Non attendance informed within 24 hours of the course will be recorded as DNA. Continued DNA or withdrawal from courses by either the nominated employee or by their manager will be raised with the manager, as the overall effect will be that the employee remains non compliant with mandatory and statutory education and training. Staff who remain non-compliant (in date with the required level of competency) may be subject to further procedures to support them and hold to account where necessary.

Permanent employees are responsible for ensuring that they attend the risk management training they have booked onto in relation to their role. If employees do not attend an event which they have booked onto their non attendance will be pursued. As such, attendance is monitored rigorously and is reported to appropriate committees and groups on a regular basis. See section 7 for further detail. The policy clearly lays down the procedure for non-compliance, providing recourse to the disciplinary procedure should this be necessary. Non compliance with the required mandatory training (whether initial or update training) may result in an investigation from which possible disciplinary action may be taken in accordance with the Trust's Disciplinary Policy.

Applications for risk management training can be made by staff or managers. If made by staff, individuals must ensure that managers agree planned training dates and have sanctioned the application.

If individuals' roles change this may affect their Core and Essential Skills training requirements. For further information refer to the Risk Management Training Matrix in appendix 1.

4. Core and Essential Skills COURSE APPLICATION & BOOKING PROCEDURE

Training is advertised at a minimum of 6 weeks in advance of the date of the session. The majority of mandatory training programmes will be

planned in advance over the course of the forthcoming business year based on the organisational training needs analysis being planned into the organisational business cycle. This will ensure adequate provision of Core and Essential Skills training based on current business and planned service developments. Core and Essential Skills training will be advertised, along with all other W&OD education activity, through the W&OD Intranet bulletin, updated online weekly and available to all Trust employees, via the Trust Intranet homepage. Line managers should ensure that their staff have access to a copy of the bulletin.

4.1 The majority of training is scheduled within term time with a skeleton provision provided during holiday periods. This is to enable maximum usage and access for staff. Flexible and innovative learning delivery formats will also support continued core training throughout the year and during periods of increased annual leave in order to reduce the pressures encountered in releasing staff for off site training. This may include e-learning and bespoke service focussed mandatory training

4.2 It is the Line Managers responsibility to be aware and to support a staff members application for training. If the line manager cannot support the staff members intended application then the staff member should be informed as to the reasons why they have not had their application for training approved by their line manager and what actions will be taken to undertake the required mandatory training at the earliest opportunity. For new starters following completion of the Corporate Trust Welcome and the Local Induction Checklist, they should complete their identified mandatory training within 3 months of their start date.

4.3 All applicants and their line managers will receive notification of their acceptance or non acceptance on a mandatory training session they have applied for (unless a group booking for a bespoke session has been completed by their line manager). The applicant will also receive joining instructions for the course that set out the detail required for successful course attendance.

5. Core and Essential Skills Training: Course Attendance and Registration

5.1 All staff who attend for face to face training sessions must comply with the joining instructions for the course. This may include, but is not limited to;

- Pre-training course learning activity as directed by the joining instructions;
- Pre-booking risk screening and Occupational health attendance if indicated by the risk screening;
- Ensuring that they *SIGN-In and Out* of the training session at each attendance, so accurate registers are created to

inform the electronic personal record of training compliance and for health and safety requirements;

- Completion of Assessments, Workbooks and Competency Assessment Frameworks within the timescales provided, where they are utilised for both face to face and non direct learning methods;
- Active participation in the programme of mandatory training they are undertaking.

If staff fail to register for a course, participate and undertake necessary assessment of learning then they may not demonstrate the necessary compliance with the learning outcomes to achieve the Core and Essential Skills requirement.

5.2   It is the responsibility of the staff member to ensure they have recorded attendance at face to face training by means of their usual signature on the register provided. From these records a permanent record of mandatory training will be created and electronically stored. If the staff member fails to sign in, W&OD will be unable to create the record and the person will be recorded as Did Not Attend.

5.3   The W&OD Department for the purpose of monitoring, reporting and training needs analysis, records all staffs training history by name. The system used is electronic and is fully compliant with the Data Protection Act.

5.4   W&OD Course cancellations will be avoided where possible. There are certain criteria applied to some Core & Essential Courses by external accrediting bodies and by the nature of the learning exercises, where it may not be possible to run a course e.g. UK Resuscitation Council Guidelines on minimum numbers for ILS Course provision. Another issue may be where there is a sole subject matter expert qualified/able to run the session is absent through sickness. Full course cancellation criteria are identified, along with the required governance actions in Appendix 3. The W&OD Service will provide learners and their managers with as much notice as possible where a course has been cancelled, postponed or rearranged.

