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**Training and Induction Policy**

**[Date of Issue]**

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| --- | --- |
| Policy Lead: | [Policy Lead] |
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# Introduction

[Company Name] believe in providing the highest quality service possible for all our clients by creating a relaxed, welcoming, and comfortable atmosphere where those in our care are treated with respect, dignity and compassion by a well-trained, motivated and professional team who are aware of their legal, ethical and moral duties.

One of the key features of good and outstanding services is that they ensure new starters complete an in-depth induction programme which goes beyond the minimum standards. This ensures that staff understand the vision and values of the organisation and are equipped with the right knowledge and tools to enable them to deliver high quality care.

Benefits of good induction and training programmes also include an improvement in staff retention rates, which in turn reduces recruitment costs.

# Policy Statement

[Company Name] will ensure that standards of best practice are adhered to in relation to staff training and induction.

This policy outlines the core expectations of staff. Learning and development/training needs should be identified by the manager together with the staff member and manager and should be consistent with developmental needs explored in supervision.

# Scope

This policy and the procedures apply to all staff providing and receiving training as part of their role within the company. The Registered Manager is responsible for ensuring that the principles within this policy are observed.

# Procedures

**Training**

[Company Name] will ensure that information on forthcoming courses and training opportunities are communicated to staff electronically under a clear training-based heading.

Staff must agree to all training sessions with their manager prior to confirming any arrangements. [Delete as appropriate] [Company Name] will pay a contribution towards the training fee if the Registered Manager agrees that the training concerned fits in with the staffs’ roles or will benefit that staffs’ performance. The exact contribution will be negotiated upon application.

There is a programme of in-house training events and discussions held regularly which staff attend as agreed on their Personal Development Plan. Details of dates and topics will be communicated to staff via various methods including electronically.

To enable [Company Name] to maintain minimum care standard requirements, all recently appointed staff without professional qualifications are required to apply to join the Qualifications and Credit Framework (QCF) as a continuation of their induction programme, unless they have good reasons for opting out or delaying this.

Training can be further broken down into the following types:

* **Statutory:** Required by law to have this skill/knowledge
* **Mandatory:** Deemed to be essential as agreed by national or organisational standards e.g., CQC
* **Role Specific:** It is a requirement of the role to have this skill/knowledge

A training needs analysis (TNA), (please see appendix II) is carried out by the manager for all levels of staff to identify specific learning needs. This will ensure appropriate training can be provided to support individual development needs. This will also ensure that staff have the necessary training required to carry out their job roles and to safely cover their scope of work and responsibilities.

# Appraisal

The aim of staff development and appraisal is to meet the needs of the organisation, line manager and staff by providing an opportunity for recognition and feedback and ensuring that the work of all individuals contributes to the attainment of company goals and continuous improvement. A successful development and appraisal system is therefore a framework for good management practice.

As part of the appraisal process, individual development needs will be agreed, and the reviewer and reviewee will work together to implement support mechanisms and opportunities that enable personal and professional development. The Appraisal Process is not an event, it is a process that runs throughout the entire year.

The TNA document can be used as part of the appraisal process (please see appendix II).

# Application Process

Staff wishing to attend a certain course or training event and wanting to apply for paid time off or a contribution to the training fee, should discuss the suitability or availability of training, and their eligibility to attend, with the Registered Manager. They should then complete a training request form (see Appendix I) and submit this to the Registered Manager.

# Induction Training

Induction training refers to the initial training given to new staff to orientate them to the job and the workplace, to get them up and running in their role and to ensure that they are working safely and competently as soon as possible. A planned programme for the induction, training and development of new staff is essential to ensure good practice and the provision of a high-quality service. Without induction training, new staff will be unclear about [Company Name]’s objectives and values and the precise nature of their job.

A full induction will include shadowing, mentoring, buddying, peer support, values-based learning and additional training around core skills and specific health conditions. It should be flexible in recognising the needs of the organisation, the inductee, and taking into account their previous experiences.

