

STATUTORY AND MANDATORY TRAINING POLICY

APRIL 2018

Authorship:	eMBED Learning & Development Lead
Committee Approved:	Senior Management Team
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Equality Impact Assessment:	Completed
Target Audience:	Council of Members, Governing Body and its Committees and Sub-Committees, CCG Staff, agency and temporary staff & third parties under contract
Policy Number:	042
Version Number:	2.0

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POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by and Date	Date on Intranet
1.0	Harrogate and Rural District Clinical Commissioning Group	New Policy	JTUPF 28 January 2015 and CCG SMT 06 January 2015	28 January 2015
2.0	eMBED Learning & Development Lead	Updated policy for CCG employees includes additional Statutory & Mandatory e-learning modules required of CCGs; clarification on Safeguarding Children Training requirements per staff group with the addition table Appendix 1 and 'Strategy' document Appendix 3. Additional paragraph 3.3 references GDPR requirements.	Approved by SPF March 2018 and CCG SMT on 23 April 2018	April 2018

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1 POLICY STATEMENT

- 1.1 NHS Harrogate and Rural District CCG (the CCG) recognises that statutory and mandatory training is of vital importance in order to protect the safety of employees, visitors and the general public.
- 1.2 This policy applies to all employees of NHS Harrogate and Rural District CCG, members of the Governing Body and agency/contracted employees.
- 1.3 Failure to undertake statutory and/or mandatory training would be considered to be a breach of the terms and conditions of employment and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure.

2 PRINCIPLES

- 2.1 The policy documents the type of training, who must attend and if any update is required. It also documents the responsibilities of employees and managers and information about how to access the training.
- 2.2 It is a CCG priority for employees to be released to undertake statutory and mandatory training and the granting of permission for other training will be contingent on employees having undertaken, or arranged to undertake, their required statutory or mandatory training for the current year.
- 2.3 This policy and procedure will be available for employees on the internet.
- 2.4 Training and support will be available to all Line Managers locally in the implementation and application of this policy

3. IMPACT ANALYSES

3.1 Equality

All policies require an assessment for their impact on people with protected characteristics. An Equality Impact Assessment has been undertaken for this policy and as a result of performing the analysis, it does not appear to have any adverse effects on people who share *Protected Characteristics* and no further actions are recommended at this stage. An Equality Impact Assessment is attached at Appendix 2.

In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

3.2 Bribery Act 2010

The relevance of the Bribery Act 2010 must be considered in respect of every policy. It is considered that it is relevant to this policy as it is possible that someone may be bribed into offering or supporting a secondment.

Under the Bribery Act it is a criminal offence to:

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and
- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.

These offences can be committed directly or by and through a third person and other related policies and documentation (as detailed on the CCG internet) when considering whether to offer or accept gifts and hospitality and/or other incentives.

Anyone with concerns or reasonably held suspicions about potentially fraudulent activity or practice should refer to the Local Anti-Fraud and Corruption Policy and contact the Local Counter Fraud Specialist.

3.3 General Data Protection Regulations (GDPR)

The CCG is committed to ensuring that all personal information is managed in accordance with current data protection legislation, professional codes of practice and records management and confidentiality guidance. More detailed information can be found in the CCGs Data Protection and Confidentiality and related policies and procedures.

4. DEFINITIONS

4.1 Statutory Training

Statutory training is that which the CCG 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. E.g. Fire Safety, Health & Safety, Moving and Handling (Please see Appendix 1 for full training list).

4.2 Mandatory Training

Mandatory training is determined by the CCG. It is concerned with minimising risk, providing assurance against policies and ensuring the CCG meets external standards and best practice guidance e.g. Safeguarding Children which now incorporates the Strategy for Training to 'Individuals' and 'Groups'. (Please see Appendix 1 for full training list).

4.3 Induction Process

All new employees to the CCG are required to complete an induction process beginning on the first day of their employment which will include completion of Statutory and Mandatory Training using the national NHS e-learning system, the Electronic Employees Record (ESR) via Oracle Learning Management (OLM). Further information can be found in the CCG Induction Handbook and the Induction and Probation Policy.

