




## MENTAL HEALTH SERVICE BUSINESS RULE SESLHDBR/011

<b>Name</b>	Mental Health Mandatory Training for Clinical and Medical Staff		
<b>What it is</b>	<p>There are three levels of mandatory training for South Eastern Sydney Local Health District (SESLHD) Mental Health Service (MHS) clinical staff:</p> <ol style="list-style-type: none"> <li>1. Generic mandatory training requirements for all SESLHD staff (eg Hand Hygiene, Code of Conduct etc)</li> <li>2. Mandatory training requirements for SESLHD clinical staff.</li> <li>3. Mandatory training requirements for SESLHD MHS clinical and medical staff.</li> </ol> <p>This business rule sets out the requirements for point three above, ie mandatory training requirements specific to clinical and medical staff of SESLHD MHS, and how to complete them.</p>		
<b>Risk Rating</b>	Medium	<b>Review Date</b>	June 2027
<b>What it is not</b>	It is not a description of non-clinical or general clinical mandatory training requirements for SESLHD.		
<b>Who it applies to</b>	This document applies to all clinical and medical staff of SESLHD MHS, whether full-time, part-time or casual. It excludes contractors, students and volunteers.		
<b>Background and Context</b>	<p>All SESLHD MHS staff (including casual and temporary) have an online My Health Learning (MHL) account, which is the source of truth for all training requirements for MHS clinical staff.</p> <p>A requirement of employment for <u>all staff</u> within the SESLHD MHS is the completion all flagged mandatory training, whether it is mandated by NSW Health, SESLHD or the MHS as outlined below.</p> <p>Each staff member's MHL home page is customised according to their job classification, with training allocated as follows:</p> <ul style="list-style-type: none"> <li>• Red flag – mandatory courses as prescribed by NSW Health.</li> <li>• Blue flag – mandatory courses as directed by the SESLHD Chief Executive.</li> <li>• Orange pin – mandatory courses as assigned by the SESLHD MHS Executive.</li> </ul>		

	<p> Mandatory  CE Directive  Assigned</p> <p>Training includes a combination of online modules via MHL, and face-to-face sessions/workshops – which can be booked either through My Health Learning or individual Clinical Nurse Educators/ Course Coordinators. <b>(NOTE:</b> Some face-to-face workshops require completion of My Health Learning online modules as a prerequisite).</p>
<p><b>What to do</b></p>	<p>Staff are regularly to check their My Health Learning and complete Mandatory Training requirements according to the published training schedule (Red flag, Blue flag and Orange pin) as per <a href="#">SESLHDPD/204 Orientation and Induction Policy Mental Health</a>.</p> <p>Managers are to ensure Clinical and Medical staff are given the time and resources to complete Mandatory training.</p> <p>The GradStart Mental Health Nursing program is mandatory for new registered nurse graduates who join the MHS. Staff who are part of the GradStart program will have their training requirements explained to them by their manager and local educators.</p> <p>Staff who have questions, believe recognition of prior learning applies, or believe their mandatory training requirements are not appropriate to their role should speak with their manager or the site Clinical Nurse Educator, Site Coordinator of Training. If they are unable to assist, contact the SESLHD MH Workplace Capabilities Team <a href="mailto:SESLHD-MH-WorkplaceCapabilitiesTeam@health.nsw.gov.au">SESLHD-MH-WorkplaceCapabilitiesTeam@health.nsw.gov.au</a></p> <p>If time-sensitive training appears to have no vacancies, please contact the SESLHD MH Workplace Capabilities Team <a href="mailto:SESLHD-MH-WorkplaceCapabilitiesTeam@health.nsw.gov.au">SESLHD-MH-WorkplaceCapabilitiesTeam@health.nsw.gov.au</a></p>
<p><b>When to use it</b></p>	<p>This document is to be referred to by all SESLHD MHS clinical and medical staff when seeking clarification about their Mental Health-specific mandatory training requirements.</p>
<p><b>Why the rule is necessary</b></p>	<p>This business rule is necessary to define the process for meeting individual and organisational MHS mandatory training requirements.</p>
<p><b>Who is responsible</b></p>	<p><b>Clinical and Medical Staff</b> are responsible for:</p> <ul style="list-style-type: none"> <li>• Participating in all mandatory requirements relevant to their position.</li> <li>• Ensuring that they have met all mandatory training requirements on an annual basis.</li> <li>• Notifying their manager if they are assigned mandatory training requirements which they believe are inappropriate</li> </ul>