The Care Certificate (see Care Certificate section below) is a key component of the total induction which an employer must provide, legally and to meet the essential standards set out by the Care Quality Commission. Most notably the training and education of Care Professionals must be delivered to meet outcome 14.

The Care Certificate does not replace [Company Name]’s induction which is specific to the environment in which practice will take place, nor will it focus on the specific skills and knowledge needed for a specific setting.

All new staff receive a structured induction training programme including the Care Certificate (see The Care Certificate section below), within 12 weeks of starting. All new staff will also receive further training in accordance with their professional role and any personal or staff development plans.

Experienced staff who have already completed an induction programme elsewhere will have their prior knowledge considered in the planning of their programme.

Induction programmes cover all our key policies and procedures that relate to client’s care, welfare, protection, and safety and all those that relate to staff health and safety, as required by the national standards and regulations. These include:

* communicable diseases and infection control
* confidentiality and disclosure of information
* control of exposure to hazardous waste (based on COSHH regulations)
* fire safety
* hygiene and food safety (Food Safety Act 1990 and Regulations 2006)
* record keeping and access to files
* health and safety
* moving and handling clients
* dealing with accidents and emergencies
* responding to abuse.

All inductees discuss their progress by completing their induction programme weekly or no more than fortnightly with their designated manager, who is a senior or experienced member of staff. On completion, the induction training record is signed off by the manager and the Registered Manager and the trainee is awarded a certificate of completion.

We review our induction policies and programmes as part of our annual review. We also obtain feedback from all those who have undertaken an induction in the previous year to see if training or induction can be improved.

# The Care Certificate

The Care Certificate replaces the National Minimum Training Standards (NMTS) and the Common Induction Standards (CIS) and provides the framework for these within health and social care respectively.

The Care Certificate builds on these two frameworks and sets out explicitly the learning outcomes, competences and standards of behaviour that must be expected of all care professionals in the health and social care sector, ensuring that each care professional is caring, compassionate and provides quality care. The Certificate also reflects how these behaviours are underpinned by the 6Cs of Care (care, compassion, competence, communication, courage, and commitment).

The Care Certificate is the start of the career journey for these staff groups and is only one element of the training and education that will make them ready to practice within their specific sector.

Health Care Assistants, Assistant Practitioners, Care Support Workers, and those giving support to clinical roles in both the NHS and private, independent health and social care sectors where there is any direct contact with clients are expected to complete the Care Certificate. Care Support Workers means Adult Social Care workers giving direct care in residential and nursing homes and hospices by home care workers and domiciliary care staff. Other roles may be included where achievement of all the standards is possible. As some of these roles would be very different in health and social care, it is up to the employer to decide whether the Care Certificate is appropriate. However, to be awarded the Care Certificate the person must meet all the outcomes and assessment requirements for all 15 standards.

The Care certificate standards are:

1. Understand Your Role

2. Your Personal Development

3. Duty of Care

4. Equality and Diversity

 5. Work in a Person-Centred Way

6. Communication

7. Privacy and Dignity

8. Fluids and Nutrition

9. Awareness of Mental Health, Dementia and Learning Disability

10. Safeguarding Adults

11. Safeguarding Children

12. Basic Life Support

13. Health and Safety

14. Handling Information

15. Infection Prevention and Control

# Mandatory Training

Staff are required to attend mandatory training on a routine basis as indicated within the following table, some aspects must be completed in person and others can be undertaken via online courses.

All Core mandatory training in **Table 1** will be conducted in alignment with NHS England’s Core Skills Training Framework (2021), [CSTF-Eng-Subject-Guide-v1.1.pdf (skillsforhealth.org.uk)](https://skillsforhealth.org.uk/wp-content/uploads/2021/07/CSTF-Eng-Subject-Guide-v1.1.pdf).