6.   EVALUATION OF EDUCATION, TRAINING & DEVELOPMENT

6.1   Line managers have a responsibility for evaluating the impact of Core and Essential Skills training in order to ensure that:

- It has a positive impact on the care and treatment of service users;
- That it meets the key objectives and development needs of the service;
- It enables the staff member, in whatever role they are employed in, to be safe, effective and compliant with all mandatory and statutory guidance applied to their role and/or to the organisation

- That the W&OD Department is kept informed of what training is well evaluated and relevant to the workforce.

6.2   Line managers should evaluate the impact of Core and Essential Skills training and with employees, e.g. as a routine component of supervision or appraisal.

6.3   The Trust Subject Matter Experts and Subject Governance Leads should also evaluate the impact of Core and Essential Skills training along with the CEST training manager to ensure the Trust is achieving compliance with guidance and quality indicators. This will be a standing item on the CEST group.

6.4   All Core and Essential Skills Trainers and Subject Matter Experts who deliver training will undertake regular review of their teaching and learning activity using the Trainer Standards framework (see Appendix 2)

7.   MONITORING AND REVIEW

7.1   The Education Governance Group (EGG) has overall responsibilities for monitoring the Trusts TNA for all permanent staff on an annual basis.

7.2   The CEST group will review and recommend the content of the TNA to EGG for approval annually. Any action plans with regard to delivery of training will be monitored by EGG on a quarterly basis.

7.3   The W&OD Customer Support Team (or trainer where agreed) are responsible for sending an email to managers of all staff who do not attend the training event they have booked onto, a copy of which will be sent to the individual. The email will request that the member of staff books onto the next available training date for the session missed.

7.4   With regard to attendance monitoring, reports will be provided on a monthly basis to service line managers. These comprise risk management training compliance in each service in relation to each mandatory training area. A monthly report will also be provided to line managers detailing staff names and compliance with each area of mandatory training. Percentage compliance will be provided to the Operational Management Groups (Mental Health and Community Services) on a monthly basis in the form of a dashboard report.

7.5   With regard to non-attendance (DNA), line managers will be notified of a staff member's non attendance as soon as the W&OD Team receive an attendance register. This will occur within one day of the training event.

7.6   Progress and issues in relation to compliance will be discussed at CEST group. Action plans will be implemented and monitored by the Divisional Business Units Senior Management Teams.

7.7   Any risks relating to non-compliance or any risks impacting on compliance will be reported to W&OD SMT, The Trust Quality Group and the Director for Operations

7.8   The training prospectus will be reviewed annually by CEST Group. From this policy version, reviews will take place in alignment with the Trust's Business Planning Cycle. Therefore reviews will take place in October in line with Corporate Objectives being set ready for implementation the following April.

7.9   This policy will be reviewed at least every 3 years.

8.   Audit

8.1   The policy will be audited via external audit

Appendix 1 Training Needs Analysis: Core & Essential Training Matrix (Harmonised): Permanent Mental Health & Community Services Staff

NHSLA, Core & Essential to Role Skills	MANDATORY TRAINING Training Topics	Refresher Frequency	Method of Delivery	Mental Health and Community Services Staff Groups											
				Clinical										Non-clinical	
				Registered Nursing & Midwifery		Medical & Dental (Associate Specialist, Clinical Assistant, Consultant, Hospital Practitioner, Medical Director, Speciality Director Staff Grade)	AHP		Addl Clinical Services (Assistant Psychologist, Assistant Psychotherapist, Associate Practitioner, Counsellor, Health Care Support Worker, Healthcare Assistant, Helper/Assistant, Phlebotomist, Play Therapist, Support Time Recovery Worker, Technical Instructor, Trainee Practitioner)		Addl Profl Scientific & Tech (Chaplain, Clinical Psychologist, Pharmacist, Practitioner, Psychotherapist, Social Worker)	Junior Doctors	Estates & Ancillary	Admin/Clerical	Managers
	C = Community Services I = In patient Services			C	I		C	I	C	I					
Core	**Corporate Induction Day 1 :** Topics: Welcome to The Trust* Our Communities Quality matters (PALS & Complaints) Fire Safety Principles of Care (Francis Report recommendations) Counter Fraud Smoke Free Trust Health & Safety Safeguarding Children Safeguarding Adults Equality & Diversity Human Resource Services Library Services Temporary Staffing Arrangements Learning & Development *Including Executive, Non executive board Members	Once	Face-to-face	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓*
Core	**Doctors in Training Induction (1 day):** • As above • Includes GP trainees	Once	Face-to-face									✓			

