



MHFA England Instructor Training

DELEGATE AGREEMENT

All Course delegates are required to read and sign this document.

Name of Delegate.....

Name of Delegate's Line Manager.....

Name & Address of Delegate's organisation.....

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You will be aware that this training Course is provided **free of charge**, and it is therefore anticipated that Course places will be in high demand. Before applying for the Course, delegates are therefore advised to take into account the significant time commitment required, not only to attend Course sessions (7 days, 9am to 5pm plus travel), but also to undertake additional, independent, home study. It is anticipated that this additional work will total approximately 20 hours and will include preparing for classes and follow up study. Each session will require additional reading, with trainers giving a detailed breakdown of readings in advance of each session.

Please be aware that non-attendance of any or all of the Course by a delegate could incur a charge of the market rate for the course, £2790 to the Course delegate or their employer.

It is therefore agreed that:

1. In consideration of Health Education England meeting the costs of the Course, the delegate undertakes to reimburse to Age UK Wiltshire the total Course costs if:
 - (i) he/she voluntarily withdraws from the Course early and/or
 - (ii) he/she is dismissed or otherwise compulsorily discharged from the Course, unless the dismissal or discharge arises out of the discontinuance generally of the Course;

In this event the cost of the Course will be charged at **£2790 to the delegate or his/her employer.**

2. Missed days policy:

- (i) It is a requirement that the delegate completes the whole training Course, i.e. all seven days. If a delegate misses more than half a day, they will need to pause the Course, and continue on another training Course, within a six-month period. There is a one-off charge by MFHA of £250 for reallocating a delegate to a different Course. This will be at the delegate's own cost.

- (ii) If the delegate has missed over half a day of training due to illness or bereavement, the charge of £250 may be waived. Please note that a medical certificate or doctor's letter will be required by Age UK Wiltshire and MFHA England.
- (iii) If the delegate does not complete the training within six months of their last training day, Age UK Wiltshire reserve the right to charge delegates the full rate of **£2790**. If they wish to undertake the Course again, this will be at their own cost.

3. Cancellation Policy:

- (i) If delegates cancel within two months of the first day of the Course, Age UK Wiltshire reserve the right to charge delegates 50% of the Course cost. If cancellation is made within four weeks of the first day of the course, or delegates do not attend, or complete the programme, Age UK Wiltshire reserve the right to charge delegates the full rate of **£2790**.
- (ii) MHFA England requires a minimum of eight delegates to attend each Course. MHFA England reserves the right to cancel Courses, without compensation, where there is insufficient demand.

4. Instructor responsibilities:

As the funding for this training Course is provided by Health Education England, it is the expectation that, once qualified, Instructors will ensure that a proportion of spaces on their courses will be allocated to NHS staff, who will receive the training charged at the cost of materials only.

Please note:

Course delegates are responsible for all travel and personal accommodation costs incurred. Unless stated otherwise, all training Courses include refreshments and lunch. The delegate must inform Age UK Wiltshire of any special dietary requirements at least one week before the Course start date. Special may mean any health or allergy restrictions and any vegetarian/vegan, moral, religious or ethnic requirements.

The Course delegate agrees to comply with the Health and Safety, Fire Regulations and smoking policies in force at the location where the training is to be held.

Acceptance of a delegate on any Course is dependent upon the delegates having completed any prerequisites stated in the Course information.

I understand and agree to the above conditions.

SIGNED:

Delegate.....Date.....

Line Manager of Delegate.....Date.....