

Induction and Essential Training Policy

Please be aware that this printed version of the Policy may NOT be the latest version. Staff are reminded that they should always refer to the Intranet for the latest version

Purpose of Agreement	To outline the policy, procedure and requirements of all staff in relation to mandatory training and induction, including local induction.
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Amendments Summary:

Amendment	Page	Item	Action
	Throughout document	Name change from 'Corporate' to 'Trust' induction	
	Throughout document	Name change 'Employment services' to 'Recruitment team'	
	Throughout document	Name change from 'Workforce, Education & Training' to 'Learning and Development' team	
1.3	5	Changes to what is covered on Trust induction, day 1	
4.1	7	Swap order of responsibility putting attending Trust induction first.	
4.5	9	Updated 'Director of Human Resources & Organisational Development' to 'Chief Officer for People & OD'.	
5.1.9	10	Changes to the day's programme	
6.1.2	11/12	Changes to 6.1.2 and 6.1.3	
8.2	12	Change 'Workforce Development Sub Committee' to 'People and OD Committee'	
Appendix B	16	Changes to the Trust Induction's programme	
Appendix C	17	Changes to competencies	
Appendix D	20	Changes to Local Induction Process	

Review Log

Version Number	Review Date	Name of Reviewer	Ratification Process	Notes
1.3	December 06	Liz Page		
2.0	September 07	Liz Page		
3.0	April 2009	Ceri Connor		
4.0	March 2010	Bob Butel/Ceri Connor		
5.0	December 2010	Ceri Connor	PSG January 2011	
6.0	March 2013	Ceri Connor/ Bob Butel/Andy Harding		
7.0	January 2016	Ceri Connor/Bob Butel	Policy Steering Group	
8.0	March 2019	Kathryn Smith/Bob Butel	Policy Steering Group	

Executive Summary

This revised policy gives a comprehensive guide on the Trust Staff Induction process for all new members of staff including Bank staff, contractors and volunteers.

It details the content of the Trust Induction day and the subjects to be covered on Local Induction.

It continues to detail our Local induction process which is accessed via the new member of staff's e-learning page. Completion of the local induction form by the member of staff and their Manager will automatically give them compliance.

Attendance on the Trust Induction Day and completion of the Local Induction process ensures that the Statutory subjects of Essential Training are completed during the new starter's induction period. In addition, the HR Recruitment Team now routinely ask new staff joining from another NHS Trust, to provide evidence as part of their pre-employment checks, that they are up to date with their essential training.

The policy gives further guidance to staff on the Essential Training modules they are required to undertake and at what frequency relevant to their role. The monitoring process is designed to ensure compliance is achieved within the given time frame.

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Induction and Mandatory Training Policy

1.0 INTRODUCTION & PURPOSE

- 1.1 A robust and relevant induction into the organisation is essential in order to enable and maintain the ability of new employees to become part of a motivated and competent workforce. The induction is a crucial part of the recruitment and selection process and a well-planned induction can help to ensure that new starters feel valued and welcomed.
- 1.2 It is during the induction period that the Trust imparts key information on the legal framework in which Solent NHS Trust operates. For example, healthcare governance, risk management, health and safety management and employment law should be discussed with new employees very early on in their employment.
- 1.3 The induction has two key components:-
- Trust Staff Induction Part A
A full day programme accessed on the first day of employment, unless there are unforeseen and unavoidable circumstances, where new staff receive a welcome and introduction to the organisation. On this programme new staff will gain information about the organisational strategy, objectives and values. Information will be given about quality and safety priorities. They will also have an introduction to the online learning system and how to access the e-learning elements to complete their induction process.
 - Local Induction Part B
The local induction must be completed by the manager or their representative, alongside the new starter on the **first day** in their regular workplace. All new starters to the trust are enrolled onto the “**Online Local Induction**” course within ESR. This element is required by law, and is crucial to the orientation and safety of the new starter. This is a well-structured induction programme consisting of both Trust and local elements, which will ensure that a new starter receives all the essential information and guidance they need to enable them to start working as quickly and as safely as possible. Completion of this online local induction is a requirement for all new employees but also a valuable guide for managers/supervisors which highlights training needs, skills and possible safety risks. Completion of this induction will be recorded against the new starters training record and the relevant competencies will be awarded when submitted. The course can be found under ‘**Enrolments**’ on the new starter’s E learning user page. Simply hit the play button to begin the programme.
 - Induction is only achieved and recorded as such when both local and corporate elements are complete. This is reported in the Trust Workforce Report on a monthly basis.
- 1.4 **Essential Training (Statutory and Mandatory Training)**
Annual requirements for essential training are determined as per individual learning matrix as “competencies” with completion dates. Training listed on the matrix consists of all statutory training required by law and by the Department of Health, and mandatory training required by Solent NHS Trust for its entire staff, and is a mix of online and classroom based learning. There are various programmes to ensure organisational compliance and these are detailed within this policy and supporting appendices.

