APPROPRIATE AND EFFECTIVE USE OF MANDATORY TRAINING

1. PURPOSE: This Veterans Health Administration (VHA) Directive establishes the Learning Organization as an explicit goal of VHA and outlines effective means for improving organization performance while minimizing the use of mandatory and required training for large groups of employees.

2. BACKGROUND

a. **Learning Organization.** In 2007, VHA created a Transformational Performance Measure to "distinguish VHA as a learning organization." A learning organization facilitates the learning of all its members and continuously transforms itself. Learning organizations exhibit five main characteristics: systems thinking, personal mastery, mental models, a shared vision, and team learning. Through an open culture of communication and trust, individual learning becomes organizational learning, which leads to organizational improvement and the development of an organization's competitive advantage. The VHA Learning Organization initiative is highly linked to other VHA-wide improvement initiatives such as System Redesign, Transformation Initiatives, Organizational Health and Quality Improvement.

b. **Mandatory Training as a Human Resources Strategic Issue.** In 2008, the VHA National Leadership Board's (NLB) Human Resource Committee (HRC) ranked "mandatory training" as the top challenge in Human Resources for 2009. Also in 2009, a survey of Veteran Integrated Service Network (VISN) and facility Designated Learning Officers (DLOs) was performed to inventory educational resources and to determine the top challenges in VHA education. Nearly 60 percent of these education leaders picked "Reducing VA's present reliance on mandatory training" as the top challenge facing VHA in education. Research supports the reduction of mandatory training as a goal; forced learning decreases an individual's motivation to learn, decreases employee satisfaction, and undermines employees' accountability for their own learning. Mandatory training is directly counter to the principles of the learning organization. In addition, research has concluded that the majority of workplace learning is accidental and informal, and not transmitted through formal training programs.

c. **Blue Ribbon Panel on Department of Veterans Affairs (VA)-Medical School Affiliations.** The Report of the Blue Ribbon Panel on VA-Medical School Affiliations (Transforming an Historic Partnership for the 21st Century, accepted Sept 29, 2009 by the Secretary of Veterans Affairs) makes special mention of mandatory training as an issue that evokes "particular exasperation" and should be addressed to improve effective affiliations. The report states "VA currently requires all employees, including "shared" and even unpaid faculty

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and trainees to undergo many hours of mandatory training, generally without evidence of effectiveness. In many, if not most cases, such training is duplicative of the academic affiliate's own training. The Panel believes VA and its academic affiliates should examine the quality and effectiveness of mandatory training and work towards a system that provides joint training and training reciprocity." In addition, mandatory training was cited as the second most important issue (behind problems relating to VA Information Technology (IT) security) that hindered the local affiliation relationship.

     d. **VHA NLB HRC Mandatory Training Workgroup.** To further evaluate the use and outcomes of mandatory training in VHA, the NLB HRC chartered the Mandatory Training Workgroup in November 2008. The goal of the workgroup was to envision a strategic evidence-based approach to Mandatory Training that linked employee learning to organizational outcomes. The workgroup's vision is that mandatory training, used sparingly, would become meaningful, focused, effective, flexible, and satisfying to employees. The workgroup evaluated the current state of mandatory training in VHA and determined strengths and weaknesses of current approaches. The workgroup also actively promotes research into alternatives to mandatory training. The workgroup was designated as a standing subcommittee in October 2010.

     e. **Sources of Mandatory Training.** Training needs for VHA employees originate from a variety of sources, both within and outside of VHA. These sources include Executive Orders, Congressional mandates, Office of Personnel Management, regulatory bodies, VA department-level requirements, and VHA leadership or national program office requirements, as well as standards from accrediting bodies. Mandates for training are issued through VA and VHA Directives, Handbooks, memoranda, performance measures, and other media. In 2007, the Employee Education System (EES) initiated the Mandatory Training Web page, designed to be an official repository of information regarding VA and VHA mandated or required training programs. The Web page showing current requirements is at the following website: https://myees.lrn.va.gov/default.aspx. *NOTE: This is an internal Web site and is not available to the public.*

     f. **Costs of Mandatory Training.** Given the size of VHA's workforce, any training requirement poses a significant organizational cost. It is estimated that implementation of the current VA and VHA Mandatory Training requirements costs VHA over $200 million per year in "lost" employee time. Tracking these requirements also costs considerable time, especially if the target audiences are not easily identifiable through Personnel and Accounting Integrated Data System (PAID) elements or requires manual aggregation of data if tracking is not available through the VA Talent Management System (TMS). Given the system-wide cost of the current portfolio of mandatory training, processes and procedures must be put in place to clearly track mandatory and required training and also require program offices, VISNs, and facilities to follow a more systematic approach to the establishment of training requirements.