5 ROLES / RESPONSIBILITIES / DUTIES

5.1 Organisation Responsibilities

The Chief Officer and the CCG Governing Body are responsible for and committed to

ensuring that all employees are appropriately trained to enable them to undertake their duties and to also protect their own wellbeing.

The CCG has responsibility for ensuring that all requirements relating to statutory and mandatory training are in place and upheld by all employees. This ensures the quality, content and frequency of training being provided and equitable access to training by employees.

The CCG is also required to ensure services commissioned by them have a Statutory and Mandatory training policy and programme to ensure best practice, minimise risk and patient, employees and public safety.

5.2 Responsibilities of Members of Employees

All employees are responsible for ensuring they are competent for their role and have a full understanding of the regulations and requirements related to their duties, responsibilities and facilities that enable them to carry out their job. This policy will also be discussed at the appraisal meetings between employees and their line manager. Some employees will have additional and specific professional and regulatory and continuing professional development requirements.

It is a priority that all employees ensure that training in the statutory and mandatory programme has been completed within the expected timescales regardless of an individual's post or ability, and should be treated as the highest priority in the annual personal development planning and review cycle.

All employees who have applied to undertake further training will need to demonstrate that they have undertaken or have arranged to undertake their Statutory and Mandatory training before their applications for further training will be considered.

All employees whether paid or unpaid have a statutory duty to cooperate with their manager to undertake training as required. If any aspect of statutory and mandatory training is unclear, employees must bring this to the immediate attention of their Line Manager.

All employees should participate as required in any audits that may be carried out to monitor statutory and mandatory training.

5.3 Responsibilities of Managers

Managers have the responsibility to ensure compliance with CCG Policies and Procedures by enabling all employees within their department to receive the required training and supervision.

It is the responsibility of all managers to ensure that their employees are up to date with all the relevant statutory and mandatory training. Every opportunity must be given to employees to undertake statutory and mandatory courses in work time.

It is the responsibility of managers and supervisors to ensure that the required statutory and mandatory training is completed during the induction process and then reviewed during appraisals, with both the manager and post holder identifying any learning needs in their Personal Development Plan (PDP).

Managers should ensure that all statutory and mandatory training certificates are recorded on personal files.

5.4 Responsibilities of the HR Team

The CCG will work with EMBED Health Consortium who will be responsible for the co-ordination and administration of training to meet the requirements of the statutory and mandatory training. The eMBED HR team will provide monthly reports to the CCG of training undertaken.

6 MONITORING & REVIEW

- 6.1 The policy and procedure will be reviewed periodically for the CCG in conjunction with operational managers and Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.
- 6.2 The implementation of this policy will be audited on an annual basis by the eMBED HR Team and reported to the CCG's Governing Body.

7 REFERENCES

- 7.1 For further information please refer to the following reference sources:
- Induction and Probation Policy
 - Induction Handbook
 - Health and Safety Legislation
 - Equalities Legislation
 - Disciplinary Policy

Appendix 1

1.1] NHS Harrogate and Rural District CCG Statutory and Mandatory Training Table

FREQUENCY	COURSE TITLE	TRAINING PROVIDER	WHO SHOULD ATTEND/COMPLETE?
Once Only	Induction - Corporate	CCG	All Employees
	Induction - Local	CCG	All Employees
Annually	Data Security Awareness Level 1	ESR/OLM (NHS Digital)	All Employees
	Conflict of Interest – Module 1 (level 1)	ESR/OLM (e-learning for Health)	All Employees
	Fire Safety - Level 1	ESR/OLM	All Employees
	Safeguarding Adults - Level 1	ESR/OLM	
	Safeguarding Children Level 1	ESR/OLM (E-learning for Health)	<i>Refer to Safeguarding Children Training Strategy pages 7 -9 inclusive.</i>
Every 3 years	Equality, Diversity and Human Rights - Level 1	ESR/OLM	All Employees
	Infection Prevention and Control - Level 1	ESR/OLM	All Employees
	Moving and Handling – Level 1	ESR/OLM	All Employees
	Mental Health Legislation	ESR/OLM	All Employees
	Preventing Radicalisation - Level 1	Face to Face (local Safeguard team)	All Employees