Category	Training	Frequency	Delivery Method													
Core	**Fire Safety – Community Staff**	3 Yearly	Face to face with e-learning competency check	✓	✓	✓		✓	✓	✓		✓		✓		✓ ✓ ✓ ✓
Core	**Fire Training - Inpatient Services** Annual for In patient/Residential Clinical and Non clinical inpatient staff e.g. ward clerks. This also Includes Fire Marshall Training.	Annual	Face to Face		✓	✓*			✓			✓		✓	✓	✓	✓*	✓ if clinical operational in in
	Fire Warden Training (Area Specific) Level 3 * Only if nominated as part of the staff members role	3 Yearly	Face to Face	✓*	✓	✓*		✓*	✓*	✓*		✓*	✓*	✓*	✓*	✓	✓	✓*
Core	**Level 1 Object Moving and Handling/Back Awareness** * If the clinical role includes Level 2 Patient Moving & handling need then these staff are not required to undertake level 1 Moving and Handling	3 yearly	E-learning	✓*	✓*	✓*		✓*	✓*	✓*		✓*	✓*	✓*	✓*	✓	✓	✓*
Core	**Level 2 Person Moving and handling** * if role involves the moving and handling of service users/patients	2 yearly	Face to Face	✓*	✓*	✓*		✓*	✓*	✓*		✓*	✓*	✓*				✓* if clinical operational
Core	**PSTS: Lone Working and Personal Safety** plus Disengagement * If working with service users, carers or the public	Every 3 Years	Face to Face	✓	✓	✓		✓	✓	✓		✓	✓	✓	✓	✓	✓*	✓*
	Conflict Resolution Training – Community Services Only * If working with service users, carers or the public	Every 3 Years	Face to Face initially then e-learning	✓	✓	✓		✓	✓	✓		✓	✓	✓	✓	✓	✓*	✓*
Core	**Violence Reduction & Positive Behaviour Support: Team Physical Interventions – Mental Health Inpatient Teams** (5 Day courses repeated every 3 years) *If AHP is working in Adult IP Service ** If Assistant AHP of Health assistant is working in Adult or CAMHS IP area	5 day course then annual 2 day update	Face to Face	✓	✓			✓*	✓*	✓**	✓**							✓ if clinical operational
	Violence Reduction & Positive	3 day then		✓	✓			✓	✓	✓**	✓**							✓ if

Category	Course	Frequency	Delivery												Notes
	Behaviour Support Team Physical Interventions – Community Services Learning Disability Residential Staff	annual update						*	*						clinical operational
Core	**Violence Reduction & Positive Behaviour Support Older Adults Team Physical interventions** *If AHP is working in Older Adult IP Service ** If Assistant AHP of Health assistant is working in Adult or CAMHS IP area NB Some Older Adults Staff require Level 4 Course given Step Down or response arrangement	2 day Course then annual 1 day update	Face to Face	✓	✓			✓*	✓*	✓**	✓**				✓ if clinical operational
Essential	**Search and Secure Driver** * If working in inpatient areas where search procedures are used or use of secure vehicle is required.	1 day	Face to Face	✓*	✓*			✓*	✓*						✓ if clinical operational
Core	**Equality & Diversity Level 1**	3 Yearly	E-Learning	✓	✓	✓		✓	✓	✓	✓	✓		✓	✓	✓
	Equality & Diversity Equality analysis/EIA training *(where managing others)	Once														✓* If Managing Others
	Equality & Diversity E&D for Managers *(where managing others)	3 Yearly														✓* If Managing Others
Core	**Basic life Support – Level 1(Summoning Assistance)**	Once: induction	Face to face	✓	✓	✓		✓	✓	✓	✓	✓		✓	✓	✓
	Basic Life Support – Level 2* (Staff with Direct Patient or Visitor Contact)	Annual: Mandatory Day	Face to Face	✓		✓		✓	✓	✓		✓		✓		✓*	✓* if clinical operational