     g. **Definitions**

     (1) **Federally-Mandated Training.** Federally-mandated training is defined as training for all or designated employees Government-wide. This includes training mandated by Federal statute or regulation. These training requirements originate outside of VA. *NOTE: Federally-mandated topics are identified in VA Handbook 5015.*

(2) **Agency-Required Training.** Agency-specific training is training required by the VA and provided to VA Federal employees in order to achieve the goals and objectives of the VA, as needed.

(3) **VHA-Required Training.** Training required by the VHA leadership or national program offices.

(4) **VISN- and Facility-Required Training.** Training required by VISN or facility leadership or offices.

(5) **All-Staff Training**. Mandatory or required training that is targeted to all VHA employees, including transient workforce groups (contractors, fee-basis employees, volunteers, trainees, or without-compensation (WOC) individuals**).**

(6) **Role-Based Training.** Mandatory or required training that is targeted to a subset of VHA employees, as applicable to a certain employee role.

(7) **Test-out Option.** The test-out option allows an individual to pass a test to affirm the individual's knowledge as opposed to taking the "training." Consideration of test out options needs to be given to externally-developed mandatory training topics, as appropriate. Test-out options allow employees to demonstrate pre-existing knowledge, skills or attitudes, decrease training time, increase training customization and increase employee satisfaction with training.

3. POLICY: It is VHA policy that all requests for initiation or increase in VHA-level mandatory or required training (either role-based or all staff) must be reviewed by the National Leadership Council (NLC) Workforce Committee, or delegated to a subcommittee or workgroup of the NLC Workforce Committee, for compliance with this Directive. The NLC recommends for approval or disapproval to the Under Secretary for Health prior to issuance to ensure that interventions to improve organizational performance are not disruptive, burdensome, or unnecessarily consume organizational resources, such as employee time.

4. ACTION

a. **The Under Secretary for Health.** The Under Secretary for Health is responsible for approving all national mandatory and required VHA training topics that are targeted to "all staff."

b. **National Leadership Council (NLC) Workforce Committee.** The NLC Workforce Committee, or subcommittee thereof, is responsible for:

(1) Reviewing all newly-proposed national mandatory and required training targeted for employee roles for compliance with this Directive.

(2) Conducting the annual review and recertification of existing Mandatory or Required Training courses.

(3) Reviewing all newly-proposed VHA Directives and handbooks that include mandatory or required training for compliance with this Directive.

(4) Reviewing all existing mandatory and required topics.

(5) Re-certifying annually to determine if the learning need has changed, evolved, or no longer exists.

(6) Presenting to the VHA Program Officers options to reduce mandatory training. These include:

(a) <u>Reduction or Elimination.</u> This can be accomplished by:

<u>1</u>. Rescinding the mandatory training requirement.

<u>2</u>. Changing the training requirement to "highly recommended," but "not mandatory."

<u>3</u>. Combining topics that have intuitive overlap or are for the same target audience. This effectively reduces the number of training courses required.

<u>4</u>. Reducing the length of a required course (30 minutes versus 1 hour, for example).

<u>5</u>. Reducing the frequency of training to biennially (every 2 years), or triennially (every 3 years) instead of annually.

<u>6</u>. Reducing or limiting the target audience, e.g., to full time paid staff, with exclusion of contractors, trainees, volunteers, fee-basis, or low eighths personnel (less than 3/8ths for example) when feasible.

(b) <u>Substitutions.</u> This includes:

<u>1</u>. Replacing a recurring mandatory training requirement with a competency-based assessment process to determine if an individual requires refresher training.

<u>2</u>. Replacing a mandatory training requirement with a stepped training delivery method, focusing intensive training on a small highly-involved target audience, awareness training for a larger group, and only information dissemination for other groups.