1.2] Safeguarding Children Training Strategy (2017-19) - CCG Safeguarding Children Training Delivery Plan

Level	Staff Group	Training requirement & frequency	Notes
Level 1	<i>Refer to the Safeguarding Children Delivery Plan - Pages 7 – 9 within the Safeguarding Children Training Strategy to determine your staff group level required completion.</i>	2 hours over 3 years	<i>Refer to above ESR module access</i>
Level 2		3-4 hours over 3 years	<i>Refer to Safeguarding Children Strategy, Training Delivery Plan for method of training access.</i>
Level 3		8 hours over 3 years	
Level 4		24 hours over 3 years	
Level 5		24 hours over 3 years	
Board Level		2 hours over 3 years	

Appendix 2

Equality Impact Analysis:	
Policy / Project / Function:	Statutory and Mandatory Training policy
Date of Analysis:	19/02 /2018
Completed by: (Name and Department)	Neil Robson – eMBED Senior Learning & Development Lead
What are the aims and intended effects of this policy, project or function?	This policy defines NHS Harrogate and Rural District CCG's statutory and mandatory training programme, which aims to ensure the organisation meets its statutory obligations in relation to training.
Are there any significant changes to previous policy likely to have an impact on staff / other stakeholder groups?	No; changes are to include and clarify training requirements for the Safeguarding Children Strategy locally and further include changes in access to the e-learning platform on ESR.
Please list any other policies that are related to or referred to as part of this analysis	<ul style="list-style-type: none"> • Induction and Probation Policy • Induction Handbook • Health and Safety Legislation • Equalities Legislation
Who will the policy, project or function affect?	All employees of the CCG
What engagement / consultation has been done, or is planned for this policy and the equality impact assessment?	Consultation both locally and nationally with Trade Unions and staff <ul style="list-style-type: none"> • SLT • CCG Employees • Y&H SPF • Governing Body (approval)
Promoting Inclusivity and HaRD CCG's Equality Objectives. How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation? How does the policy promote our equality objectives: <ol style="list-style-type: none"> 1. Ensure patients and public have improved access to information and minimise communications barriers 2. To ensure and provide evidence that 	This Policy does not directly promote inclusivity, but sets out a process to allow all staff to access training where required. However , this might be more difficult for some groups and this must be monitored

<p>equality is consciously considered in all commissioning activities and ownership of this is part of everyone's day-to-day job</p> <ol style="list-style-type: none"> 3. Recruit and maintain a well-supported, skilled workforce, which is representative of the population we serve 4. Ensure the that NHS Harrogate and Rural District Clinical Commissioning Group is welcoming and inclusive to people from all backgrounds and with a range of access needs. 	
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Equality Impact Assessment Test:

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by <i>The Equality Act 2010</i> ?				
Protected Characteristic:	Neutral Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists
Gender (Men and Women)	✓			
Race (All Racial Groups)	✓			
Disability (Mental and Physical)	✓			
Religion or Belief	✓			
Sexual Orientation (Heterosexual, Homosexual and Bisexual)	✓			
Pregnancy and Maternity	✓			
Transgender	✓			

Marital Status	✓			
Age	✓			

This Equality Impact Analysis was completed by: N Robson, eMBED HR Team (L&D)

Action Planning:				
As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by <i>The Equality Act 2010</i>?				
Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:

Safeguarding Children Training Strategy (2017-19)

North Yorkshire and York Clinical Commissioning Groups



Hambleton, Richmondshire and Whitby
Clinical Commissioning Group



Scarborough and Ryedale
Clinical Commissioning Group



Vale of York
Clinical Commissioning Group



Harrogate and Rural District
Clinical Commissioning Group

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Karen Hedgley (Designated Nurse Safeguarding and Children in Care)**

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1.0 INTRODUCTION

- 1.1 The four North Yorkshire and York Clinical Commissioning Groups (CCGs) are committed to safeguarding and promoting the welfare of children and young people, who may be vulnerable. As commissioning organisations, the CCGs must ensure that their employees and staff working in services commissioned and contracted by them understand their role and responsibilities regarding safeguarding children and young people. (NHS E, 2015)

- 1.2 In accordance with the Children Act 2004 (Section 11) all individuals who work in health care organisations, both substantive staff and those working in services that are contracted or commissioned, must be trained and competent to recognise when a child may need to be safeguarded and know what to do in response to concerns about their welfare.