2.0 SCOPE

- 2.1 This policy applies to locum, permanent, and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), bank staff, Non-Executive Directors within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, agency workers, and other workers who are assigned to Solent NHS Trust.
- 2.2 Bank staff employed by the Solent Bank Staffing Service will attend the Trust Staff Induction, and will receive a local induction to each new working area. Compliance to Statutory and Mandatory Training is monitored via the Bank Staffing Team and reported in the same manner as substantive staff.
- 2.3 Solent NHS Trust is committed to the principles of Equality and Diversity and will strive to eliminate unlawful discrimination in all its forms. We will strive towards demonstrating fairness and Equal Opportunities for users of services, carers, the wider community and our staff.
- 2.4 It is recognised that local services and teams may hold their own local induction in addition to the requirements in this policy; however the requirements of this policy must be complied with prior to any locally devised induction. Information and records relating to Service or team inductions will be held locally and are not the responsibility of the central Learning & Development team.

3.0 DEFINITIONS

Statutory Training

This is that training that employers are either legally required to provide as defined by law and for which there is a stated legal reference and/or where a government or regulatory body has instructed employers to provide training on the basis of legislation. These examples would include:

- Health and Safety training (required by legal statute).
- Fire safety training is required by statute as determined by the Regulatory Reform Order (Fire) 2005.

Mandatory Training

This is a training requirement that has been determined by the organisation. This can include: Mandatory training requirements required by a government department or regulatory body as part of the implementation of an agreed national policy. For example, in England all staff are required to undertake Information Governance training on an annual basis.

Mandatory training requirements can also be set by individual healthcare organisations. These requirements are usually introduced to ensure that the organisation is compliant with key risk areas that might have an impact upon safety or are being delivered to achieve a corporate priority which the organisation has set itself. Typically, this type of training is undertaken to provide assurance that local policies governing key corporate and risk activities are understood and followed by employees. Given that the terms Statutory and Mandatory training are often used interchangeably, this policy uses the term **Essential Training** to refer to those Statutory and Mandatory subjects which we are required to deliver to our workforce, in order to meet either legal training requirements or comply with key quality standards as expected by healthcare regulators.

- 3.1 **Trust Staff Induction (Appendix B).**
This is a one day induction programme which is designed to welcome new employees to Solent NHS Trust and must be attended on the first day of work.
- 3.2 **Local Induction Form**
This is the electronic form that must be completed with all new staff (permanent / temporary) commencing on or before their first day in the workplace.
- 3.3 **Essential Training**
The level staff undertake will be dependent on their role Clinical or Non – Clinical as per appendix C.
- 3.4 **Essential Training Level 1**
This includes core subjects that are statutory or mandatory or deemed essential for all staff on an annual, bi-annual or three yearly basis achieved either via e-learning or classroom based.
- 3.5 **Essential Training Level 2 & 3**
These are more advanced levels of Essential Training that staff are required to complete in addition to or in place of the Level 1. This training is detailed on the Individuals training matrix and are aligned to the UK Core Skills and Training Framework, NHSLA, Professional Body and legislative requirements.
- 3.6 **Did Not Attend (DNA)**
This describes a member of staff who has been booked onto Trust Induction or other training courses but has failed to attend, or has failed to complete the local induction checklist and e-learning elements.
- 3.7 **Training Needs Analysis (TNA)**
With the increased use of technology to access training the individual TNA in the form of a matrix will be available to staff as they log on to complete Essential Training, this TNA will continue to develop as training needs are identified for the individuals role.
- 3.8 **Permanent (as applied to staff)**
All staff directly employed under a contract of employment with the organisation and medical staff in training.
- 3.9 **Temporary (as applied to staff)**
Temporary staff are workers supplied by one organisation (locum/staffing agency, e.g. NHS Professionals) for the temporary use of another organisation. Temporary staff are the employees of the supplying organisation. Temporary staff are also staff working on the Bank who carry out a temporary bank contract for less than six months.
- 3.10 **Service / Senior Managers**
These are managers who are responsible for a clinical service or team of employees.