<u>3</u>. Replacing mandatory training requirements with a menu of training resources for self-directed learners. This allows learners to assess their learning need with a pre-test and choose resources that fit into time, schedule, or learning style constraints. These resources can be video, audio, online, paper-based, or live training. ***NOTE:*** *Having a choice in methodologies greatly increases learner satisfaction.*

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4. Replacing mandatory training requirements with measurement of appropriate data, and design system or individual interventions based on the data.

5. Enacting system changes (changes in work processes or forcing functions) that address learning needs and simultaneously ensure improved system outcomes.

6. Utilizing a "Read and Understand" Talent Management System (TMS) option for compliance based issues that are not training issues.

c. **Office of Employee Education System (EES).** EES is responsible for:

(1) Tracking, oversight, and review of all VHA, VISN, and facility-level mandatory or required training initiatives. ***NOTE:*** *This oversight process ensures training that minimizes unnecessary use of resources, and encourages alternative employee learning mechanisms.*

(2) Working with the Program Officers when training is determined appropriate, to design, develop, implement, and test a training solution that meets VHA performance goal(s).

(3) Ensuring all mandatory and required training modules and resources are tested on a representative sample of the target employee group to assess target audience satisfaction, appropriate content level, time, and technical considerations.

(4) Maintaining the Mandatory Training Web site.

(5) Ensuring the educational format is compatible with the VA TMS.

(6) Consulting with Program Offices to determine the appropriateness of training as a solution.

(7) Ensuring all VHA mandatory and required training targeted to VHA paid staff is coordinated, maintained, and tracked in the VA TMS.

(8) Ensuring all VHA mandatory and required training is capable of being widely and simultaneously accessed.

(9) Ensuring all VHA mandatory and required training is available in multiple formats and delivery methodologies.

(10) Ensuring all new internal VHA, VISN, and facility level mandatory or required training requires a test-out option, i.e., pass test instead of training.

(11) Ensuring all VHA-wide training requirements are communicated to the field by a Handbook or Directive and signed by an appropriate agency official.

(a) A requirement for system-wide training may not be communicated by memoranda, newsletters or email communications.

(b) Drafts of Directives or Handbooks containing training (or if unavailable at that time, the verbiage related to the training) must be sent to EES and the Office of Academic Affiliations (OAA) for concurrence and coordination, and for review by the NLC Workforce Committee. *NOTE: EES and OAA co-chair and provide support to the Mandatory Training Subcommittee of the NLC Workforce Committee.*

(12) Ensuring any policy requiring or mandating training applicable to trainees has the concurrence from OAA. All required training for trainees must be inserted into the Mandatory Training for Trainees course on the Librix system and is not to be free-standing.

d. **Director, VHA Office of Executive Correspondence.** The Director, VHA Office of Executive Correspondence (10B1) is responsible for including EES (10A2B) and OAA (10A2D) on the concurrence of all national Directives, Handbooks, and memoranda related to mandatory and required training to coordinate approval by the NLC Workforce Committee.

e. **VHA Chief Learning Officer.** The VHA Chief Learning Officer, or designee, is responsible for ensuring:

(1) Education and training are aligned with VHA strategic goals and objectives.

(2) All employees receive the appropriate training for the development and maintenance of a competent workforce.

(3) The co-chairpersonship of the NLC Workforce Committee Mandatory Training Subcommittee.

(4) Staff support is provided to the NLC Workforce Committee Mandatory Training Subcommittee.

(5) Mandatory and required training for non-VA staff target audiences, such as Fee-Basis, WOC individuals, trainees, contractors, or volunteers is available outside of the VA TMS using alternate learning resource mechanisms.

f. **VHA Program Officer.** Each VHA Program Officer is responsible for:

(1) Ensuring each request for mandatory and required training is accompanied by an assessment of the organizational impact of the training. The assessment must include, at a minimum:

(a) The estimated employee time spent on activity,

(b) The cost of time in dollars, and

(c) An assessment of impact on patient care operations. *NOTE: An "Assessment of Impact of Mandatory/Required Training" is Section 2 of VA Form 10-0456a.*

(2) Ensuring requests are forwarded for approval of mandatory and required training (either "all staff" or "designated staff") using VA Form 10-0456a, Mandatory Training Topic Review (see Att. A) to the EES VHA Required Training Mail group at: RequiredTraining.EESVHA@va.gov .