- 1.3 Working Together to Safeguard Children (2015) sets out statutory guidance on the responsibilities of all NHS organisations (including CCGs) to ensure that employees and independent contractors have an awareness of how to recognise and respond to safeguarding concerns.

- 1.4 The Children and Families Act, (2014) strengthens the accountability for the provision of services and support to children with special educational needs and/or disability (SEND). The four North Yorkshire and York CCGs will seek assurance that service providers fulfil their responsibilities to this vulnerable group of children via contractual monitoring structures.

2.0 PURPOSE

- 2.1 The purpose of this strategy is to provide a framework which ensures that the four North Yorkshire and York CCGs meet their contractual and legislative responsibilities to equip people to work effectively to safeguard and promote the welfare of children and young people. The strategy aims to provide information on mandatory safeguarding children training requirements for all managers and staff within the four North Yorkshire and York CCGs.

- 2.2 The level of safeguarding children training required is dependent on the CCG staff member's role and responsibilities and is determined by agreed national guidance (RCPCH, 2014)
- 2.3 All training provided should respect diversity (including culture, race, religion, gender and disability), promote equality and encourage the participation of children and families in the safeguarding process.
- 2.4 All training provided should place the child at risk of maltreatment as the central focus and promote the importance of listening to the child or young person, understanding their daily life experience, ascertaining their wishes and feelings and never losing sight of their needs.

3.0 ROLES AND RESPONSIBILITIES

- 3.1 **All CCG staff** (*this also includes employees who are on fixed term contracts, temporary staff and volunteers*) have an individual responsibility for the protection and welfare of children and must know what to do if concerned that a child is being maltreated. In order that this function can be delivered effectively, all staff must access safeguarding children training commensurate with their role within the organisation. All staff must access the required level of training within 8 weeks of coming into post.
- 3.2 The **CCGs** have a responsibility to train their staff so that they are competent to carry out their safeguarding children responsibilities, including recognising and reporting safeguarding children issues.
- 3.3 The **Designated Nurses and Doctors for Safeguarding Children** have a responsibility for taking a strategic and professional lead across the health economy and also support the safeguarding executive leads within the CCGs in relation to this aspect of their role.
- 3.4 The **Designated Nurses and Doctors for Safeguarding Children** have a responsibility to support training and development for CCG staff and Governing Body members in line with national guidance (RCPCH, 2014) and the multi-agency policies of both North Yorkshire and City of York Local Safeguarding Children Boards.
- 3.5 The **Designated Nurses and Doctors for Safeguarding Children** are responsible for ensuring that lessons learnt from major investigations (Serious Case Reviews,

other forms of learning reviews, Significant Incidents and Domestic Homicide Reviews) are incorporated into training and development opportunities.

- 3.6 The **Local Safeguarding Children Boards**, in line with 'Working Together to Safeguard Children' (HM Government, 2015) operate to coordinate and ensure the effectiveness of safeguarding activity of all agencies within North Yorkshire and York. Alongside their core objectives the LSCBs have specific functions in respect of training, which include developing policies and procedures for safeguarding children in relation to training of persons who work with children or in services affecting the safety and welfare of children and to monitoring and evaluate the effectiveness of training, including multi-agency training.
- 3.7 The four **North Yorkshire and York CCGs** are committed to safeguarding and promoting the welfare of children and young people who may be vulnerable. As commissioning organisations, the CCGs must ensure that its employees and staff working in services commissioned and contracted by them understand their role and responsibilities regarding safeguarding children and young people.