4.0 ROLES & RESPONSIBILITIES

4.1 Individual members of staff are responsible for:-

- Attending Trust Staff Induction on the date advised by the Peoples Services, unless there is an unforeseen and unavoidable reason.
- Completing those sections of the Local Induction Form as agreed between the line manager and the new starter.
- Booking onto the relevant courses for their role via Oracle Learning Management.
- Putting their learning into practice – particularly around identifying risk and raising potential hazards to their manager.
- Evaluating the effectiveness of learning with their manager.
- Taking responsibility for their safety and welfare.
- Completing the e-learning modules of Essential Training within timescales shown on their matrix.

4.2 Managers are responsible for:-

- Ensuring their staff's Trust staff and local inductions are completed within the required timescales in accordance with this policy.
- Approving any agreed class room based courses via the use of ESR.
- Allocating protected time to allow staff to complete their essential training.
- Ensuring staff are released to attend all required Essential Training programmes.
- Ensuring cancellations are kept to an absolute minimum and that staff who "Do Not Attend" are dealt with appropriately and re book as soon as possible.
- Dealing with staff who persistently do not attend under the "Managing Performance policy".
- Evaluating training and ensuring the transfer of that learning into the workplace.

4.3 Service / Senior Managers are responsible for:-

- Ensuring their managers are managing Essential Training Compliance for staff in their areas, including protecting learning time for staff.
- Ensuring their managers are correctly inducting staff in accordance with this Policy and local procedures.
- Taking action where either or both of the above two points are not complied with.
- Within one week of receiving notification by the Learning & Development team that the local induction form has not been completed take action to ensure local induction has been completed within one week. This will be monitored by the People & OD Service (Learning & Development Administration function).

4.4 The Learning & Development Team are responsible for:-

- Providing a quality programme of essential training courses that meet the requirements of the organisation and the NHSLA, CQC, Health & Social Care Act, and other regulatory and assurance frameworks and regularly reviewing and evaluating programmes.
- Providing training programmes which enable participation from all staff, ensuring all individual needs are met in a proactive manner.
- Providing bespoke training in conjunction with managers where appropriate.
- Informing managers if staff do not attend training they are booked on or leave the training prior to completion and keeping local records of these for reference.
- Maintaining central learning and development records.
- Evaluating the effectiveness of induction and essential training learning and reviewing where necessary.

- Working in collaboration with supporting trainers and subject matter experts to deliver a high quality programme.
- Providing accurate data to inform compliance with organisational performance targets in relation to induction and essential training.
- Recording, monitoring and reporting staff compliance and noncompliance in relation to attendance and completion of Trust and Local Induction, and all statutory and mandatory training as per the Training Needs Assessment (TNA).
- Providing Corporate Performance reports to the appropriate Boards and Sub Committees.
- Ensuring all staff can access essential training programmes, for offering a 24/7 service including use of technologies to enable staff to access as appropriate.

4.5 Director responsible for Learning and Development:

The Chief People Officer will be responsible for ensuring that the learning and development arrangements are in place and adequate. This will be achieved by –

- Ensuring arrangements are in place to enable the effective planning, organisation, control, monitoring and review of induction and essential training in every operational area of the Trust.
- Being the nominated Director for ensuring adequate structures are in place to ensure, so far as is reasonably practicable, the health, safety and welfare of staff, patients and others affected by the Trusts' undertakings.
- Ensure that adequate resources are allocated to meet the Trust's commitment to induction and essential training.

4.6 Chief Executive

The Chief Executive remains ultimately accountable, but has delegated responsibility for Learning and Development throughout Solent NHS Trust and is responsible for managing and monitoring compliance with health and safety legislation, NHS directives and Trust policies.