(3) The updating of any Directives, Handbooks, or other policy documents once the NLC Workforce's Mandatory Training Subcommittee has reviewed the request and made recommendations through the NLC Workforce Committee to the Under Secretary for Health, and the Under Secretary for Health has reviewed and approved the request.

(4) Ensuring EES and OAA officially concur on the policy document within VAIQ, the VA Central Office correspondence tracking system. The policy must define the training objectives, target audience, deadlines, reporting requirements, instructions for accessing the training, and all other pertinent information as listed on VA Form 10-0456a.

(5) Assigning review to, and receiving concurrence from, the appropriate labor management relations staff to ensure any bargaining requirements are met.

(6) Ensuring any policy requiring or mandating training applicable to contractors must obtain concurrence from the Office of Procurement and Logistics (OPL).

(7) Ensuring any policy requiring or mandating training applicable to volunteers has obtained the concurrence from the Office of Voluntary Services (OVS).

g. **Chief Officer, VHA Office of Academic Affiliations (OAA).** The Chief Officer, OAA, or designee, is responsible for:

(1) Co-chairing the NLC Workforce Committee's Mandatory Training Subcommittee.

(2) Providing staff support to the NLC Workforce Committee's Mandatory Training Subcommittee.

(3) Establishing the training requirements of clinical trainees.

(4) Developing alternate training formats, methodologies, or content for clinical trainees, if appropriate.

h. **Director, VHA Office of Voluntary Services (OVS).** Director, VHA OVS, is responsible for:

(1) The training requirements of volunteers, and

(2) Developing alternate training formats, methodologies, or content, if appropriate

i. **Chief, VHA Office of Procurement and Logistics (OPL).** The Chief, OPL is responsible for:

(1) The training requirements of contractors, and

(2) Developing alternate training formats, methodologies, or content, if appropriate.

j. **VISN Director.** Each VISN Director is responsible for:

(1) Oversight of mandatory and required training at the VISN-level. This includes:

(a) Constituting an effective committee for oversight of mandatory and required training which includes an analysis of estimated cost of staff time to complete the training;

(b) Reviewing and approving or disapproving all requests for VISN-level mandatory and required training;

(c) Developing a listing of mandatory and required training at the VISN-level;

(d) Annually re-evaluating and re-certifying the appropriateness of VISN-level mandatory and required training; and

(e) Reducing and eliminating any training programs which are no longer needed and/or have very low user satisfaction.

(2) Implementing a test-out option for all VISN-level mandatory and required training.

(3) Maintaining a current listing of all VISN mandatory and required training on the VISN Web site.

(4) Oversight of all facility-based mandatory and required training in the VISN.

(5) Comparative tracking of all VISN and facility mandatory and required training to ensure that such training is not over-used (see Att. B).

(6) Reporting VISN and facility mandatory and required training through the VISN DLO to the NLC Workforce Committee. *NOTE: The national training requirements need not be duplicated on the VISN Web site, but should have links to EES Mandatory Training web page at: http://vaww.ees.lrn.va.gov/Training/mandatory/ . NOTE: This is an internal Web site and is not available to the public.*

k. **Facility Director.** Each facility Director is responsible for:

(1) Oversight of mandatory or required training at the facility, which includes:

(a) Constituting an effective committee for oversight of mandatory and required training which includes an analysis of estimated cost of staff time to complete the training;

(b) Reviewing and approving or disapproving all requests for facility mandatory and required training;

(c) Developing a listing for mandatory and required training at the facility (see Att. C);

(d) Annually re-evaluating and re-certifying the appropriateness of facility mandatory and required training; and

(e) Reducing and eliminating any training programs which are no longer needed and/or have very low user satisfaction.

(2) Implementing a test-out option for all facility mandatory and required training.

(3) Maintaining a current listing of all facility-driven mandatory and required training on the facility website.

