**FAQs: The Oliver McGowan Mandatory Training recruiting and involving experts with lived experience webinar**

February 2024

## Overview

This document aims to answer the questions asked before and at The Oliver McGowan Mandatory Training employer and ICS webinar: sharing best practice in recruiting and involving experts with lived experience. You use this document in addition to the webinar recording or presentation and our [**guidance document**](https://www.hee.nhs.uk/our-work/learning-disability/current-projects/oliver-mcgowan-mandatory-training-learning-disability-autism/employer-resources).

If you have any further questions, please visit [**The Oliver McGowan Mandatory Training FAQs**](https://www.hee.nhs.uk/our-work/learning-disability/current-projects/oliver-mcgowan-mandatory-training-learning-disability-autism/faqs-oliver-mcgowan-mandatory-training-0) or [**contact webpage**](https://www.hee.nhs.uk/our-work/learning-disability/current-projects/oliver-mcgowan-mandatory-training-learning-disability-autism/contact-us).

Note: The text in boxes shows examples of shared practice from attendees at the webinar.

1. How should we address DBS checks?

Organisations should follow their own policies as appropriate, depending on whether the trainers are members of staff or a third-party provider.

**Shared practice:**

We have made the decision a DBS is not required as co-trainers will be with other staff (facilitating trainer) throughout a training session.

However, if an expert became the lead this would change, and a DBS may be required. We would also consider a DBS depending on the cohort being trained and the setting.

1. What happens if one of the co-trainers are unwell or cannot deliver Oliver’s Training? Can we record videos of our experts in case they can't make the training on the day for whatever reason?

The training must be delivered face to face for Tier 2 and live online for Tier 1 by all trainers. This will be a requirement in the Oliver McGowan code of practice. Like any live training, if any of the trainers are unwell or cannot attend at the last minute, a decision about how to manage the situation needs to be made.

Training organisations should anticipate and plan in advance how they will respond. Making a video that can be used in place of co-trainers is not acceptable as the training is required to be co-delivered. Videos would not be considered as a replacement for facilitating trainers and likewise should not be considered for co-trainers as they are not interactive and don’t meet the standards for the training.

**Shared practice:**

Inclusion Gloucester have had lots of experience delivering Oliver’s Training. They manage potential absence by having co-trainers on standby.

They pay the co-trainers on standby a small fee for holding the date. If they are needed to step in, they would be paid the usual fee. Their feedback is this has worked well for them.

1. What happens if co-trainers insist they do not want to be paid?

Please revisit the presentation slides where we provide clear lines and advice on this. Our slides cover the co-trainer job (which must be paid), how people can get involved on a voluntary basis and guidance on benefits.

We emphasise employers need to be careful to advise people to take independent welfare advice and to beware the risk of inadvertently affecting benefits by confusing volunteering with unpaid work. For further information, please see [**Volunteering and claiming benefits - GOV.UK (www.gov.uk)**](https://www.gov.uk/guidance/volunteering-and-claiming-benefits).

**Shared practice:**

I’m looking at honorary contracts for those who ask to volunteer versus a bank or fixed term post.

1. How do you determine the person has lived experience in your recruitment process?

Employers need to ensure co-trainers can represent the perspective and experience of living with a learning disability or living as an autistic person. They need to take reasonable practical steps to do so.

**Shared practice:**

We are not asking for diagnosis evidence but are recruiting mainly from support and advocacy services where our future colleagues are known and have already told their story many times.

**Shared practice:**

As someone from a self-advocacy group, we don't ask people their diagnosis as we know people well.

1. There is a difference between involvement and employment – and there are different responsibilities for both involvement and employment.  Are organisations employing or involving experts?
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Oliver’s Training must always be co-delivered by an expert with lived experience co-trainer and a facilitating trainer. The Oliver McGowan expert with lived experience co-trainer role is a paid role. This does not rule out opportunities for involving experts with lived experience or their families who wish to support the delivery of the training alongside facilitating trainers and co-trainers.

1. What funding is there to support this? How will this work for national companies?

The first part of the training, the elearning, is free for everyone in the UK to access. The second part of the training requires facilitating trainers and expert with lived experience co-trainers.