Category	Training	Frequency	Delivery	C1	C2	C3	C4	C5	C6	C7	C8	C9	C10	C11	C12
	PBLS – Level 2 (Staff with Direct Contact with Children)	Annual	Face to face	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓*	✓* if clinical operational
	ILS – Level 3 (If working where rapid tranquilisation is used, ECT, Intermediate Care Hospitals, Walk in Centres and Community Dental Teams)	Annual, alternate years full ILS and ILSr	Face to Face		✓	✓		✓							✓* if clinical operational
Core	**Health and Safety Level 1**	3 Yearly	E-Learning	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Health & Safety (Level 2) Certificate * ONLY for H&S Representative, Local/Trust H&S Chairs	Once	Face to Face	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓*
Core	**Infection Prevention & Control Level 1** Includes Hand Hygiene	3 Yearly	E-learning	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Infection Prevention & Control Level 2 Includes Hand Hygiene **Please Note** Community Dental Teams undertake (IC) HTM-01-05 training (Dental only) annually to achieve the Level 2 competency	Annual	E-learning	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓* if clinical
	Aseptic Non Touch Technique (ANTT) * Only if using invasive procedures (this may include some AHP's such as physiotherapists who provide injection procedures into joints for example	Annual	Face to Face/ Competency Assessment	✓	✓	✓	✓*	✓*	✓*	✓*					operational
Core	**Safeguarding Children** **Level 1**	Once then updated Mandatory training day	Induction E-Learning & Mandatory day	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Safeguarding Children **Level 2 Child Protection Training** * All Staff whose role may bring them into contact with children.	3 yearly 3.5 hours	Face to face training	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓*			✓*	✓* if clinical operational
	Safeguarding Children **Level 3 Child Protection Training** This can be Single Agency, Multi-Agency, Multidisciplinary, or Specialist Child Protection	Minimum of 6hrs to be achieved	Single agency training	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓*	✓		✓*	✓* if clin

Category	Topic	Frequency	Method														
	Topics. *(where role is predominantly working with children or parents of children or role requires the staff member to assess parental capacity)	over 3 years															ical op era tion al
	Safeguarding Children Level 4: *Training for Trust Lead Child Protection Specialists (ONLY) Trust Child Protection Specialists	3 Yearly	Multi agency Face to Face															✓*
Core	**Safeguarding Adults – Level 1 (covered in induction)**	once	Face to Face	✓	✓	✓		✓	✓	✓		✓		✓	✓		✓	✓
	Safeguarding Adults – Level 2 * if role involves working with service users/patients, relatives or public	Every 3 Years	E –Learning	✓*	✓*	✓*		✓*	✓*	✓*		✓*	✓*		✓*	✓*		✓*	✓*
	PREVENT – HealthWRaP	Every 3 Years	Initially face to face and then e-learning															
Essential	**Safeguarding Adults – Level 3 Manager Training (Local Authority Provider)** * Band 6 Upwards and only if required by role	Every 3 Years	Face to Face	✓*	✓*	✓*		✓*	✓*				✓*						✓*
Essential	**Care Programme Approach – Level 2** (For All Mental Health Clinical Staff)	Once	E-learning	✓	✓	✓		✓	✓			✓		✓					✓* if clin ical op era tion al
	Community Higher Clinical Risk Formulation Training inc Care Programme Approach – Level 3 Care Coordinator (*For those in Care Coordinators Role Only)	3 yearly	Face to Face	✓		✓		✓				✓							
	Clinical Supervision, Supervisor Training Clinical and *discretionary staff who have direct patient contact	Once	Face to Face	✓	✓	✓		✓	✓	✓		✓		✓			✓*		✓* if clin ical op era tion al
	Management Supervision (First Line Management Training) Pre or post taking up any manager role in the organisation	Once	Face to Face																✓* If Ma na gin

																	g Others
Essential	**Complaints Training – Level 1** (As part of Quality Matters presentation and Induction Workstation)	Once	Face to Face	✓	✓	✓		✓	✓	✓		✓		✓		✓	✓	✓
	Complaints Training – Level 2 (Investigation of Complaints and Claims for Senior Managers)	Once																✓* IF required by role
Essential	**Dual Diagnosis**	Once	Face to face	✓	✓			✓	✓	✓		✓		✓				
Statutory	**First Aid at Work (FAW)** * Only if nominated as part of the staff members role	3 yearly	Face to Face	✓*	✓*	✓*		✓*	✓*	✓*		✓*		✓*		✓*	✓*	✓*	✓*
	Emergency First Aid at Work (EFAW) * Only if nominated as part of the staff members role	Annual	Face to Face	✓*	✓*	✓*		✓*	✓*	✓*		✓*		✓*		✓*	✓*	✓*	✓*
Essential	**Food Hygiene – Level 1**(Induction & Mandatory Day)	3 yearly	Face to Face	✓	✓	✓		✓	✓	✓		✓		✓		✓	✓	✓	✓
	Food Hygiene – Level 2 (Food Hygiene Certificate) * ONLY if staff role requires food preparation tasks with service users	3 Yearly	Face to Face	✓*	✓*			✓*	✓*	✓*		✓*							
Essential	**Health Records** *ANYONE who has ACCESS to health records	3 Yearly Update	Face to Face/e-learning	✓	✓	✓		✓	✓	✓		✓		✓*		✓		✓*	✓*
Essential	**Human Resource Courses** **Harassment and Bullying,** Appraisal, Recruitment & Selection, Competency Based Interviewing Conduct & Disciplinary ***if required by job role**	Once	Face to face																✓* If Managing Others
Essential	**Information Governance** Level 1 e –Learning (1 month of induction)	1 month	E Learning	✓	✓	✓		✓	✓	✓		✓		✓		✓	✓	✓	✓
	Level 1 e –Learning	Annual	E-Learning	✓	✓	✓		✓	✓	✓		✓		✓		✓	✓	✓	✓
	Level 2 Information Risk Training* Only if your role is Information Asset Owner, Information Asset Administrator &/or Senior Information Risk owner	Annual	E-Learning															✓*	✓*
	Level 3 –Subject Access Co-ordinator Training*	Annual	Face to Face															✓*	✓*