5.0 PROCESS/REQUIREMENTS

5.1 Induction: Part A – Trust Induction

- 5.1.1 Staff are provided with a pre-employment requirement form by People Services when they are sent their offer letter. This form includes information on pensions, Learning and Development, and benefits.
- 5.1.2 Upon recruitment of the new starter the recruiting manager will be sent an email confirming the new starter's Assignment Number, allocated date for Trust Induction and details of how to access the Local Induction online Form.
- 5.1.3 Bank Staff, once all references and checks are complete are enrolled onto Trust Induction by the Bank Staffing Team prior to them being able to access any shifts.
- 5.1.4 Students are Inducted as per the Supporting Learners in Practice Policy (SLIP).
- 5.1.5 Volunteers are Inducted as per the Volunteers Policy.

- 5.1.6 Departments employing contractors are to liaise with Learning and Development to determine what level of Induction is appropriate.
- 5.1.7 Staff in services who use Agency staff are to ensure compliance and undertake a thorough Local Induction with the Agency member of staff.
- 5.1.8 The Trust Induction is a full day programme which is designed to welcome new employees including Bank Staff into the Trust. Employees should attend the induction on their first day of work where possible or the nearest Trust Induction date to their start date. This date is sent to new starters via Recruitment Services (HR) as above.
- 5.1.9 The day's programme includes:
- See Appendix B

5.2 Induction: Part B – Local Induction

- 5.2.1 Starting on the first day in the workplace the Local Induction Form should be completed. This form is assigned to the new starters matrix on ESR. Completion of the form will automatically update the new starters learning matrix. Each relevant section of the Local Induction Form must be completed.

Sections covering:

- About you
- Administration
- Roles and responsibilities
- Values and Objectives
- Health and Safety issues:
 - Fire Procedures
 - First Aid arrangements
 - Lone Working
 - Personal Security
 - Conflict Resolution
 - Hand Hygiene (Where appropriate)
- Policies and Procedures (including Information Governance & Safeguarding)
- Staff Wellbeing
- Learning and Development
- Further Information

It is the responsibility of the line manager to ensure that the new member of staff is adequately inducted before the individual commences duties.

The line manager must arrange for themselves or another senior member of staff within the department to meet the new starter at the beginning of their first period of duty. In addition, the line manager should arrange to spend time with the new starter as soon as is practical after the start of employment.

The local induction will be recorded as completed only when all relevant sections of the checklist has been signed off.

- 5.2.2 A member of staff should be nominated to show the new employee around the department and introduce them to colleagues and other key members of staff. They should be available to act as an advisor/mentor over the first few weeks to answer any questions that arise.
- 5.2.3 It is important that the new starter is clear on their role, and within the first month of employment the line manager should meet with the new appointee to agree their initial performance objectives, standards to be met, and any learning and development needs that may have been identified.
- 5.2.4 Local induction procedures apply when existing staff transfer to another part of the organisation, or are promoted into a different job, however it is noted this may be a shorter version of the full local induction dependent on role and location.

5.3 **Monitoring Process for Local Induction and Trust Induction**

- 5.3.1 To ensure that staff have completed the full induction process a monitoring process is in place. A random check of new starter's matrix is carried out to ensure compliance.

5.4 **Essential Training**

- 5.4.1 All staff are required to undertake Level 1 or 2 Essential Training e-learning modules at intervals shown in appendix C. Managers must allow protected time for staff to complete the appropriate modules as indicated on their individual compliance record.
- 5.4.2 Advanced training, Levels 2 & 3, is required by certain staff groups according to their role. For those staff who undertake an advanced level there is no requirement to undertake Level 1 Attendance at an advanced level session will ensure the individuals compliance matrix is adjusted to reflect their compliance with that particular subject. Again these training requirements are detailed in the individual's compliance record. Further training should be specified on the personal development plan at appraisal.
- 5.4.3 Bank Staff complete their remaining Essential Training via e-learning either at home, in an e-learning suite or through face to face drop in sessions. This is to be completed as soon as possible. Bank staff are unable to book onto shifts until their essential training is complete.