The costs associated with this for employers will depend on how the employer supports their workforce to access the second part of the training. NHS England provided funding in 2022/23 and 2023/24 to Integrated Care Systems (ICSs) to build and co-ordinate trainer capacity and capability. This is supporting employers who wish to deliver the training in-house who are working with their ICSs. Trainers working across ICSs have been trained to cascade the trainers’ training.

National organisations who wish to access the trainer training can select a region/ICS that aligns with their business delivery and work with an integrated care system (please see expressions of interest page on our website for contact details).

We are working with two providers who are delivering trainer training for Tier 1 and Tier 2 of Oliver’s Training. Currently our priority is working with integrated care systems to support systems to build trainer capacity by training lead trainers and cascading the trainer training.

If your organisation is national, we are keeping a log of interested organisations (via [this form](https://forms.office.com/Pages/ResponsePage.aspx?id=K5Gn_5ewMUGcD9DoB1Wyq46WKWexnUZEqxAObMMWOYJUMVFDODRFQzRNNFFJWUVGTzUzSlhDUFFLUCQlQCN0PWcu)) and we will be in touch if any commissioned training places become available. This is dependent on capacity and may not be the fastest way for your organisation to access trainer training.

DSHC are exploring ways to support the further roll-out of Oliver’s Training to the adult social care sector, including exploring whether aspects can be delivered through the Adult Social Care Workforce Reform programme.

1. How have people job matched the co-trainer job description given the current suggestions relating to knowledge and qualifications and the indication this is a band 5 role?

Trainers with a learning disability and autistic trainers should be appropriately remunerated for their time associated with training activity with no distinction made to levels of pay because the person has a learning disability or is autistic.

We have provided example job descriptions in plain English for employers to use as guidance. The co-trainer job description was internally job matched at Band 5 NHS Agenda for Change in Health Education England. Employers can use and adapt this document and follow their own local HR and job matching processes.

**Shared practice:**

I used the NHS England template job description and found a similar trainer role already trust-banded at AfC band 5. I then supported the HR colleague to see the similarities – it went through after a few queries, as did the band 6 trainer role.

1. How can we at systems level involve experts with lived experience in steering group meetings / decision making?

Your organisation needs to agree what the steering group opportunity is, what the commitment is, how long the role will be needed, how you would support experts with lived experience to apply and what support will be in place for the experts with lived experience once they start. We recommend you read the NHS England guidance on [involving people with lived experience](https://www.hee.nhs.uk/sites/default/files/documents/Involving%20people%20with%20a%20learning%20disability%20and%20autistic%20people%20FINAL%20.pdf).

**Shared practice:**

For The Oliver McGowan Mandatory Training programme steering group at NHS England, we recruit our experts with lived experience by advertising the role (in easy read and plain English) and sharing the opportunities with our networks including Skills for Care, patient and public voice partners and approved trainers.

We provide potential applicants a range of different ways to express their interest, including by sending in a video. We pay our experts with lived experience using the [**NHS England patient and public voice partners policy**](https://www.england.nhs.uk/get-involved/resources/patient-public-voice-partners/).

1. Should staff supporting experts with lived experience (as a part of their usual role) complete Tier 2 even if their usual role falls under Tier 1 only.

If a staff member’s role involves them providing care or support to people with a learning disability or autistic people, then we recommend they undertake Tier 2 of Oliver’s Training.

To understand which Tier of The Oliver McGowan Mandatory Training may be relevant to their staff, visit the [**Tier guidance document for employers**](https://www.hee.nhs.uk/sites/default/files/documents/The%20Oliver%20McGowan%20Mandatory%20Training%20-%20Tier%20guidance%20for%20employers%20FINAL%20%281%29.pdf).

1. To be a Tier 2 trainer, what are the qualifications that staff should already have to access Tier 2 trainer training

We have provided [**example job descriptions for employers**](https://www.hee.nhs.uk/our-work/learning-disability/current-projects/oliver-mcgowan-mandatory-training-learning-disability-autism/employer-resources) to adapt and use.