Class	Training	Frequency	Method	1	2	3	4	5	6	7	8	9	10	11	12	13
Essential	**Innoculation incidents/Anaphylaxis/Imms and vacs PGD** – Epipen and Adrenaline Ampule *if involved in immunisation, vaccination or requires knowledge of extreme allergic reaction	Annual	Face to face	✓*	✓*	✓*	✓*				✓*		✓*			
	Imms & Vacs for Signposters	Annual	E-Learning	✓	✓	✓	✓				✓		✓			
Core	**Breastfeeding Awareness (level 1)**	Once - Induction	Reader/Information	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓
Essential	**Infant Feeding Competency Awareness (Level 2)**	Initial Once	Face to Face & CAF	✓*												
	* Essential to role for Community Services health Visitors	Refresher Annual	Face to Face & CAF	✓*												
Essential	**Medical Devices Training** *As required by device use	Defined by Device Guidance	Blended learning	✓*	✓*		✓*	✓*		✓*	✓*	✓*	✓*			✓*if clinical operational
Essential	**Medical Gas training**	3 yearly	Face to face	✓	✓						✓					
Essential	**Medicines Management Level 2** *(Anyone involved in the handling and administering of medication)	Every 3 years	E-learning and C.A.F	✓*	✓*	✓*				✓*	✓*		✓*			
Essential	**Mental Health Law Level 2 Mental Health Act Training** (Level 2 clinical risk training) Mental health & learning Disability Staff ONLY *if mental health Act Administrator Includes Childrens Act & consent issues	3 yearly	Face to Face	✓	✓	✓	✓	✓			✓		✓		✓*	✓*if clinical operational
	Mental Health Law Level 3 : legal training for mental Health Staff and Managers Other staff can book on but only mandatory for identified groups	3 Yearly	Face to Face		✓											✓
	Mental Health Law Level 2 Mental Capacity Act COMMUNITY SERVICES STAFF ONLY	Once	E-Learning	✓	✓	✓	✓	✓	✓		✓	✓				✓*if clinical operational

		Frequency	Method										Notes
	Mental Health Law **Level 2 Mental Capacity Act** Mental Health & Learning Disability Staff ONLY Includes Childrens Act & Consent Issues	3 yearly	Face to Face	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓*if clinical operational
	Mental Health Law **Level 2 Deprivation of Liberty Safeguards** Mental Health & Learning Disability Staff Only as part of POG/Clinical Risk Training	3 Yearly	Face to Face	✓	✓	✓		✓	✓			✓	✓	✓*if clinical operational
	Mental Health Law **Level 3 Focussed Deprivation of Liberty Safeguards training** *Community Service,Mental Health & Learning Disability Staff ONLY IF duties include supporting transitional care e.g. Home to Hospital, Hospital to residential, visiting in day centres	3 Yearly	Face to Face	✓*	✓*	✓*		✓*	✓*			✓*	✓*	✓* Band 5 and Above
Essential	**Observations of service users** *In Patient mental health & LD staff if required by role	Once as part of MVA L4	Face to Face		✓				✓*		✓			
Essential	**Payment By Results Training** **(Mental Health Staff Only)** * Band 5 and Above	Once	E-Learning	✓*	✓*	✓*		✓*	✓*	✓*	✓*	✓*	✓*	✓* If Clinical operational
Essential	**Patient Group Directives** * if involved in the specific PGD subject clinically Mental Health — **PGD** Naloxane, Naltrexone, Flucoxicillan, Erythromycin, Oral Lorazepam	Once Only	E-Learning/Blended Learning	✓*	✓*	✓*		✓*			✓*		✓*	

