

Developing and Implementing an RTT Training Strategy

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What we will cover in this presentation



Why is an RTT Training Strategy important?

What should be included in the Training Strategy?

How can effectiveness and compliance be measured?

What are the critical success factors?

Why is a Training Strategy important?



A large number of Trusts have identified gaps in staff knowledge and understanding of RTT rules




This has led to incorrect application of the rules



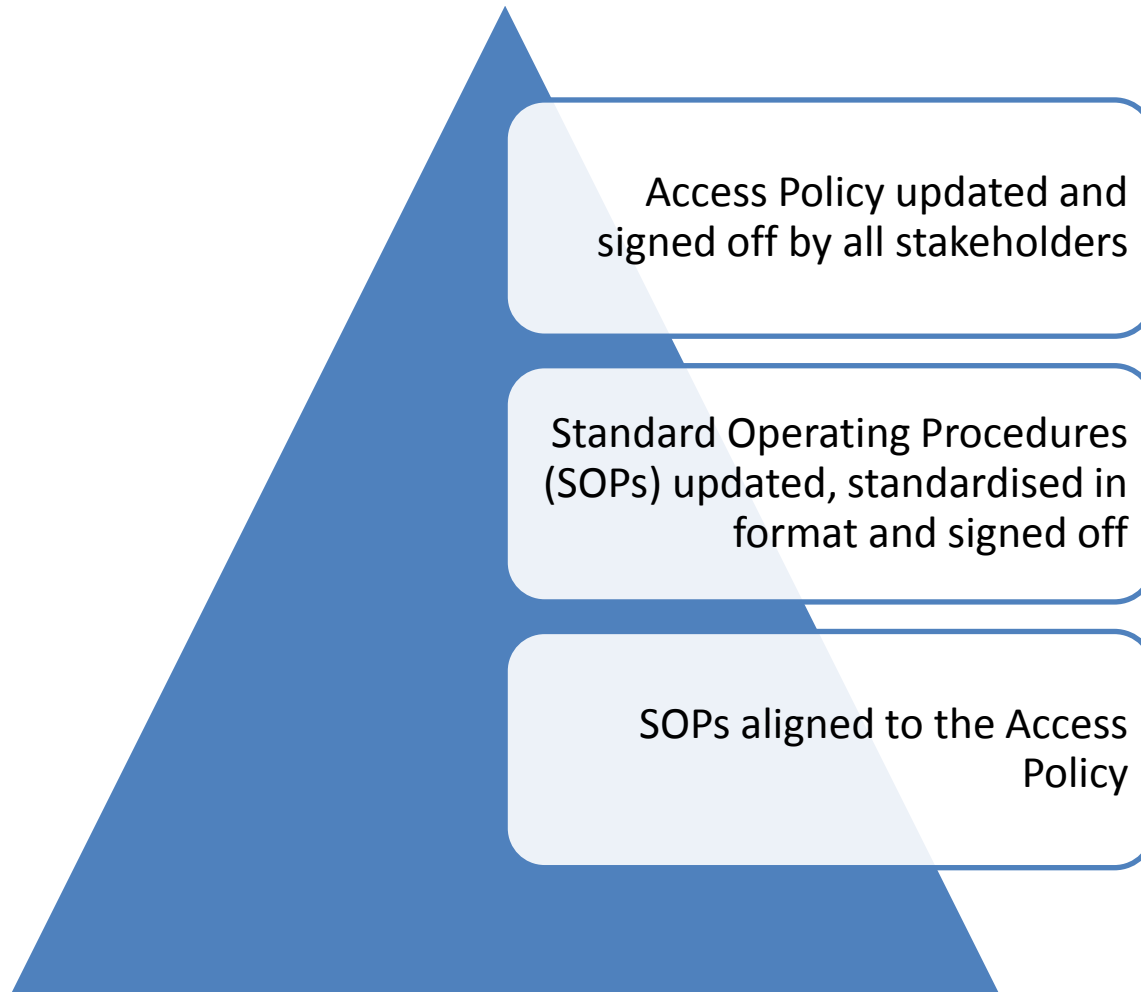
Resulting in delays to patient treatment and often significant retrospective validation 'industries'.



Benefits of a Training Strategy

- 
- Formally sets out the Trust's vision for RTT training and how this will be implemented.
 - Clarifies roles and responsibilities with regards to RTT training.
 - Ensures consistent messages and training content.
 - Sets out how effectiveness of training will be measured.
 - Minimises clinical risk.
 - Reduced requirement for costly validation industries.
 - Reduced risk of financial penalties.

Operational pre-requisites



What to include

Introduction and context

Scope and Strategic Vision

Resource requirements

Implementation plan and
timescales

Business as usual support

How effectiveness and
compliance will be
measured.

Introduction and context

The purpose of the strategy, e.g. to ensure that staff fully knowledgeable in national elective care standards and competent in the application RTT rules in managing patients along elective care pathways.

