

## Training Needs Analysis Acute Paediatric

Issue Date	Review Date	Version
June 2017	June 2018	V1.5

### Purpose

The purpose of this Policy is to ensure all staff are provided with all the training and education to carry out their role safely, effectively and manages risk and organisational objectives in a professional manner.

### Who should read this document?

All in Acute Paediatrics

### Key Messages

Maintenance of effective and safe patient care.

### Core accountabilities

<b>Owner</b>	Sophie King – Paediatric Clinical Educator
<b>Review</b>	Paediatric Clinical Governance
<b>Ratification</b>	Paediatric Clinical Governance
<b>Dissemination</b>	To all Paediatric Staff ( Women and Children’s Care Group)
<b>Compliance</b>	Paediatric Clinical Educator

### Links to other policies and procedures

Workforce Induction and Training Policy (TRW/HUM/POL/621.1)  
 Acute Paediatrics Physical interventions Policy (TRW.ACP.POL.1022.1)  
 Policy for the insertion, Confirmation of Position, Administration of Bolus Nasogastric/Orogastric Tube Feeds, and Removal of Nasogastric Feeding Tubes in Children, Young People and Neonates. (TRW.ACP.POL.1021)  
 HIGH FLOW NASAL CANNULA OXYGEN THERAPY IN CHILDREN (AIRVO 2 DEVICE) (TRW.ACP.POL.1055)

### Version History

<b>1</b>	November 2014	Approved by Paediatric Clinical Governance
<b>1.1</b>	April 2015	Slight amendment to Appendix 2
<b>1.2</b>	July 2016	Slight amendment to Appendix 2
<b>1.3</b>	July 2016	Policy document reviewed
<b>1.4</b>	June 2017	Slight amendment to Appendix 2
<b>1.5</b>	June 2017	Policy document reviewed

*The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote*

*equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.*

**An electronic version of this document is available on Trust Documents on StaffNET. Larger text, Braille and Audio versions can be made available upon request.**

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## 1 Principals

Plymouth Hospitals NHS Trust Women and Children's Care Group (Acute Paediatric Service) recognises that a well-trained and educated workforce is equipped with the correct knowledge and skills to carry out their role safely, effectively, and manages risk and organisational objectives in a professional manner. The Women and Children's Care Group values its staff and actively promotes staff development in line with Trust Philosophy.

The Acute Paediatric Service complies with its statutory obligations for training in line with Trust Risk Management Strategy. Nursing staff must receive specific training which ensures the safety of themselves and that of others. Paediatric Line Managers/Team Leaders, work closely with the Clinical Educator and the Training Department to ensure that the requirements specified within this training needs analysis are adhered to. Non- attendance must be dealt with in line with Workforce Induction and Training Policy. The Acute Paediatric Service is aware that training is monitored by the Director of Human Resources and the Workforce Development Team and is directly accountable to the Trust Board.

This document forms a partnership with the Acute Paediatric training matrix which specifies training need by title and frequency for each grade of staff. The Acute Paediatric Service will use this document as a tool for compliance with the Trust's 100% commitment to training.

## 2 Aims

The Women and Children's Care Group (Acute Paediatric Service) upholds Trusts responsibilities as an employer, ensuring that all staff is safe in the role that they perform within their work environment.

By identifying nursing training requirements, clarity, consistency of training and action plans for further development of the service are enabled. Accessing and promoting further training is linked to the NHS Knowledge and Skills Framework (NHS KSF), the Appraisal Process and Personal Development Planning (PDP) process. Collectively these reflect the changing needs of the Acute Paediatric Service and individual's ongoing professional development needs.

By publishing all training requirements, we establish an organisational standard that offers clarity for everyone and ensures consistency in workforce training and personal development.