Category	Training	Frequency	Method													
	PGD Adrenaline/Epinephrine 1 in 1000 Injection BP (1mg/ml) **PGD** INFANRIX-IPV (Dta/IPV) for Vaccination **PGD** Measles, Mumps & Rubella: Priorix for Vaccination **PGD** Measles, Mumps & Rubella: MMR Vax PRO for Vaccination **PGD** Meningococcal Group C Conjugate Vaccine (Menjugate or Meningitec) for Vaccination **PGD** Papillomavirus Vaccine (Cervarix) for Vaccination **PGD** PEDIACEL (DTa/IPV/Hib) for Vaccination **PGD** PNEUMOVAX II : PNEUMOCOCCAL 23-VALENT POLYSACCHARIDE VACCINE for Vaccination **PGD** REPEVAX (dTaP/IPV) **PGD** REVAXIS (Td/IPV) **PGD** Typhim Vi and Typherix Typhoid Polysaccharide Vaccine * if involved in the specific PGD subject clinically _(Community services)_	Once	E-Learning Blended learning	✓*													
Essential	**Rapid Tranquilisation** (within MVA Level 4 training)	3 yearly	Face to face	✓	✓						✓					
Essential	**Risk Management Training Level 1**	Induction 3 Yearly	e-learning	✓	✓	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓
	Clinical Risk Assessment & Management Formulation Training (Registered Staff) * Mental Health & Learning Disability Clinical (Registered) Staff Only (Principles of Governance, STORM, Level 2 Adult Safeguarding, MVA Violence risk management, Sexual Abuse Training	3 yearly	Face to Face	✓*	✓*	✓*		✓*	✓*			✓*					✓* if clinical operational
	Clinical Risk Assessment & Management Awareness Training Level 3.1 (Un-Registered Staff) * Mental Health & Learning Disability Clinical (Registered) Staff Only	3 yearly	Face to Face							✓*	✓*			✓*			

	Slips trips and falls – Level 2 *National falls prevention week/Local Strategy participation if working with Older people or those deemed at risk of falling for other reasons	Annual Evidence	Blended Learning	✓*	✓*	✓*		✓*	✓*	✓*	✓*	✓*				
	Slips trips and falls – Level 3 Clinical Risk Training ** For those staff who take a lead role in assessing/advising on service user, slips trips and falls	Annual evidence	Blended Learning	✓**	✓**			✓**	✓**							
Essential	**Smoke Free Trust** – Level 1 Awareness	Once	Face to Face	✓	✓	✓		✓	✓	✓	✓	✓		✓	✓	✓	✓
	Smoking Cessation – Level 2 Brief Intervention Training *Managers to nominate by role for each clinical service	Once	Face to Face													
	Smoking Cessation – Level 2 Smoking CessationTraining *Managers to nominate by role for each clinical service	Once	Face to Face													

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APPENDIX 2: TRAINER STANDARDS
Standards for anyone delivering Education, Learning and Development

Introduction

These standards have been developed for anyone delivering learning and development and training to Pennine Care staff. This includes all trainers and practitioners working within the Learning and Development, OD and Core and Essential Skills training (CEST) teams.

The standards will also be used for all other programmes that are commissioned and delivered through the Organisational Learning & Development (OL&D) team and the Educational Governance Group (EGG). They will be monitored via EGG and the sponsor for the training. Review of the standards will take place on a yearly basis and evidence signed off by the overall lead for each service. Responsibility for implementation of the standards to ensure high quality delivery lies with the individuals and service areas that either deliver or commission training.

The self assessment sheets have been designed as a way of reflecting on and assessing current levels of competence for all those that either deliver or commission training across the Trust. Depending on your role, the completion of a self assessment is actively encouraged. The standards could also potentially be used by managers as part of management supervision and IPDR processes to support the development of confidence and competence.

The Trainer Standards also apply to:

a. **Subject Matter Experts (SME)**

SME trainers are defined as individuals whose role includes a specific remit to deliver training as part of their role across a subject area where they are the lead expert within the organisation. This includes all individuals who deliver training across the whole organisation for example subject matter experts for core & essential skills training (CEST) such as fire training, equality and diversity, infection control,

mental health law etc. Typically this training is provided to a range of staff across the organisation and is co-ordinated through the Learning & Organisational Development service.

Specifically for SMEs who deliver CEST these standards will be reviewed by the CEST manager on a yearly basis, monitored via the CEST sub-group, and evidence signed off by the Educational Governance Group.

b. External trainers

These standards will also be used to contract and monitor all activity of externally commissioned trainers through OL&D. The standards are recommended for use by any service considering using external providers, with support from OL&D.

Clinical Practice Trainers

Clinical Practice trainers are defined as individuals who have specific knowledge and expertise that is used to deliver training within a practice area, department or service.

Support and Advice

Support and advice for implementation of these standards into practice is provided by the Learning & Development team including the provision of a 'training network and development programme' to support the key aspects of these standards.