- Suggested areas to include:
 - Summary of national RTT standards
 - Known issues with staff awareness, knowledge or competency leading to non-delivery of the standards
 - Known issues with data quality and validation
 - Current approach to staff training
 - Acknowledgement of the need for both technical and contextual training.

Scope and strategic vision

Suggested areas to include:

- The scope of the training strategy and who it will be applicable to – be specific about clinical and non clinical staff.
- The nature of the training – will it mandatory for all staff? Expectations about release of staff to undertake training.
- Different levels of training ranging from general awareness to ‘super user’ / expert. Be specific about the learning outcomes required for each level.
- Training needs analysis based on roles and responsibilities of staff i.e. what they need to be able to understand and do (training matrix). Include the number of staff in each group who require training.
- The approach to be used for existing staff and for new starters
- Based on access policy and SOPs
- How competency will be assessed
- Training methods to be used, e.g. face to face ‘classroom’, web based, scenario sessions
- Who will deliver the training, both technical (PAS system) e.g. IT and contextual e.g. centralised RTT expert team
- Linkages to staff development and appraisal, including how lack of competence will be managed

Resource requirements



Implementation plan and timescales

Frequency of training and updates for existing staff

The approach for new starters

The approach to training medical and other clinical staff

Sequencing of training – who will be trained first, second and so on - linked to the training needs analysis

Record keeping - training completed and monitoring of individual competence

Mechanism for feed back or escalation of issues

Arrangements for review and update of training materials

Business as usual support

Arrangements for follow up of training in the business as usual environment

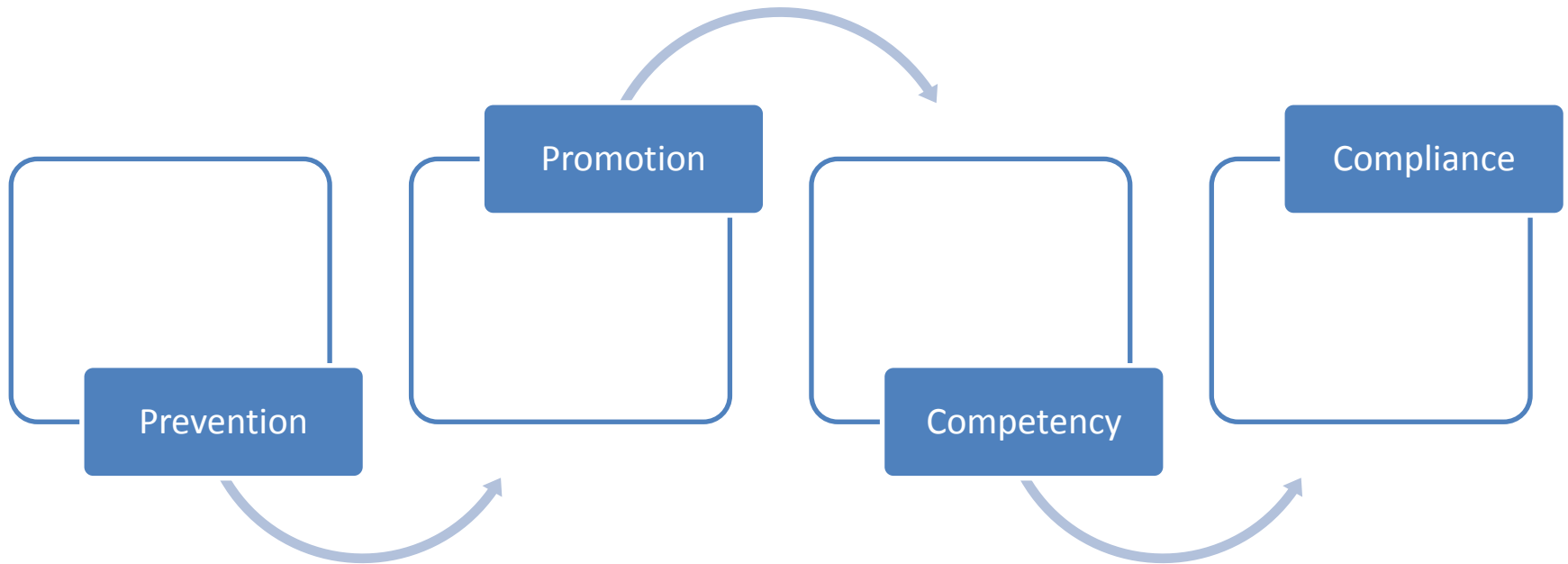
Support available for end users, e.g. generic email for queries, contacts for real time resolution of issues.

The role of the 'super user' / departmental expert - who are they and what is their function?

The role of the central Trust RTT team

Trust intranet information and signposting – how to access it, who updates it and when?

Measuring effectiveness and compliance



Critical success factors