1. What does this process look like for local authorities?

The Oliver McGowan Mandatory Training webpages provide information about Oliver’s Training, information for employers and frequently asked questions. Local authorities will need to refer to the draft Code of Practice to understand their responsibilities as commissioners of CQC-regulated services and as providers of CQC-regulated services.

1. What factors do we need to consider to ensure any training venues used for the delivery of the Oliver McGowan training are suitable? Things like access, lighting, familiarity, room layout and anything else.

The choice of venue needs to take into account any reasonable adjustments required by participants and trainers. It should be conducive to the learning and in a safe secure environment. This is no different to any other training. As the training is directly concerned with reasonable adjustments the choice of venue and experience of attending the training is likely to be noticed by attendees and have an influence on how the training is received.

Some considerations:

Understand attendees’ access requirements and any reasonable adjustments well in advance so you can plan the session accordingly.

Consider the venue well in advance. It needs to be suitable to attendees’ sensory processing needs. Below are some considerations when booking a venue for the co-trainer course:

* Can the venue provide a quiet space as well as the room where the training takes place?
* Natural lighting
* Access to outside space
* Is the building accessible?
* If organising catering, are delegates asked about dietary requirements?
* is the venue accessible by public transport?

Delegates will need details about the venue well in advance in order to plan travel. It’s helpful to send a photo and clear directions to the venue with the information about the training course.

Send a trainer profile with photo and ensure trainer(s) are wearing badges on the day. Information about the course will need to be sent in advance so that delegates know what to expect from each of the days. Timings for the day need to be included.

1. What is the situation regarding GP surgeries?

GP surgeries are supported to access Oliver’s Training through the rollout taking place in their local integrated care system. We are developing communications to support primary care colleagues to understand the how to access The Oliver McGowan Mandatory Training and the Health and Care Act 2022 statutory requirements.

1. How do we best represent people with learning disability and autistic people who have complex needs? Can their parents/carers represent them as a person with lived experience?

Family members and carers can and are welcome to support co-trainers both supporting the individual and offering their own experience. Family members and carers cannot take the place of a person with a learning disability or autistic person as a co-trainer.

1. Can we deliver the training without involving people with a learning disability and autistic people as co-trainers for The Oliver McGowan Mandatory Training on Learning Disability and Autism, as this has proven a challenge in our area?

No. At least one person with a learning disability and one autistic person must be involved in the delivery of The Oliver McGowan Mandatory Training on Learning Disability and Autism.

1. When will the final Code of Practice be published?

We hope the final Oliver McGowan Code of Practice will be laid before parliament and published soon. NHS England and partners have been working with DHSC to support this work.

1. On what basis are co-trainers employed? Permanent, temporary, fixed term, full time or part time?

There are different models across each area. Some areas are working in partnership with advocacy organisations who are taking responsibility for recruitment, support and employment.

Some co-trainers are in substantive permanent roles, others in fixed-term and some are on bank contracts. There are known benefits to teams’ and organisations' culture when experts with lived experience become permanent members of teams and we role model inclusivity from the inside the NHS.

1. How is the trainer training funded?

The funding allocation to support the rollout is to build capacity across systems. It's up to local systems how the funding is used. It is likely a significant proportion would be used to recruit and train co-trainers and facilitating trainers.

1. How are employers recruiting the co-trainers?

Please revisit the [presentation slides and recording](https://www.hee.nhs.uk/our-work/learning-disability/current-projects/oliver-mcgowan-mandatory-training-learning-disability-autism/employer-resources) as we have a few example case studies on how employers are recruiting co-trainers.

**Shared practice:**

The NHS standardised processes are still a challenge for most applicants and colleagues. We work with expert with lived experience support / peer roles throughout the recruitment to ensure this is an easier process for people. This help includes designing applications and interviews, supporting the subsequent time sheets and travel expense systems input.

**Shared practice:**

We did joint recruitment with the learning and development and our learning disability and autism team.

1. Does a Tier 1 trio have to work together, or can Tier 1 trainers mix and form different trios?

Once Tier 1 trainers are approved, they can deliver Tier 1 training with other approved Tier 1 trainers. The trio must always have an autistic co-trainer, a learning disability co-trainer and a facilitating trainer.