5.5 **Local Training**

- 5.5.1 For certain essential training subjects the Trust has Trainers and Link Advisors who are trained and are updated regularly in services as per need to deliver relevant, timely and appropriate training to staff. Local trainers feed into the central Education and Training team and training is recorded on the central Oracle Learning Management (OLM) as per process including the DNA process.

6.0 **PROCEDURE for DID NOT ATTEND (DNA) and MONITORING ATTENDANCE**

- 6.0.1 The procedure for staff who do not attend is as follows:
- 6.0.2 Withdrawals from classroom based training with notification 7 or more days **prior** to the event: Individuals are responsible for withdrawals via the online learning system (OLM). The individual will be responsible for sourcing alternative dates and to rebook their place on the relevant training on an alternative date. If a training event is cancelled by Learning & Development team 7 days prior to the event, the team administrator will contact delegates to inform them of the cancellation.

- 6.0.3 Withdrawals from an event - notified with less than 7 days' notice prior to the event: Except in the circumstances of same day sickness or compassionate leave, notification should be made from the line manager to inform Learning & Development.
- 6.0.4 Completion of mandatory and statutory training e-learning modules for all staff will be monitored monthly through internal OLM reporting and workforce analysis reports. The data is reported over a 12, 24 and 36 month period dependent upon training frequency, enabling analysis of compliance.
- 6.0.5 Attendance at Statutory and Mandatory training is tracked by OLM and central systems via a RAG flag system which identifies staff due dates at e-learning three months prior on a sliding scale until the actual due date. Staff who persistently do not attend will be managed under the Maintaining High Standards of Performance Policy.
- 6.0.6 The Essential Training Compliance Matrix is viewable via the staff intranet. This details each staff member and their compliance status. The matrix is updated every other Friday for the training activity undertaken in the 14 days previous. The compliance matrix should be used as a tool to monitor team and individual compliance.
- 6.0.7 Any previous Essential training undertaken by new starters can be accredited, Peoples services ask anyone attending Induction to bring any evidence of previous training and provided it meets with all the following criteria it is accepted:
- It can be evidenced, i.e. signed certificate, print out of previous training record
 - It is picked up via the Inter Agency Transfer (IAT) process if the previous employer uses ESR.
 - It is checked and confirmed by the Learning and Development administration
 - It meets with the UK Core Skills & Training Framework required outcomes
 - Is in date

7.0 EQUALITY & DIVERSITY AND MENTAL CAPACITY ACT

- 7.1 As part of Trust policy an equality impact assessment (Steps1 & 2 of cycle) was undertaken (Appendix A). Solent NHS Trust are not aware of any evidence that different groups have different priorities in relation to this framework, or that any group will be affected disproportionately or any evidence or concern that this Policy may discriminate against a particular population group. Thus, the equality impact assessment result is: no negative impact.

8.0 SUCCESS CRITERIA / MONITORING THE EFFECTIVENESS OF THE POLICY

- 8.1 The Induction Lead and Learning and Development will be responsible for auditing the policy on a bi-annual basis unless outcomes of audit suggest additional monitoring is required.
- 8.2 Outcomes, recommendations and any non-compliance to this policy will be reported through the People & OD Committee.

9.0 REVIEW

- 9.1 This document may be reviewed at any time at the request of either at staff side or management, but will automatically be reviewed 3 years from initial approval and thereafter on a triennial basis unless organisational changes, legislation, guidance or non-compliance prompt an earlier review.'

10.0 REFERENCES AND LINKS TO OTHER DOCUMENTS

- 10.1 Learning and Development Policy
- 10.2 Resuscitation Policy
- 10.3 Policy relating to student placement, volunteers and work Experience
- 10.4 Skills for Health (2016) UK Core Skills Training Framework Statutory/Mandatory Subject Guide
Version 1.3
- 10.5 Volunteer Policy
- 10.6 Recruitment & Selection Policy
- 10.7 Maintaining High Standards of Performance Policy

