BSMHFT Compliance Trajectory: Oliver McGowan Mandatory Training for Learning Disability and Autism (February 2026)

With 72% compliance achieved for Tier 2 across Acute and Urgent Care with 231 staff remaining, we require an average of 39 completions per month to reach 100% within six months.

Existing training capacity is sufficient. The primary focus is improving booking conversion and attendance rates. At current capacity levels, full compliance is achievable within the planned timeframe, with delivery likely completing in month 5 subject to attendance being stable.

Clean 6 month Trajectory

Month	Expected Completions	Remaining	Compliance %
Now	-	231	72%
Month 1 (March)	40	191	77%
Month 2 (April)	40	151	82%
Month 3 (May)	40	111	87%
Month 4 (June)	40	71	91%
Month 5 (July)	40	31	96%
Month 6 (August)	31	0	100%

Risk- adjusted on assumption that:

Months 1-4 – more usual attendance – 75%

Months 5-6 – summer.

With current bookings trend we would be looking at around 45 completions in the first four months with only 51 people remaining after 4 months to ease pressure on the final 2 months. This would mean in Month 6 only 15 would be remaining to be trained.

This could be amended further to predict a higher risk of a drop to 55% attendance over the summer.

There is an awareness that this kind of pressure / trajectory for this course may not be sustainable with a recurring training requirement. However, refresher details indicate that this is likely to be mitigated by the need for 3 yearly e-learning and the focus will then need to shift to new starters, returners and additional training.

Risk considerations and mitigations based on current knowledge

Risk Factor	Mitigation
DNAs	14 day and 72 hour reminders, line manager visibility and reporting – automatic escalation e mail and named reporting list (this goes to Associate Directors (ADs) and Clinical Directors (CDs)
Cancellations	Controlled over booking – with the current venues this could be managed up to around 10-15%
Repeat non-attenders	Escalation at a defined point – suggested at 60 days
Governance controls	The monthly compliance dashboard held at directorate and executive level. Non compliance list shared with senior leaders Final 2 month mop up phase with targeted sessions for the trust.
Red Traffic Light system not yet operational	This will not be resolved until August (Month 6) due to the grace period. This is reflective of the engagement for fundamental courses. This will mitigate some risk but will not be resolved within 6 months.
Release of 40 people per month from Acute and Urgent Care directorate	Should the trajectory be extended? Is there more work that ADs and Clinical Leads can do here?
Delayed attendance information from the ICB	This can delay the escalation on DNAs and therefore timely follow up – mitigated through delaying our report but this has been discussed with the ICB and is part of 2026/7 planning.
Data issue - Inaccurate attendance information from the ICB	Continued discussion with the ICB lead and escalation through the LDA ESG