The Women and Children's Care Group (Acute Paediatric Service) will adhere to the Trusts Workforce Induction and Training Policy (TRW/HUM/POL/621.1)

### **The Acute Paediatric Service Mission is to:**

- Comply with the Trusts 100% commitment to training
- Comply with Trust's Workforce Induction and Training Policy
- Ensure that training conforms with the Royal College of Paediatrics and Child Health Governance Framework and Risk Management Strategy
- Provide multi-professional training for Paediatric emergencies, this is considered an essential element of training.
- Ensure that training complies with Trust legal responsibilities in particular Health and Safety
- Provide and actively promote learning opportunities and situations which enhance and develop clinical practice and skills in addition to those which are Statutory/Mandatory
- Encourage all nursing staff to develop Personal Development Plans (PDP's) in conjunction with the appraisal process, NHS KSF
- Facilitate provision for training and annual updates for Sign off Mentors in accordance with NMC requirements.

- Provide an environment conducive to learning, role satisfaction, education and development

Please note: annual training days will have a 4 month leeway for attendance / completion (this allows for annual leave / sick leave / non-availability of places on the training days). If attendance has been within 1 year and 4 months of last attendance a positive score will be awarded.

### 3 Definitions

**Workforce Development Drive** – database of the training requirements

**OLM** – Oracle Learning Management and record of completion of required training for each individual employee.

### 4 Duties

#### Training

The training detailed in this training needs analysis is identified into two broad categories:

#### **Statutory Training**

Statutory Training is that which has a legal requirement. It is training that must be completed by all grades of staff at induction and updated on an annual basis. The Trust has identified which training fits into this category and this is detailed within the training matrix (Apx 2).

**Essential/Mandatory training as determined by the Trust** - This is training required by rules, specific to the NHS, the Trust, arising from incidents/accidents/complaints, or to a specific department or group of staff.

The Acute Paediatric Service has identified and recognised which training fits into this category and this is detailed within the training matrix.

**External requirements and regulations** - Training that reflects the Trust's decision to meet the training and education expectations defined within standards from various governing bodies, including the Care Quality Commission and the National Patients Safety Agency (NPSA)

#### **Essential Minimum data set for nursing training within the Acute Paediatric Service**

Child protection Level 3 – (external)

Paediatric Immediate Life Support

Paediatric Basic Life Support

Basic Life Support (Adult)

## **Statutory Training**

Trust Update 2017-2018 – eLearning

- Infection Prevention & Control
- Equality Diversity & Human Rights
- Health Safety & Welfare
- Moving & Handling
- Fire Safety
- Information Governance
- Resus
- Safeguarding Adults and Children Level 1

Paediatric Basic Life Support

Moving & Handling

Blood Transfusion Module 2 and 4

Trust induction for new members of staff

Level 1 Conflict Resolution Training

Level 2 Conflict Resolution Training

Level 3 Conflict Resolution Training

Prevent Wrap 3

### **Specific training**

**As identified by the Acute Paediatrics Clinical Governance Group, is implemented and regularly reviewed, refer to Training Needs Matrix Appendix 2.**

### **Corporate Trust Induction/New Employees**

All new staff excluding those that were employed by the Trust within preceding 12 months are required to fulfil their statutory responsibilities in attending a Corporate Induction programme. In

subsequent years employees must attend Essential Skills and Knowledge training according to the needs of their environment. (Please refer to the Training Matrix to identify the training needs of the Acute Paediatric Service)

Induction training covers key statutory training areas in line with the Workforce Induction and Training Policy and include: Health and Safety, Fire, Clinical Governance and Incident Reporting, Equality and Diversity, Counter Fraud, Infection Control and Data Protection.

## Preceptorship

Newly qualified Children's Nurses are required to complete a 6 months of Preceptorship, and demonstrate completion of a programme record of competency and taught sessions/days.

## Risk awareness and management

Risk awareness and management is part of the Trust annual update, which every member of staff completes via OLM. The Acute Paediatrics Clinical Governance Framework reviews audits, learning outcomes from incidents, complaints and claims and information from other sources which informs the risk management process.

All information together with records of attendance at mandatory / statutory training is reviewed by the Acute Paediatric Matron via the Acute Paediatric dashboard (a data collection system populated on a monthly basis by the risk management team as a measure of local performance and a permanent agenda item).