Equality Impact Assessment

Step 1 – Scoping; identify the policies aims	Answer		
1. What are the main aims and objectives of the document?	To ensure that all individuals who access the Trust's services receive care informed by National Guidance		
2. Who will be affected by it?	All Staff and individuals accessing our services		
3. What are the existing performance indicators/measures for this? What are the outcomes you want to achieve?	This replaces the previous Induction and Mandatory Training Policy and will improve the process for implementing all national guidance via the Core Skills National Training Framework.		
4. What information do you already have on the equality impact of this document?	The Core Skills National training framework is equality impact assessed prior to release.		
5. Are there demographic changes or trends locally to be considered?	No		
6. What other information do you need?	None		
Step 2 - Assessing the Impact; consider the data and research	Yes	No	Answer (Evidence)
1. Could the document unlawfully discriminate against any group?		√	Enables ALL who access services to obtain care based on best evidence
2. Can any group benefit or be excluded?		√	Applies to all staff groups
3. Can any group be denied fair & equal access to or treatment as a result of this document?		√	Bespoke Trust Induction sessions can be provided if required.
4. Can this actively promote good relations with and between different groups?	√		
5. Have you carried out any consultation internally/externally with relevant individual groups?	√		Current Policy Steering Group members have been consulted plus those in the Learning & Development Team.
6. Have you used a variety of different methods of consultation/involvement	√		Via email and face to face.
<u>Mental Capacity Act implications</u>			
7. Will this document require a decision to be made by or about a service user? (Refer to the Mental Capacity Act document for further information)			N/A
<u>External considerations</u>			
8. What external factors have been considered in the development of this policy?			The Core Skills National Training Framework
9. Are there any external implications in relation to this policy?			
10. Which external groups may be affected positively or adversely as a consequence of this policy being implemented?			

Trust Induction Part A: based at Headquarters, Highpoint (1 Day)

- Welcome
- The Solent story- our aims, goals and values
- What makes great quality care
- Creating a great place to work: the 'Solent Difference'; the 'Solent Awards'; Pay, Holiday Entitlement & Benefits; Research & Improvement Academy, ways we communicate; staff networks
- Occupational Health & Wellbeing, including services offered & reminders to look after yourself
- Anti-Fraud, Bribery & Corruption Awareness
- Overview of Solnet plus a brief guide to using ESR including e-learning
- Equality & Diversity session (including information on Freedom to Speak Up guardians)

Our new staff will have their photo taken at the start of the day and will receive their ID badges along with lanyards before the end of the day. Our Patients Systems Team (SystemOne) also visit to check if a smart card is required and where possible, these are issued on the day. In addition, new staff receive their ESR login details to access their online learning accounts.

At the end of the day our ICT team will issue laptops and/or mobile phones to staff who's managers have requested them (request must be made at least 2 weeks prior to start date).

Corporate Induction Part B:

Local Induction e-form (via ESR)
Basic Skills via e-learning (clinical and non-clinical)

Safeguarding Adults
Safeguarding Children
Health and Safety
Fire Safety
Infection Control
Moving and Handling
Hand Hygiene (Where appropriate)

Appendix C

Competencies

The table below summarises the target audience and proposed frequency of refresher training for each subject.

	Subject	Audience	Proposed frequency of refresher	Comments
1	Equality, Diversity and Human Rights	All staff, including unpaid and voluntary staff	3 years	e-learning
2	Health, Safety and Welfare	All staff, including unpaid and voluntary staff	Induction followed by every 3 years	e-learning - Further job specific training may be needed based upon local risk
3	NHS Conflict Resolution	Frontline NHS staff and professionals whose work brings them into direct contact with members of the public	3 Years	e-learning
4	Fire Safety	All staff, including unpaid and voluntary staff	Induction: Site specific training followed by regular updated fire safety training. Staff who may need to help evacuate others should receive training more frequently than those who may only be required to evacuate themselves. The frequency of refresher training should be determined by training needs and risk analysis with an assessment of competence at least every 2 years	e-learning can support delivery of knowledge aspects of learning outcomes. Practical instruction also required e.g. evacuation techniques and use of firefighting equipment. Supplemented by specific job/site training as necessary to ensure safe working practices.
5	Infection Prevention and Control	Level 1: All staff including contractors, unpaid and voluntary staff Level 2: All healthcare staff groups involved in direct patient care or services	3 years 1 year	e-learning
6	Dementia	All staff	Once only	e-learning
7	Duty of Candour	All staff	Once only	e-learning
8	Risk Management	All staff	3 Years	e-learning
9	Hand Hygiene	All Healthcare staff groups involved in direct patient care or services	1 Year	Carried out locally with Hand Hygiene links or ICT