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SELF ASSESSMENT FOR ALL TRAINERS

Rate yourself on a scale of 1-5 for each area, 1 = no evidence, 2 = some evidence of working towards the standard, 3 = partially met, 4 = majority of standards met, 5 = fully meets. Only fill in the sections relevant to you and your role.

Standard	Evidence for All (including internal, clinical practice and external trainers)	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
1. Learning needs have been identified systematically and are linked to corporate/service/ department objectives	A learning needs analysis has been completed/agreed with a clear plan of training needs, priority, target groups and link to corporate objectives		A commissioning and evaluation template is completed and supported by Learning & Development stating learning objectives/outcomes and senior sponsor		All proposals should demonstrate how the learning needs identified by the organisational sponsor will be met	
	All training should have clear links to Trust objectives and/external standards		All core and essential training (CEST) must be approved by the CEST sub group and be supported by the CEST manager			
	All training should have clear links to the Principles of Care		All SMEs for CEST will agree to deliver a contracted number of sessions to be delivered each year which will meet the agreed capacity for the organisational standards. These will be agreed by the sponsor and/or management lead for that service			

Standard	Evidence for All (including internal, clinical practice and external trainers)	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
2. All trainers are competent to deliver training	Trainers must possess the appropriate skills, subject relevant qualifications and/or current up to date knowledge, and/length of experience related to their subject area		Should possess training/teaching qualifications such as PGCE, PTTLs, CTTLs, CIPD, ENB998 or completed a Pennine Care in-house 'Train the Trainer' programme, or completed a 'grandparenting' process with OL&D where the SME demonstrates how previous experience and training meets the standard		The first session of any newly commissioned training will be observed/monitored by the commissioner of the training with support from OL&D	
	All trainers should receive feedback from a peer who observes a session, at least once a year.		All trainers to receive observational feedback from a Learning and Development/CEST team member at least once a year		All external trainers to be observed and receive feedback from the commissioner of the training at least once a year which will utilise the L & D peer evaluation document	
	All trainers share good practice with others, undertake CPD and access resources for their own professional development. This should be evidenced in their learning portfolio and IPDR		CEST SMEs attend an agreed number of sessions from the 'trainer network and development programme' each year as agreed by the CEST manager			

Standard	Evidence for All (including internal, clinical practice and external trainers)	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
3. Clear outcomes are agreed for all training and all training is planned and developed using appropriate training methodology	Learning objectives/outcomes using SMART principles are agreed and utilised for all training and learning interventions with clear outcome measures identified.		For CEST training all outcomes should meet 'core skills framework' outcomes			
	All sessions are documented using robust teaching/learning plans, schemes of work or detailed training plans (with flexibility) which outline content and methodology to meet the agree learning outcomes. Proformas and samples are available from OL&D					
	Training uses a variety of resources and techniques appropriate to the subject to allow all learners to fully engage					
	The development and implementation of learning interventions include service users and/service representatives where appropriate					
	All training materials utilising Trust paperwork for case studies/scenarios etc must have a watermark that clearly indicates that this is non confidential training material. To avoid any confusion, this material should be collected back in from participants and securely disposed of					

Standard	Evidence for All (including internal, clinical practice and external trainers)	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
4. A learning environment is created in which learners feel safe and supported	The aims, objectives and schedule for training is explained to all delegates and ground rules/expectations are agreed for working together					
	The location and venue for the training has been risk assessed and any potential hazards identified or mitigated. The maximum number of attendees for the venue if not exceeded.					
	Housekeeping and fire procedures are explained at the start of the training session.					
	Regular breaks are built into the training schedule.					
	The trainer should ensure that all health and safety issues are addressed i.e. register and housekeeping at the start of any session.					
5. The trainer demonstrates an understanding and commitment to equality, diversity and inclusion	Training materials, case studies and sessions should incorporate equality and inclusive learning and engage in diversity					
	Trainer has attended equality and diversity training that meets Pennine Care CEST requirements					

Standard	Evidence for All (including internal, clinical practice and external trainers)	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
6. Learning is practice focused	The design and delivery of the training and learning opportunity promotes learner interaction, reflection and values individuals experiences					
	Learning is embedded to practice through use of case studies, practical examples, scenarios, practice of skills etc					
	A range of effective teaching and learning techniques are used i.e. group work, role play etc which meets the needs of learners and enables them to apply learning to practice/the workplace context					
7. The trainer demonstrates effective communication skills	Trainer is able to effectively demonstrates group management, listening, questioning, presentation and facilitation skills		CEST trainers materials/handouts should be placed on the Intranet for learners to access			
	The training uses techniques appropriately in a range of learning contexts					
	The trainer is able to communicate effectively overcoming identifiable barriers, using different formats; written, oral and non verbal techniques					