Lessons learned or training requirements highlighted from incident investigation, audit and risk management are fed back to the Clinical Educator via the Paediatric Matron for Acute Paediatrics and the Paediatric nursing management team.

## 5 Overall Responsibility for The Document

### Acute Paediatrics Matron

- Oversee implementation of this Training Needs Analysis
- Offers advice and guidance informally and at departmental meetings
- Oversee Acute Paediatrics Managers in ensuring that the specified training within the Training Matrix are met
- Oversee the actions of the Practice Development Team and Managers acting on training reports provided by the Training Department
- Oversee managers in managing individuals that have not meet the requirements of the training needs analysis/performance issues are raised
- Oversee compliance with Trusts Policy *Workforce Induction and Training Policy* (Appendix 1)

### Acute Paediatrics Clinical Educator

- Review Training Needs Analysis annually in conjunction Acute Paediatrics Matron, ward managers, and Clinical Governance.
- Benchmarking National reports across the Trust and developing actions plans with the Learning and Development Lead (Women and Children's Care Group) for improvement in the service.

Producing training needs analysis in line with organisational, professional, departmental and CQC/DoH requirements in partnership with Clinical Governance and Royal College of Paediatrics and Child Health Governance Framework

- Developing in service training for all staff to improve and maintain skills
- Accessing external training packages where applicable
- Establishing, monitoring, maintaining and contributing to Trust-wide paediatric

- clinical standards/guidelines/protocols.
  - Dissemination of good practice.
  - Produce Training reports.
  - Oversee strategy/Trust Policy for non-attendance (Appendix 1)
  - Inform managers of individuals not meeting the requirements of the training needs analysis
- Maintain and update OLM system for nursing staff within Acute Paediatrics in conjunction with Training Department.
- Ensure MAPS is updated to reflect up to date nursing assessments in conjunction with line managers.
  - Deliver and facilitate high standards of training
  - Act as role model promoting standards of excellence within the Acute Paediatric service
  - Ensure that any performance issues are reported to the appropriate line manager

### **Paediatric Clinical Educator/Line Managers**

It is the combined responsibility of the Paediatric Clinical Educator/Line Manager to ensure the following:

- All nursing staff attend and complete Statutory and Mandatory Training
- Ensure new nursing staff attend a Corporate Induction/Orientation Programme prior to undertaking any work within the Acute Paediatrics.
- Ensure new employees have dates to attend mandatory training week.
- All assessment documentation and training packs are in place and are up to date in clinical areas.

### **Employees**

All **nursing staff** have a responsibility to attend statutory and mandatory training identified within the training needs analysis matrix. Employees must also:

- Participate fully in annual Performance Review with line manager and be proactive in objectives which are set
- Keep own records of all training events, especially Mandatory and Statutory
- Share knowledge with colleagues
- Accept personal responsibility for professional updating
- Recognise limitations in their knowledge and be proactive within rectifying this
- Be aware of their own individual educational/training needs/interests and understand how these fit into organisational objectives
- Maintain close links with the Paediatric Clinical Educator for any training needs
- Ensure own training records and CPD are kept up to date in line with NMC/GMC revalidation requirements.
- Inform their line manager of any change in personal circumstances which may affect performance



## **6 Monitoring Compliance & Effectiveness**

### **Process for Audit, Monitoring and Compliance of attendance**

Bookings, attendance, DNA's and cancellations of Trust Statutory and Mandatory Training are all recorded on OLM system.

The process for Monitoring and Compliance:

- Paper registers are collected from each Essential training day and returned to the Clinical Educator
- Certificate of attendance for each member of staff given at end of week.
- DNA's are identified from the paper register.
- First process for staff that did not attend / complete their Essential training is via an email sent out to line manager, by the Workforce development department (Appendix 1) within 1 week of receipt of the attendance register. This is recorded on OLM.
- Managers should re book the Essential training session with the Clinical Educator for the next available training week.
- Trust Procedure for Non Attendance at Corporate and Local Induction and Essential Skills and Knowledge Training is adhered to for future DNA's
- Attendance issues are reported by the Clinical Educator to the Matron/Line managers as required.
- For all medical staff who fail to attend the required mandatory and statutory training, the Service Line Director will be informed by the Paediatric Clinical Educator. It will be the responsibility of the individual clinician to ensure any such sessions are rebooked/booked at the earliest available opportunity. Failure to attend repeatedly or failure to complete mandatory/statutory training within the Trust designated time frame will result in the individual's failure to fulfil the requirements of the annual appraisal process. In this instance the Service Line Director and the Medical Director will be notified, so that appropriate action can be taken.