**Table 1** (‘All Persons’ within the table refers to everyone, including people on work placements and volunteers.)

|  |  |  |
| --- | --- | --- |
| **Course** | **Mode of Delivery** | **Frequency of Training** |
| **Conflict Resolution***(For all persons in direct contact with members of the public)* | Online/In person | Three Yearly  |
| **Equality, Diversity and Human Rights** *(All persons)* | Online/In Person | Three Yearly  |
| **Fire Safety** *(All Persons)* | Online theoryIn person practical | Two Yearly |
| **Health, Safety and Welfare** *(All Persons)* | Online/In person | Three Yearly |
| **Infection and Prevention** (***Level 1*** *for all non-healthcare persons,* ***Level 2*** *for all healthcare persons involved in direct care or services)* | Online/In person | **Level 1** - Three Yearly **Level 2** - Yearly |
| **Information Governance and Data Security** *(All Persons)* | Online / In person | Annually |
| **Moving and Handling** (***Level 1*** *for all non-healthcare persons,* ***Level 2*** *for all* *healthcare persons involved in direct care or services)* | Online theory / In person practical  | **Level 1** - Three Yearly**Level 2** - Two Yearly  |
| **Preventing Radicalisation** (**Basic Prevent Awareness**: *All clinical and non-clinical persons that have contact with adults, children, and young people and/ or parents/carers***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.)* | **Basic Prevent** Online/In person**Prevent Awareness** In person / workshop | Three Yearly |
| **Resuscitation**(***Level 1*** *Non-clinical Persons,* ***Level 2*** *Direct clinical persons,* ***Level 3*** *participants of the resuscitation team)* | **Level 1** Online/In person**Level 2/3** in person | Yearly |
| **Safeguarding Adults** *(****Level 1*** *All persons in health care setting,* ***Level 2*** *All practitioners who are in regular contact with the client, families, carers or the public* ***Level 3*** *The safeguarding lead plus all registered healthcare professionals who engage in assessing, planning, intervening, and evaluating the needs of adults where there are safeguarding concerns)* | Online/In Person | Three Yearly  |
| **Safeguarding Children** *(****Level 1*** *All persons in healthcare setting****Level 2*** *All practitioners who are in regular contact with clients, families, carers, or the public* ***Level 3*** *The safeguarding lead plus all registered healthcare professionals who engage in assessing, planning, intervening, and evaluating the needs of adults where there are safeguarding concerns)* | **Level 1 and 2** Online/In person**Level 3** Learning should be multi-disciplinary and inter-agency, including opportunities for personal reflection, scenario-based discussion, drawing on case studies etc. | Three Yearly  |
| **The Oliver McGowan Mandatory Training on Learning Disability and Autism***Tier 1 - for staff who require general awareness of the support autistic people or people with a learning disability may need**Tier 2 - for staff who may need to provide care and support for autistic people or people with a learning disability.* | Tier 1 – onlineTier 2 – online/in person | Awaiting code of practice to be published. |

**[Bespoke as applicable to service]**

The Mandatory Training in **Table two** is taken from Skills for Care Core Mandatory Training [Core and mandatory training (skillsforcare.org.uk)](https://www.skillsforcare.org.uk/Documents/Learning-and-development/Ongoing-learning-and-development/Guide-to-developing-your-staff/Core-and-mandatory-training.pdf)

**Table Two**

|  |  |  |
| --- | --- | --- |
| **Course** | **Mode of Delivery** | **Frequency of Training** |
| First Aid  | Online/In Person | Three Yearly |
| Privacy and Dignity | Online/In person | Three Yearly |
| Communication | Online/In person | Three Yearly |
| Food Hygiene  | Online/In person | Three Yearly |
| Medication Management | Online/In person | Annually |
| Mental Capacity and DoLS | Online/In person | Three Yearly |
| Nutrition and Hydration | Online/In person | Three Yearly |
| Person-Centred Care | Online/In person | Three Yearly |
| Oral health | Online/In Person  | Three Yearly  |
| Specific Conditions (understanding the needs of specific conditions) | Online/In Person | Three Yearly |
| Positive Behaviour Support | Online/In person | Annually |

Training carried out is logged on the company training matrix for staff and is role specific. Training will be monitored centrally by the manager.

