



**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	18 February 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Medical Directorate Statutory and Mandatory Training Update and Action Plan for 2025
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mark Henwood, Interim Executive Medical Director
SWYDDOG ADRODD: REPORTING OFFICER:	Carly Hill, Assistant Director, Medical Directorate

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Trafodaeth/For Discussion

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

Paediatric Resuscitation

Following the report that was submitted to PODCC in December. Concerns were raised around paediatric resuscitation training compliance amongst the Paediatric Medical Team.

The records on ESR identified that 37 Doctors required this statutory training, however none were compliant according to their ESR records.

An urgent review of the data was conducted in December to get a clearer understanding of the position. A meeting was held in early January which brought together the key stakeholders to discuss the situation, analyse the results and then develop a plan to identify key responsibilities.

Through further investigation it was identified that staff are undertaking specialised courses with other Health Boards, Royal Colleges as well as recognised external providers.

It has since been established that there is no formal process for communicating with the doctors and receiving evidence of their qualifications and expiry dates outside of the courses recorded on ESR.

Cefndir / Background

The following courses are recognised and approved by the Resuscitation Council UK:

1. NLS (Newborn Life Support) Course
2. ARNI (Advanced Resuscitation of the Newborn Infant) Course
3. EPALS (European Paediatric Advanced Life Support) Course
4. PILS (Paediatric Immediate Life Support) Course
5. ePILS (Paediatric Immediate Life Support) Course
6. PILS Recertification (Paediatric Immediate Life Support) Course

And the following two instructor courses:

7. GIC (Generic Instructor Course)
8. ILSi (Immediate Life Support Instructor Course)

The Learning and Development Team have reviewed the wider compliance on ESR, and, although it does not provide assurance, it should also be noted that 769 wider clinical staff across the organisation have completed this training, providing the skills across directorates.

Asesiad / Assessment

During the week commencing 13 January 2025 an email was sent to the thirty-seven doctors identified as requiring paediatric resuscitation qualifications. The email asked them to provide the Health Board with an update on their qualifications and expiry dates.

So far, the results from responses received are as follows:

- **Twenty-nine out of thirty-seven (78%) are fully compliant and in date in line with their European Paediatric Advanced Life Support (EPALS) certificates (valid for four years) however the current Health Board mandatory training requirements state Paediatric Basic Life Support (PBLS) courses should be completed annually.**
- **Four staff are aware that their training has expired and are either seeking training or have dates agreed for refresher training.**
- **One staff member gave an inconclusive response which is being followed up**
- **Two staff members are currently on long term sick.**
- **One member of staff has not replied within a two-week period. This individual has also been contacted by the Service Manager and will receive a formal letter from the Interim Executive Medical Director if engagement is not made by the 31/01/25.**

A plan has been drawn up to mitigate the issues raised by the People and Organisational Development and Culture Committee, which are a part of the wider plans to centralise training data by the Workforce and Organisational Development Team, however relevant actions include:

Immediate Actions to be carried out linked to Paediatric concerns raised:

- Recognising the time scale to provide assurance, despite the Medical Education Team having had evidence of external course completion, certificates need to be provided to allow for ESR to be updated in line with organisational practices.
- Agreement through Subject Matter Experts needs to be agreed as to refresh date, recognising disparity between the EPALS and PBLS.

Proposal for the improvement of recording medical training data

- All competencies will be interrogated, and assurance provided to Strategic People Planning and Education Group (SPPEG) through the Mandatory Training Group. Data will be considered by directorate, profession and competency, highlighting any areas of concern.
- Work with the Medical Education Team to improve data transfer between MARS/Intrepid to ensure all competencies are recorded through ESR.
- People Development Team to continue to work with the Medical Directorate to drive compliance of Statutory and Mandatory training through the Mandatory Training Group action plan which is reported at every SPPEG until Welsh Government benchmarks are met.

- Further develop Mandatory Training dashboards to allow for deeper interrogation and providing access to the relevant service users.
- People Development team to work closely with Medical Education to create Medical and Dental specific Mandatory Training hub within SharePoint for ease of access, support and guidance.

Proposals to improve compliance in 2025.

The Medical Directorate Leadership Teams' actions will include: -

- Implementation of a programme to ensure all managers review direct reports compliance with statutory and mandatory training.
- Provide monthly reports and requests for action needed from Service Delivery Managers and Clinical leads.
- A review of face-to-face training including delivery methods, duration, and content.
- Consider barriers to face to face delivery and consider appropriate venues for training events.
- Review induction and onboarding arrangements including options for scheduling employment start dates with corporate induction weeks.
- Develop process for approving training as mandatory.
- Review training accessibility arrangements.
- Review and evaluate risks associated with low levels of training compliance.
- Reinforce compliance requirements with communication from the Medical Director.