### **Process for Monitoring and Compliance of Training**

Bookings, attendance, DNA's and cancellations of Trust Statutory and Mandatory Training are all recorded on OLM system, overseen by the Practice Educator.

- Line managers of nursing staff that fail to attend on the day of planned training are notified as soon as possible after the event (ideally, within 1 week) An email is also sent to the appropriate line manager
- There is a strict DNA Policy of implementing a fee for non-attendance at some courses, i.e. PILS.
- If staff are still unable/do not attend, Acute Paediatrics will be charged the fee as indicated on the application form

### **System for Booking Statutory/Mandatory Training for nursing staff**

- Managers to book through Clinical Educator all nursing staff for their mandatory block week training, to include essential and statutory training, on a rolling basis.

- For all medical staff, it is the individual clinicians own responsibility to arrange their mandatory and statutory training and to keep records this training. Email reminders will be sent to all clinical staff by the directorate management administration team, to remind them when their training is due to expire, allowing them to book training sessions and updates in a timely manner.
- For administrative staff mandatory training is monitored by the team leaders in the department. Staff are reminded of their due date for completion of training, and appropriate support is put in place to release them from their daily duties in order to achieve this training within the timescale.
- Staff to remain on the same monthly slot for block week training, except for exceptional circumstances, as agreed by their line manager.
- All candidate joining instructions for mandatory block week training will be emailed to each candidate 4 weeks prior to their block week training, by the Clinical Educator.
- Refer to the training matrix (Appendix 2) for clarification of frequency of training event
- All employees are required to demonstrate evidence of all training during their annual appraisal

Monitoring and Compliance of these processes will be reviewed annually by the Learning and Development Lead (Women & Children's Care Group) and Paediatric Clinical Educator.

A minimum of 85% compliance has been set with a year on year improvement of 90% compliance by 2015.

The content of any action plans that may be required following this monitoring will be reviewed with the Acute Paediatrics Matron.

Annual audit of systems for ensuring results of audit, learning from incidents, complaints and claims and other information sources are considered as part of ongoing training.

#### **Reports:**

OLM reports are automatically generated by the Workforce Development Team.

### **Monitoring and Audit**

#### **Auditable standards:**

Compliance of attendance to training as described in the training matrix

Follow up of non- attenders

Amendments to training programme arising from incidents/complaints/claims

#### **Responsible Person:**

Paediatric Clinical Educator

## **7 Dissemination and Implementation**

Following approval and ratification, this policy will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the named Executive Director and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

Dear Colleague

Despite being given protected time within your Mandatory Training week commencing, our records show that you have failed to complete the following;

**Trust Update Clinical**

You are now required to complete all outstanding eLearning modules by \_\_\_\_\_ as failure to comply will result in the instigation of the performance management policy.

If there is a valid reason why you have been unable to complete this aspect of training please contact either your line manager or myself immediately.

Your co-operation in the matter is greatly appreciated.

Yours sincerely



Copy of Copy of  
PaediatricTNA Matrix

## Dissemination Plan and Review Checklist

## Appendix 3

Dissemination Plan			
<b>Document Title</b>	Training Needs Analysis		
<b>Date Finalised</b>	November 2014 ( June 2017 V.1.5)		
Previous Documents			
<b>Action to retrieve old copies</b>	Information Governance to remove from Trust Documents and replace with updated version		
Dissemination Plan			
Recipient(s)	When	How	Responsibility
All Trust staff		Vital Signs	Information Governance Team