Standard	Evidence for All (including internal, clinical practice and external trainers)	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
8. The trainer should demonstrate they are able to recognise the need for language, literacy and numeracy skills	The trainer ensures they are able to recognise learners needs and how to support/signpost in terms of key skills; communication, numeracy, IT, working with others, improving own learning and performance and problem solving.					
	It is recommended that all trainers attend a session on basic skills awareness arranged through the OL&D department to achieve this standard					
9. All training and learning interventions include assessment of learning, knowledge and/or competence	Learning outcomes are developed and clearly linked to expected levels of competency. How will success be measured?		For all CEST training core knowledge requirements and/or competency should be assessed at the end of the training using an appropriate method such as a quiz or practical assessment which demonstrates skills			
	Where appropriate, learning is assessed using questioning, feedback and discussions during the training. Appropriate feedback and support is given to learners.					
	The trainer uses appropriate assessment tools to evaluate the effectiveness of learning and knowledge, this may include pre and post training assessments, workbased projects, case study discussions etc					

Standard	Evidence for All	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
10. All training is evaluated	An end of course evaluation form should be used for all training. A generic Pennine Care evaluation form is available which can be amended/edited to meet needs		Specific organisational evaluation measures are agreed prior to commencing any new training programme.			
	Follow up evaluations should be used to assess how skills and/or knowledge have been put into practice with the timings for this evaluation to reflect the learning outcomes. A generic Pennine Care follow on-evaluation form is available which can be amended/edited to meet needs. This could for example be requested from learners 1, 3 and 6 months following the learning intervention.		A senior sponsor in the organisation is identified to 'sign off' training and outcomes and monitor evaluations. Typically this would be the senior lead for the specific subject and/or the Educational Governance Group.			
11. All training is administered, organised and recorded appropriately	Adequate notice (8 weeks) is given to the customer service team of the date and details of the training, including resources required. A booking form should be completed prior to booking training.					
	It is the trainers responsibility to ensure accurate records are maintained including training registers					

Standard	Evidence for All	Rating 1 - 5	Subject Matter Experts	Rating 1-5	External Trainers	Rating 1-5
	All training attendance will be recorded on OLM. Course registers should be returned to OL&D within 48 hours of the date of the training to ensure attendance is accurately recorded					

'These trainer standards are based on the national standards set out in the 'New overarching professional standards for teachers, tutors and trainers in the lifelong learning sector' (2007)

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APPENDIX 3:

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Organisational Learning and Development

Course Cancellation Criteria

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The Organisational Learning and Development team will make every effort to ensure that courses that are advertised are run. There will be circumstances where unfortunately we will need to cancel courses and these are outlined below.

Courses may be cancelled in advance of the course running or on the day of the course. A decision to cancel a course will be authorised by a senior manager within the OL&D team and contact will then be made with people who are booked onto the course. Alternative provision will be made available where appropriate.

Criteria for cancelling

1. If the numbers booked onto the course are below the agreed minimum for the course then a course cancellation will be made 1 week before the course is due to run. Information is provided below for the agreed minimum on specific courses.
2. If the numbers of people that actually attend on the day of the course are below the agreed minimum then the course will be cancelled on the day.
3. If the facilitator is absent/ sick and we are unable to find a replacement we will cancel the course. We will endeavour to have back ups in place but this may not always be possible due to skill and capacity.
4. If essential materials/ equipment or facilities are not available for the course.
5. Business continuity: If there is a significant adverse event affecting the Trust a decision to cancel courses will be made and staff informed.

Minimum numbers for courses

- **ILS Courses (Accreditation & Refresher)**
  - Less than 3 participants attend (Resuscitation Council guidance on ability to run required scenarios)
- **STORM Courses**
  - Less than 3 participants attend (Unable to run required group-work)
- **PMVA Level 2/3**
  - Less than 2 participants attend (unable to run required group-work)
- **PMVA Levels 4 & 4.1**
  - Less than 4 participants attend (unable to carry out team restraint practice
- **PMVA Level 5**
  - If vehicle is not available (driver exposure is a required element of the course) search will still go ahead
- **All other courses**
  - The agreed minimum number for a course to run is 60% of the maximum places available. The agreed minimum number for a course to go ahead on the day will be 4 participants.
    Where courses have small numbers attending on the day the course may be modified to take account of this whilst ensuring that the learning outcomes are still met.

Reporting

A report (*incident)* will be generated on cancellation of a course and informed through the OL&D senior management team meeting and the OL&D dashboard.