(4) Reporting facility mandatory and required training through the facility DLO to the VISN DLO.

l. **Designated Learning Officers (DLOs).** The Facility DLO is responsible for:

(1) Chairing the local mandatory training committee, and

(2) Making recommendations to the Facility Director regarding facility mandatory training issues.

5. REFERENCES: VA Handbook 5015, Employee Learning and Professional Development.

6. FOLLOW-UP RESPONSIBILITY: The EES (10A2B) is responsible for the contents of this VHA Directive. Questions may be directed to EES VHA Required Training Outlook mail group, or to 501-257-4213.

7. RESCISSIONS: VHA Directive 2007-026, dated September 17, 2007, is rescinded. This VHA Directive expires December 31, 2016.

Robert A. Petzel, M.D.
Under Secretary for Health

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DEPARTMENT OF VETERANS AFFAIRS (VA) FORM 10-0456a, MANDATORY TRAINING TOPIC REVIEW

	Mandatory Training Justification and Recertification Form	Topic Tracking Number:
		To be completed by EES VACO

INSTRUCTIONS: (Download a copy of this form to your computer before completing the fields.) Please complete this form for all VHA-required topics proposed or recommended for removal from the official listing by your Program Office.

E-MAIL COMPLETED FORM TO OR CONTACT FOR QUESTIONS: EESVHARequiredTraining@va.gov

	Propose to:	Add a Topic	Delete a Topic
Topic:			

Section 1 - Contact Information

Contact Person:	Title:
Organization Name:	
Mailing Address:	
City / State / Zip:	
Phone:	Extension:	Fax:
E-mail address:	

Section 2 - Justification

1. What is the reason/source of this request? Describe the change that will occur as a result of requiring this training. Attach or link to any documents requiring the training.

2. Has an analysis been conducted that demonstrates training is necessary?

    Yes (please attach)

3. Were other alternatives considered that would lessen the impact on employee time? Alternatives may

    Instructional memo/directive

    handbook

    guidance on restructuring local planning/processes

    job aid

    highly recommending vs. mandating training

    other communication (please describe): _____

    4. Provide or attach learning objectives for this training. Identify what employees should be able to do upon completion of the

5. List the modality options planned for this training (at least one should be print). At least 2 modalities are recommended to ensure employees have multiple options for completion and to accommodate different learning styles.

Section 3 - Training Requirements

6. Are facilities free to identify alternate training sources that meet this mandate?
 	
     Yes
 	
     N

7. Is testing out an option?
 	
     Yes (please attach)
 	
     No

8. Please attach the draft directive or handbook that will describe this training requirement. (or verbiage to be included in handbook)   Attached
9. Specify the target audience:

10. Does this target audience include:
 	
     Contractors
 	
     Volunteers
 	
     WOCs
 	
     Trainees

11. Provide estimate of number of employees required for training by job category (please
 	
     Estimated # of Staff Nationwide:
 	
     _____

12. What is the estimated time (in hours) for the training?
13. Calculate the cost of this training in staff time (number of employees in target audience x the length of the course in hrs / 2040 hrs/year ___FTE x average salaries of employees targeted = $_____salary cost   FTE: Salary Dollars:

14. If the training is not the direct responsibility of the office proposing this training, did the responsible
 	
     Review   Provide specific
                                        offices/POCs:
     Recommend without changes
 	
     Recommend with changes (please specify)   Changes:

15. Is this a recurring training requirement, and if so, how frequently does the target audience need to receive this training? Is so, is the the scope and length of the recurring training justified? Will employees retake the entire training or will alternatives be offered that reduce the impact of the recurring training? Alternatives may include testing out, training reviews, competency assessments, reading memos or other documents.