	<p>to their role.</p> <ul style="list-style-type: none"> <li>• Notifying their line manager if they become aware that they are no longer compliant with their mandatory training requirements.</li> <li>• Formally reviewing compliance with their line manager annually as part of the performance review process.</li> </ul> <p><b>NB all face to face training requires a manager’s approval of study leave prior to enrolling in a mandatory training.</b></p> <p><b>Line Managers</b> are responsible for:</p> <ul style="list-style-type: none"> <li>• Being aware of the MHS mandatory training requirements for clinical staff under their management and ensuring these are appropriate for each individual’s role.</li> <li>• Providing clinical and medical staff with time to complete their mandatory training requirements.</li> <li>• Aiding compliance by regularly sourcing real time mandatory training data online.</li> <li>• Providing team reports on mandatory training compliance to their Service Manager / Clinical Director upon request.</li> <li>• Reviewing individual staff compliance annually as part of the performance review process.</li> </ul> <p><b>Service Managers / Clinical Directors</b> are responsible for:</p> <ul style="list-style-type: none"> <li>• Promoting the importance of compliance with mandatory training requirements.</li> <li>• The overall compliance rate for staff within their service. If organisational compliance falls below 80 per cent, an action plan is to be developed to address the gap.</li> </ul>
<p><b>Ministry of Health / SESLHD reference</b></p>	<ul style="list-style-type: none"> <li>• <a href="#">SESLHDPD/172 - Orientation and Induction – New Employees</a></li> <li>• <a href="#">NSW Government Health Education and Training Institute (HETI) Online Login</a></li> <li>• <a href="#">Health Education and Training Institute (About HETI; HETI Functions)</a></li> <li>• <a href="#">Health Education and Training Institute Mandatory Training Matrix and Targeting</a></li> <li>• <a href="#">National Safety and Quality Health Service (NSQHS) Second Edition: Standard 1. Clinical Governance Standard – Safety and quality training (1.19) (1.20)</a></li> <li>• <a href="#">National Standards for Mental Health Services 2010: Standard 8. Governance, Leadership and Management (8.7)</a></li> </ul>
<p><b>Executive Sponsor</b></p>	<p>Christopher Hay, General Manager, Mental Health Service</p>
<p><b>Author</b></p>	<p>Workplace Capabilities Nurse Educator, Mental Health Service</p>

## Version and Approval History

Date	Version	Version and approval notes
October 2012	1	Endorsed by SESLHD MHS Clinical Council.
April-May 2016	2v1	Draft prepared by Victoria Civils-Wood, SESLHD MHS Policy and Document Development Officer.
July-August 2016	2v2	Document reviewed and APPENDIX A added by: Sue Garcia, SESLHD MHS Workplace Capability Educator; SESLHD MHS Nurse Education Group; Learning and Development Consultant, SESLHD Organisational Learning Unit.
September 2016	2v3	Minor edits made as per feedback by SESLHD MHS District Document Development and Control Committee (DDCC) members, including adjustments to APPENDIX A to reflect different requirements for different types of clinicians. Endorsed by SESLHD MHS Clinical Council.
October 2016	2v3	Reviewed and approved by Manager Executive Services for publishing
September 2019	v3.0	Reviewed by A/Policy & Document Development Officer Links updated Aligned to NSQHS Second Edition
October 2019	v3.1	Reviewed and updated by workforce Capabilities Nurse Educator and Pathways in Practice Coordinator
February 2021	v3.3	Minor review commenced. Incorporates feedback from SESLHD MHS DDCC Circulated for final review
March 2021	v3.4	Removal of Appendix A to minimise confusion created from listing only part of the mandatory training courses and to prevent the document from becoming obsolete by detailing old course details as courses change frequently and not all training requirements apply to all staff categories.
April 2021	v3.4	Endorsed SESLHD MHS Document Development & Control Committee Endorsed SESLHD MHS Clinical Council
May 2021	v3.4	Approved by Executive Sponsor.
May 2024	v4.0	Updated by A/Nurse Educator 2. Minor changes only – no change to process
June 2024	v4.0	Endorsed for publication