Review Checklist		
<b>Title</b>	Is the title clear and unambiguous?	Y
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	Y
	Does the style & format comply?	Y
<b>Rationale</b>	Are reasons for development of the document stated?	Y
<b>Development Process</b>	Is the method described in brief?	Y
	Are people involved in the development identified?	Y
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	Y
	Is there evidence of consultation with stakeholders and users?	Y
<b>Content</b>	Is the objective of the document clear?	Y
	Is the target population clear and unambiguous?	Y
	Are the intended outcomes described?	Y
	Are the statements clear and unambiguous?	Y
<b>Evidence Base</b>	Is the type of evidence to support the document identified explicitly?	Y
	Are key references cited and in full?	Y
	Are supporting documents referenced?	Y
<b>Approval</b>	Does the document identify which committee/group will review it?	Y
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Y
	Does the document identify which Executive Director will ratify it?	Y
<b>Dissemination &amp;</b>	Is there an outline/plan to identify how this will be done?	Y

<b>Implementation</b>	Does the plan include the necessary training/support to ensure compliance?	Y
<b>Document Control</b>	Does the document identify where it will be held?	Y
	Have archiving arrangements for superseded documents been addressed?	Y
<b>Monitoring Compliance &amp; Effectiveness</b>	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Y
	Is there a plan to review or audit compliance with the document?	Y
<b>Review Date</b>	Is the review date identified?	Y
	Is the frequency of review identified? If so is it acceptable?	Y
<b>Overall Responsibility</b>	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Y

<b>Core Information</b>	
<b>Date</b>	June 2017 (V1.5)
<b>Title</b>	Training Needs Analysis (Paediatric)
<b>What are the aims, objectives &amp; projected outcomes?</b>	The purpose of this Policy is to ensure all staff are provided with all the training and education to carry out their role safely, effectively and manages risk and organisational objectives in a professional manner.
<b>Scope of the assessment</b>	
<p>All protected characteristics have been considered when developing the policy.</p> <p>The policy and EIA has been developed by:</p> <p>Clinical Educators from Paediatrics and Maternity supported by the Equality &amp; Diversity Lead</p>	
<b>Collecting data</b>	
<b>Race</b>	There is no evidence to suggest there is a disproportionate impact on race. However, this will be monitored via data collected within the Trust, OLM and workforce information.
<b>Religion</b>	There is no evidence to suggest there is a disproportionate impact on religion. However, this will be monitored via data collected within the Trust, OLM and workforce information.
<b>Disability</b>	There is no evidence to suggest there is a disproportionate impact on disability. However, this will be monitored via data collected within the Trust, OLM and workforce information. Reasonable adjustments for training will be made available upon request
<b>Sex</b>	There is no evidence to suggest there is a disproportionate impact on disability. However, this will be monitored via data collected within the Trust, OLM and workforce information.
<b>Gender Identity</b>	There is currently no data collected for this area. However, this will be monitored via feedback collected from staff.



<b>Sexual Orientation</b>	There is no evidence to suggest there is a disproportionate impact on sexual orientation. However, this will be monitored via data collected within the Trust, OLM and workforce information.
<b>Age</b>	There is no evidence to suggest there is a disproportionate impact on age. However, this will be monitored via data collected within the Trust, OLM and workforce information.
<b>Socio-Economic</b>	There is currently no data collected for this area; however this will be monitored through feedback from staff.
<b>Human Rights</b>	There is no evidence to suggest there is a disproportionate impact on Human Rights.
<b>What are the overall trends/patterns in the above data?</b>	No trends or patterns identified at this stage

<b>Involving and consulting stakeholders</b>				
<b>Internal involvement and consultation</b>	Paediatric Clinical Governance			
<b>External involvement and consultation</b>	None			
<b>Impact Assessment</b>				
<b>Overall assessment and analysis of the evidence</b>	Reasonable adjustments for training will be made available upon request			
<b>Action Plan</b>				
Action	Owner	Risks	Completion Date	Progress update
<b>Specific issues and data gaps that may need to be addressed through consultation or further research</b>	There is no data currently collected for gender identity or socio-economic			