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Section 4- COMPLETE for ANNUAL CERTIFICATION OF EXISTING TRAINING REQUIREMENT only
Given the significant system-wide resources impact of mandatory/required training, the NLB HRC is requiring Program Offices to re-examine current mandates/requirements to determine a) if the exigency prompting the training still exists, and if so, b) what can be done to reduce the impact on staff time to complete the training. Please select at least one or more of the following options to reduce the burden on staff time:
OPTION 1: **Rescind** the training requirement as the exigency prompting it no longer exists.
OPTION 2: **Change** the training to "highly recommended" but not mandatory. Evidence shows that adult learners are more open to learning when the rationale for learning is made clearly evident vs. mandated.
OPTION 3: **Combine** topics that overlap, effectively reducing the NUMBER of courses required.
OPTION 4: **Reduce** the LENGTH of a required course (30 minutes vs. 1 hr., etc.)
OPTION 5: **Reconsider** the FREQUENCY, e.g., could the refresher training be required biennially (every 2 years) or triennially (every 3 years) instead of annually.
OPTION 6: **Re-examine and/or clarify** the TARGET AUDIENCE to include only full-time or paid staff, and to exclude more transient employee categories such as contractors, fee-basis, without compensation, volunteers or trainees. Determine if these groups really require the training or if it could be more narrowly or clearly defined to more accurately identify those who REALLY need the training or if another strategy would be approropriate for them.
OPTION7: **Replace** recurring mandatory training requirement with competency-based assessment process to determine if an individual requires refresher training.
OPTION8: **Replace** mandatory training requirement with a stepped training delivery method, focusing intensive training on a small highly-involved target audience, awareness training for a larger group, and information dissemination only for still other groups.
OPTION 7: **Replace** recurring mandatory training requirement with competency-based assessment process to determine if an individual requires refresher training.
OPTION 9: **Replace** mandatory training requirements with a menu of training resources for self-directed learners. This allows learners to assess their learning need with a pre-test and choose resources that fit into time, schedule, or learning style constraints. These resources can be video, audio, online, paper-based, or live trainer-based. Having a choice in methodologies greatly increases learner satisfaction.
OPTION 10: **Replace** mandatory training requirements with measurement of appropriate data, and design system or interventions based on data.
OPTION 11: **Enact** system changes (changes in work processes or forcing functions) that address learning needs and simultaneously ensure improved system outcomes; or
OPTION 12: **Utilize** a "Read and Understand" TMS option for compliance based issues that are not training issues.

NLC MT Subcomm
Group Comments/Rec:

Concur Do Not Concur _____ Co-Chair, NLC Workforce Committee	Date	_____ Co-Chair, NLC Workforce Committee	Date

Comments:

Approved Disapproved _____ Under Secretary for Health	Date

ATTACHMENT B

SUGGESTED MAXIMUM VHA MANDATORY, OR REQUIRED, TRAINING HOURS
FOR VARIOUS EMPLOYEE GROUPS

1. Full-time Employees

a. A maximum of 20 hours, as published in each course outline, of VHA mandatory or required training per year for full-time employees; this does not include "orientation" to the Department of Veterans Affairs (VA), work site, or role.

b. Rest of training hours need to be customized to employee's unique role and requirements. This 20-hour requirement needs to include all VHA, VISN, and facility training, including all The Joint Commission (TJC) requirements.

c. All mandatory training topics should include test out options to avoid repetitive training requirements.

2. Part-time Employees

a. Part-time employees need to have a decrease in their mandatory or required training in proportion to their hours worked per week.

b. Part-time employees that work 10 hours or fewer per week need to be considered according to guidance for fee-basis workers.

3. Fee Basis Workers, Without Compensation (WOC) Individuals, Trainees, Contractors, and Volunteers

a. Mandatory and required training should be customized to the unique needs of these transient individuals and specific to their roles and responsibilities.

b. Training needs to be delivered in a single, unified Web-based module, or other unified and customized modality.

c. The total mandatory or required training for these types of individuals needs to be 4 hours or less, as published in each course outline, per year.

d. All mandatory or required training for these categories of individuals needs to be available outside of the Talent Management System, preferably on a self-registering, Internet-based, learning platform.

ATTACHMENT C

**INFORMATION TO BE INCLUDED ON THE VETERANS INTEGRATED SERVICE
NETWORK (VISN) AND FACILITY WEB PAGE**

    The following are to be applied to each VISN and facility-specific mandated training.

1. **Topic.**

2. **Target Audience.**

3. **Frequency Training is Required.**

4. **Source Document(s).**

5. **Training Options, if any.**

6. **Comments.**

7. **Responsible Office(s).**

*NOTE: See the Employee Education Service (EES) Mandatory Training Web site for additional
information at: http://vaww.ees.lrn.va.gov/Training/mandatory/ . This is an internal Web site
and is not available to the public.*