4.0 MONITORING AND ASSURANCE

- 4.1 The CCGs are responsible for maintaining quality standards and quality assurance in relation to service delivery within the CCGs. This responsibility includes ensuring that safeguarding and the need to protect children from harm is embedded within organisational culture.
- 4.2 The CCGS will require assurance that all staff employed by the CCGS have the knowledge and skills, appropriate to their role, to identify and act on safeguarding concerns, including concerns related to safeguarding children and children who are in the care of local authorities.
- 4.3 This assurance will be obtained via:
- quarterly reporting through Embed commissioned services
 - staff appraisals (in which compliance with all statutory and mandatory requirements is reviewed and recorded)
 - internal and external audit and statutory inspection processes

5. ACCESSING SAFEGUARDING CHILDREN TRAINING

5.1 The table below sets out expected safeguarding children training requirements for all CCG staff in line with national guidance (RCPCH, 2014):

CCG Safeguarding Children Training Delivery Plan

Level	Staff Group	Training requirement & frequency	Knowledge, Skills Attitudes and Values	Method of access to training
Level 1	All staff working in the CCG who do not require specialist training at Level 2 or above. <i>(e.g. admin support staff; finance managers; commissioning managers)</i>	<i>2 hours over 3 years</i>	See Intercollegiate Document *(p.12)	E-learning for Health (Level 1) www.elfh.org.uk/programmes/safeguarding-children/
Level 2	All non-clinical and clinical staff who have any contact with children, young people and/or parents/carers. <i>(e.g. Adult Continuing Healthcare staff; Adult Safeguarding Professionals; CCG staff who undertake consultation events or assurance visits)</i>	<i>3-4 hours over 3 years</i>	See Intercollegiate Document *(p.14)	E-learning for Health (Level 1) www.elfh.org.uk/programmes/safeguarding-children/ and Subject-specific training packages from LSCBs www.safeguardingchildren.co.uk www.saferchildrenyork.org
Level 3	All 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. <i>(e.g. GPs; Children's Continuing Healthcare)</i>	<i>8 hours over 3 years</i>	See Intercollegiate Document *(p.17)	CCG Designated Professionals 'Hot Topics' Training Programme for GPs Subject-specific training packages from LSCBs www.safeguardingchildren.co.uk www.saferchildrenyork.org Relevant local conferences/training events Evidence of relevant personal reflection, scenario-based discussions drawing on case studies, serious case reviews, lessons from research, and audit.

Level 4	Specialist roles – named professionals <i>(e.g. Named GPs for Safeguarding Children)</i>	<i>24 hours over 3 years</i>	See Intercollegiate Document *(p.54)	<p>CCG Designated Professionals ‘Hot Topics’ Training Programme for GPs</p> <p>Subject-specific training packages from LSCBs www.safeguardingchildren.co.uk www.saferchildrenyork.org</p> <p>Additional training programmes such as RCPCH Level4/5 training www.rcpch.ac.uk/</p> <p>Relevant local and national conferences/ training events</p> <p>Evidence of relevant personal reflection, scenario-based discussions drawing on case studies, serious case reviews, lessons from research, and audit.</p>
Level 5	Specialist roles – designated professionals <i>(e.g. Designated Nurses and Doctors for Safeguarding Children)</i>	<i>24 hours over 3 years</i>	See Intercollegiate Document *(p.57)	<p>Subject-specific training packages from LSCBs www.safeguardingchildren.co.uk www.saferchildrenyork.org</p> <p>Relevant local and national conferences/ training events</p> <p>Additional training programmes such as RCPCH Level4/5 training www.rcpch.ac.uk/</p> <p>Evidence of relevant personal reflection, scenario-based discussions drawing on case studies, serious case reviews, lessons from research, and audit.</p> <p>Regular participation in support groups or peer support networks for specialist professionals at a local, regional,</p>

				and national level.
Board Level	Chief Executive Officers, Trust and Health Board Executive and non-executive directors/members, commissioning body Directors <i>(e.g. Governing Body members and Chief Officer)</i>	<i>2 hours over 3 years</i>	See Intercollegiate Document *(p.73)	E-learning for Health (Level 1) www.elfh.org.uk/programmes/safeguarding-children/ Tailored face to face training packages delivered by Designated Professionals for Safeguarding Children

*Safeguarding children and young people: roles and competences for health care staff Intercollegiate Framework March 2014

6. References

Children and Families Act (2014) . London. HMSO

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<http://www.england.nhs.uk/wp-content/uploads/2013/03/safeguarding-vulnerable-people.pdf>

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The Children Act. (1989). London: HMSO