# Responsibilities

The shared responsibility for the completion of training lies with staff and the manager.

It is the manager’s responsibility to:

* Ensure that staff are released to attend face to face statutory and mandatory training and allocate time to staff to complete their e-learning.
* Ensure that all staff for which they have responsibility complete Statutory and Mandatory training as identified in the TNA within the time frames specified.
* Ensure their staff receive appropriate Mandatory training as per TNA and discuss/ documents this via the appraisal process – listing training required and dates to be completed.
* Investigate non-attendance at Statutory/Mandatory training events or non-completion of e-learning and ensure attendance at the next appropriate session.
* Must review attendance data and hold staff to account if they have not attended their Statutory and Mandatory training.
* Speciality or role specific Statutory/Mandatory training must be identified by the manager.

Managers will ensure that staff are given ‘protected time’ for both face to face and e-learning training [INSERT A DESCRIPTION HERE OF HOW YOU WILL DO THIS – CQC requirement].

All staff:

* Must demonstrate commitment to their own learning and development, specifically to be compliant and undertake Mandatory/Statutory training as agreed with their manager, including appropriate induction training.
* Professionally registered staff have a responsibility to maintain their registration by ensuring they are fully compliant with Mandatory/Statutory requirements and are therefore safe to practice.

# Monitoring

Compliance with this policy will be monitored through routine auditing of staff attendance of induction and mandatory training events.

[Company Name] is responsible for assuring the quality of the teaching and assessment of the Care Certificate where applicable. The Registered Manager will sign off the Care Professional as having successfully met all the standards to achieve the Care Certificate where applicable.

The Registered Manager must assure themselves that the standard of teaching and assessment is of sufficient quality that they can be confident that the Care Professional has fully met the standard. The outcomes of the Care Certificate will be quality assured via the CQCs existing methodology in reviewing its essential standards.

# Related Policies

* Information Governance and Record Keeping Policy
* Quality Assurance Policy
* Supervision Policy

# Legislation and Guidance

**Relevant Legislation**

* Care Act 2014
* Employment and Training Act 1973
* Health and Social Care Act 2012
* Human Rights Act 1998

**Guidance**

* Skills for Care: The Care Certificate
* [The Care Certificate | 11 Standards for Care | authored by Skills for Health](https://www.skillsforhealth.org.uk/info-hub/category/the-care-certificate/)
* [Core and mandatory training (skillsforcare.org.uk)](https://www.skillsforcare.org.uk/Developing-your-workforce/Guide-to-developing-your-staff/Core-and-mandatory-training.aspx)

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| Appendix I: Training Request Form*(Please check with the Registered Manager prior to completing any training request)*

|  |  |
| --- | --- |
| Staff name: | Job role: |
| Contact number: | Manager name: |
| Date of training:  |  |
| Training objectives: |
| How will the training improve your capability within your job role: |
| Associated costs: | Time required for training (days/hours): |
| Staff Signature:Date: | Manager Signature: Date: |

 |

# Appendix II: Training Needs Analysis Document:

|  |  |
| --- | --- |
| **Employee Name** |   |
| **Position Title** |   |
| **Purpose** |   |
| **Major job tasks for the position** | **Training skills/development required?** | **If yes identify what training needs exist** | **How will this be achieved? E.g., on the job, external training** |
| **Yes** | **No** |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|  |  |  |  |  |
|   |   |   |   |   |
| **What do we want to achieve in the period ahead?** |
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# Summary of Review

|  |  |
| --- | --- |
| Version | 1 |
| Last amended | [Date of Issue] |
| Reason for Review |  |
| Were changes made? |  |
| Summary of changes |  |
| Target audience | Care staff, Managers |
| Next Review Date | [Date of Review] |