10	Moving and Handling	<p>Level 1: All staff, including unpaid and voluntary staff</p> <p>Level 2: All staff including unpaid and voluntary staff whose role involves patient handling activities</p>	<p>3 Years</p> <p>3 Years Or required refresher periods based upon local assessment.</p>	<p>e-learning can support delivery of knowledge aspects of learning outcomes.</p> <p>Practical instruction also required.</p>
11	Safeguarding Adults	<p>Level 1: All staff working in health care settings</p> <p>Level 2: All practitioners who have regular contact with patients, their families or carers, or the public.</p> <p>Level 3: Registered health care staff who engage in assessing, planning, intervening and evaluating the needs of adults where there are safeguarding concerns (as appropriate to role).</p>	<p>3 years</p> <p>3 years</p> <p>3 years</p>	<p>Level 1: e-learning</p> <p>Level 2: e-learning</p> <p>Level 3: Classroom (50%) e-learning can support delivery of knowledge aspects of learning outcomes. If L3 is done, there is no need to do L1 & L2</p>
12	Preventing Radicalisation	<p>Basic Prevent Awareness: All clinical and non-clinical staff and Volunteers that have contact with adults, children and young people and/ or parents/carers.</p> <p>Prevent Awareness: All staff who could potentially contribute to assessing, planning, intervening and evaluating the needs of an adult or child where there are safeguarding concerns</p>	<p>3 years</p> <p>3 years</p> <p>Initial training within 12 months of starting in relevant role with appropriate updating/briefing at least annually.</p>	<p>Basic Prevent Awareness: e-learning can cover alignment to CSTF learning outcomes. Can also be incorporated into Safeguarding training.</p> <p>Prevent Awareness should be delivered by attendance at a Workshop to Raise Awareness of Prevent (WRAP) or by completing an approved e-learning package</p>
13	Safeguarding Children	<p>Level 1: All staff including non-clinical managers and staff working in health care settings.</p> <p>Level 2: Non-clinical and clinical staff who have some degree of</p>	<p>3 years</p> <p>3 years</p>	<p>Level 1: e-learning</p> <p>Level 2: e-learning</p>

		<p>contact with children and young people and/or parents/carers.</p> <p>Level 3: Clinical staff working with children, young people and/or their parents/carers and who could potentially contribute to assessing, planning, intervening and evaluating the needs of a child or young person and parenting capacity where there are safeguarding /child protection concerns.</p>	3 years	<p>Level 3: Classroom with e-learning can supporting delivery of knowledge aspects of learning outcomes.</p> <p>At level 3, learning should be multi- disciplinary and inter-agency, including opportunities for personal reflection, scenario-based discussion, drawing on case studies etc. If L3 is done there is no need to do L1 & L2</p>
14	Resuscitation <i>(DART – Deteriorating and resuscitation training)</i>	<p>Level 1: Any clinical or non- clinical staff, dependent upon local risk assessment or work context</p> <p>Level 2: Staff with direct clinical care responsibilities including all qualified healthcare professionals</p> <p>Level 3: Registered healthcare professionals with a responsibility to participate as part of the resuscitation team</p>	<p>3 years</p> <p>1 year</p> <p>1 year</p>	<p>e-learning</p> <p>Level 2 Practical instruction also required i.e. ‘hands-on’ simulation training and assessment is recommended for clinical staff.</p>
15	Information Governance and Data Security	All staff involved in routine access to information	1 year	e-learning

Local Induction Process

New starters are made aware of the Local Induction at the Trust Induction and are told they will need to complete this on their first day with their manager.

New starters are assigned competencies, the Local Induction form will be located in their enrolments titled 449 Online Local Induction – to be completed with their Manager or Representative.



Glossary

NHSLA	National Health Service Litigation Authorities
DNA	Did not attend
HR	Human Resources
ESR	Electronic Staff Record
TNA	Training Needs Analysis
CQC	Care Quality Commission
SLIP	Supporting Learners in Practice Policy
OLM	Oracle Learning Management
DTA	Data and Technology Administrator