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12th August 2026

[REDACTED]

Dear Sir/Madam

Freedom of Information Act (FOI) 2000 - Request for Information Reference: Freedom of Information request regarding rare conditions and mental health support

I am writing in response to your request for information under the FOI 2000.

I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information you have requested. A response to each part of your request is provided below. Please accept our apologies for the delay.

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FOI Request / Question	Question Response	Is there an exemption?	Exemption	Exemption Details
1. Training programme used – Please confirm whether the Trust uses: a) The Oliver McGowan Mandatory Training on Learning Disability and Autism; or b) An alternative training programme intended to meet the statutory requirements. • If an alternative training programme is used, please provide: • The name and description of the training programme(s); • Any recorded rationale, policy, or assessment used to determine that the alternative programme satisfies the statutory requirement.	Sherwood Forest Hospitals NHS Foundation Trust currently delivers a mandatory Learning Disability Awareness training programme through its internal statutory and mandatory training framework. The Trust recognises the statutory requirement to implement the Oliver McGowan Mandatory Training on Learning Disability and Autism (OMMT) and is actively working with local NHS provider organisations and system partners to determine the most appropriate and sustainable approach to delivering fully OMMT-compliant training across the workforce. Whilst the Trust is not currently fully compliant with the OMMT requirements, it has delivered mandatory learning disability training for more than 12 years. The Trust's programme has been developed in response to patient experience feedback, learning from people with lived experience, national best practice, and local service improvement priorities. The training aims to: • Increase staff awareness and understanding of learning disability. • Improve recognition of the needs of people with a learning			

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Patient Experience Team
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Trust Chair Rukshana Kapasi OBE
Chief Executive Jon Melbourne

	disability. • Support staff to make reasonable adjustments to improve access, experience and outcomes. • Promote person-centred care and reduce health inequalities. • Improve the quality and safety of care provided by Trust services. In 2024, the Trust introduced the OMMT e-learning package into its mandatory training programme, replacing its previous internally developed learning disability training model. The Trust continues to review its training provision to align with national requirements and is working collaboratively with partner organisations to support future implementation of OMMT-compliant training.			
2. Workforce size – Please provide the total number of staff employed by the Trust (headcount), using your standard reporting methodology, for each of the last three completed reporting years; and please state the reporting period used (e.g. calendar year, financial year). This should include temporary/bank/agency/locum staff.	Answer to Question 2 31-Mar-2024 – 8301 31-Mar-2025 – 7628 31-Mar-2026 – 7503			
3. Training eligibility and compliance data – For each of the last three completed	a) 2023-2024 – 3941			

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reporting years (using your standard annual training compliance reporting cycle and stating the reporting period used), please provide: a) The total number of staff identified as requiring learning disability and autism training. b) If training is delivered at different levels/tiers, for each level/tier: • The number of staff identified as requiring that level/tier; • The number of staff recorded as being compliant with that level/tier; c) If training is only delivered at a single tier, please state number of staff recorded as being compliant with the training. d) The equivalent figures specifically for Psychiatrists and trainee Psychiatrists.	2024-2025 – 4148 2025-2026- 5896 b) N/A c) 2023-2024 – 3482 2024-2025 – 3782 2025-2026- 5202 d) N/A we do not employ Psychiatrists within the Trust.			
4. Definitions and methodology – Please provide definitions and methods used to compile the figures above, including: a) Your definition of “compliant” for reporting purposes, including whether this requires completion of all required components of the relevant training.	a) For reporting purposes, a member of staff is considered compliant when they have completed the learning disability training assigned to their role and this completion is recorded on the Trust’s learning management system. This is where the compliance figures above have come from. It should be noted that compliance figures reported by the Trust relate to the Trust’s internally delivered Learning			

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b) Any internal guidance, policy, criteria, or role-mapping used to determine: i. which staff are required to undertake the training; and ii. Which staff are required to complete different levels/tiers (if applicable).	Disability training programme. During the reporting period, compliance with the Trust's internal mandatory training requirements should not be interpreted as compliance with the full national OMMT requirements. b) i. Historically, Sherwood Forest Hospitals NHS Foundation Trust has required all patient facing staff to complete the Trust's mandatory Learning Disability Awareness training as part of its statutory and mandatory training programme. The Trust's training programme has been in place for over 12 years and has been developed through patient and carer feedback, learning from people with lived experience of learning disability and autism, national guidance, and local service improvement initiatives aimed at improving access, experience and outcomes for patients with a learning disability and autistic people. In 2024, the Trust introduced the OMMT e-learning package into its mandatory training programme, replacing its previous internally developed learning disability training model.			
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	The Trust is actively working with local provider organisations and system partners to establish a sustainable delivery model for OMMT and to support full alignment with national requirements. ii. As part of the Trust's ongoing work with local NHS provider organisations and system partners to develop an OMMT-compliant approach, workforce mapping exercises have been undertaken to identify which staff groups are likely to require Tier 1 and Tier 2 training. This work has been informed by both national OMMT guidance and advice available through NHS England, alongside locally agreed approaches developed collaboratively across partner organisations to support consistency of implementation across the health and care system. The outcome of this mapping work is being used to inform future training requirements, delivery arrangements and compliance monitoring processes as the Trust progresses towards implementation of a fully OMMT-compliant training programme.			
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5. Governance, reporting and audit – Please provide copies of any recorded reports, audits, dashboards, committee papers, board reports, or submissions to external regulators from the last three completed reporting years related to monitoring, auditing, or reporting compliance with these training requirements.	Please see: FOI 1472 - Safeguarding & Vulnerabilities Team - Annual Report 2023-2024 FOI 1472 - Safeguarding & Vulnerabilities Team - Annual Report 2024 - 2025 Final FOI 1472 - Safeguarding & Vulnerabilities Team - Annual Report 2025-2026 Final			
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I trust this information answers your request. Should you have any further enquiries or queries about this response please do not hesitate to contact me. However, if you are unhappy with the way in which your request has been handled, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Sally Brook Shanahan, Director of Corporate Affairs, King's Mill Hospital, Mansfield Road, Sutton in Ashfield, Nottinghamshire, NG17 4JL or email sally.brookshanahan@nhs.net.

If you are dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office, who will consider whether we have complied with our obligations under the Act and can require us to remedy any problems. Generally, the Information Commissioner's Office cannot decide unless you have exhausted the internal review procedure. You can find out more about how to do this, and about the Act in general, on the Information Commissioner's Office website at: <https://ico.org.uk/your-data-matters/official-information/>.

Complaints to the Information Commissioner's Office should be sent to FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 1231113, email casework@ico.org.uk.

If you would like this letter or information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call us on 01623 672232 or email sfh-tr.foi.requests@nhs.net.

Yours faithfully

Information Governance Team

All information we have provided is subject to the provisions of the Re-use of Public Sector Information Regulations 2015. Accordingly, if the information has been made available for re-use under the [Open Government Licence](#) (OGL) a request to re-use is not required, but the licence conditions must be met. You must not re-use any previously unreleased information without having the consent from Sherwood Forest Hospitals NHS Foundation Trust. Should you wish to re-use previously unreleased information then you must make your request in writing. All requests for re-use will be responded to within 20 working days of receipt.