Action	Action owner	Lead	Timescale
Develop RAG rated compliance report and dissemination process for line managers to receive 2 weekly updates on training compliance and status against corporate improvement plan	Assistant Director Medical Directorate	Gordon Wragg Peter Tunstall	January 2025 onwards
Develop refreshed governance approach	Assistant Director Medical Directorate	Carly Hill	February 2025
Develop Improvement Plan Brief	Assistant Director Medical Directorate	Gordon Wragg	February 2025
Communicate and cascade Improvement Plan Brief through management structure	Assistant Director Medical Directorate	Carly Hill Gordon Wragg	February 2025
Establish regular reports for sharing with executive, senior and middle management teams	Medical Director	Peter Tunstall	February 2025
Review training facilities and develop proposals for increasing access to face-to-face training	Assistant Director Medical Directorate	Helen Thomas	March 2025

The Medical Directorate Leadership Team will develop detailed plans and targets to support Workforce & OD to have an improvement in compliance towards achieving minimum Welsh Government targets of 85% in 2025.

Argymhelliad / Recommendation

The Committee is asked to:

- Note the work being undertaken to resolve mandatory training and establish a single point for record keeping to improve compliance across the Medical & Dental Workforce in 2025.
- Take Assurance that the paediatric staff listed are either compliant and in date or have arrangements in place to become compliant.

Amcanion: (rhaid cwblhau) Objectives: (must be completed)	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 To provide assurance to the Board on compliance with legislation, guidance and best practice around the workforce and OD agenda, learning from work undertaken nationally and internationally, ensuring Hywel Dda University Health Board (the Health Board) is recognised as a leader in this field.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not Applicable
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	1. Safe 3. Effective Choose an item. Choose an item.
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	4. Learning, improvement and research Choose an item. Choose an item. Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable Choose an item. Choose an item. Choose an item.
Amcanion Cynllunio Planning Objectives	Not Applicable Choose an item. Choose an item. Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Mandatory & Statutory Training is one of several performance management tools that aim to ensure employees' performance contributes to business objectives and should be used as part of a holistic approach to managing performance. Positive staff experience, which includes compliance with Mandatory & Statutory Training, has a direct impact on the quality of services, the safety of services and overarching patient experience.
Rhestr Termiau: Glossary of Terms:	ARNI (Advanced Resuscitation of the Newborn Infant) Course EPALS (European Paediatric Advanced Life Support) Course ESR (Electronic Staff Records) GIC (Generic Instructor Course) ILSi (Immediate Life Support Instructor Course) NLS (Newborn Life Support) Course PILS (Paediatric Immediate Life Support) Course SPPEG (Strategic People Planning and Education Group)
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Tîm Cyfarwyddwyr Parties / Committees consulted prior to Executive Team:	Previously discussed at PODCC

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Completion of Mandatory and Statutory Training is core to the PADR/Appraisal process and linked with incremental pay progression
Ansawdd / Gofal Claf: Quality / Patient Care:	Mandatory and Statutory Training is one of several performance management tools that aim to ensure employees' performance contributes to business objectives and should be used as part of a holistic approach to managing performance. Positive staff experience, which includes compliance with Mandatory & Statutory Training, has a direct impact on the quality of services, the safety of services and overarching patient experience.
Gweithlu: Workforce:	If actions are agreed additional to what is already being supported – staffing implications would need to be reviewed.
Risg: Risk:	Effective Mandatory and Statutory Training will support a highly effective workforce to deliver excellent patient outcomes. This will support the Well-being of Future Generations Act.

Cyfreithiol: Legal:	Mandatory and Statutory Training should consider individual members of staff needs. This should be considered within the discussion. As Mandatory & Statutory Training, become linked to pay progression EIA should be carried out locally to ensure that no one is disadvantaged due to a protected characteristic. It is important to note that the Welsh Specific Equality Duties require public organisations to report on staff development opportunities. This should be considered when discussing opportunities with staff.
Enw Da: Reputational:	Effective Mandatory and Statutory Training will support a highly effective workforce to deliver excellent patient outcomes. This will support the Well-being of Future Generations Act.
Gyfrinachedd: Privacy	Not Applicable at this stage
Cydraddoldeb: Equality:	Not Applicable at this stage