

Policy/Procedure/Guideline**Training Policy****Version no:** 1.0**Issue Status:** Approved**Date of Ratification:** April 2016**Ratified by:** Clinical Governance
& Risk Board**Policy Author:** Bradley Woods**Policy Owner:** CG&RB**Review Frequency:** 1 year**Identifiable Document Code:** PTUK021**Last Review:** April 2020**Next Review:** April 2021

POLICY AWARENESS	
People who need to know this policy in detail	All staff
People who need to have a broad understanding of this policy	All staff
People who need to know this policy exists	All staff

CHANGE CONTROL DETAILS			
Date DD/MM/YY	Version	Description	Reason for changes
11/04/2016	1.0	New Policy	New Policy

Policy location:Main Policy Folder in Control Room and Crew Room
On PTUK Server

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1.0 Introduction

Training is to equip people with the necessary skills, knowledge and attitudes to meet the organisation's needs in relation to its objectives. By investing in people through their training we ensure we harness their full potential and focus their energies on the needs of the organisation while fulfilling their need for personal development and job satisfaction.

PTUK recognise that such development is a continuing process for every employee at every level of the organisation. Training is seen as a necessary investment in order to provide the excellent services required by demands.

Training is not a privilege to be granted or withheld from employees, but should be undertaken after a critical appraisal of PTUK's needs in relation to its objectives, while taking account of the realistic aspirations of those employees.

2.0 Scope

This procedure details the controls exercised to ensure that company employees receive adequate training. This applies to all PTUK and bank/agency staff.

3.0 Communication with stakeholders

PTUK will inform all new employees, through induction, the existence of this policy and their responsibilities.

PTUK will advise all staff of their need to ensure they maintain their relevant certification.

A copy of this policy will be made available to all staff. This will be located in every staff/crew room at each location within the business

4.0 Training needs

Employees training needs must be reviewed as follows:

- On recruitment of a new employee
- Expiry of current certification
- Following change of responsibility
- New legislation
- Following a reported incident (Major or Minor)
- Following a disciplinary meeting

5.0 Training Resources

The training process will ensure that the resources required to meet training needs are fully identified, that training is properly focused and that the benefits of the training can be demonstrated.

PTUK has made a commitment to investing in its people and will ensure wherever possible sufficient funding is made according to the needs identified. Training needs may also be identified by any of the following:

- Requests from staff
- Deficiencies raised during internal audits
- Service deficiencies
- During Management Review meetings

6.0 Responsibility for Training

6.1 Management Team

The Management Team has a key role to play in training by:-

- Demonstrating a commitment to train and develop employees in relation to the organisation's objectives.
- Ensuring that training and development plans are focused on organisation's needs at corporate and service levels and provide adequate resources.
- Ensuring training and development actions are evaluated in relation to service and organisational objectives and the benefits clearly identified.

6.2 Managers' Role

Managers' and Supervisors' main areas of responsibility are to:-

- Induct new employees.
- Identify training needs jointly with employees in relation to individual objectives.
- Formulate training plans in liaison with the Training Officer.
- Carry out on-the-job instruction and coaching.
- Make all employees aware of training and development opportunities open to them, select employees for training and brief them.
- Ensure that those who are trained share their learning with others wherever possible and appropriate.
- Evaluate the effectiveness of training events in relation to service and individual objectives with those involved.

6.3 Training Officer's Role

The Training Officer's role is to: -

- Provide guidance on training policy processes and procedures.
- Assist Managers to identify and quantify training needs.
- Develop a corporate training plan annually and assist with the formulation of departmental training plans.
- Design and organise specific training activities.
- Publicise training activities.
- Advise and train managers to carry out their training responsibilities.
- Facilitate the effective evaluation of training activity in liaison with appropriate managers at individual, service and organisational levels.

6.4 Individual Employee's Role

The individual employee's role is to: -

- Identify personal training needs in relation to their personal objectives and unit service plans.
- Be aware of training and development opportunities open to them and request training where appropriate to their training needs.
- Evaluate the effectiveness of training with their line manager.
- Share learning with colleagues wherever possible and appropriate.
- Ensure that they are familiar with the latest/current practices within the field and maintain, where appropriate their CPD.

7.0 Competency Levels

In order to determine the company has an adequate level of competency within the company, **The Staff Training Record** shall be maintained. The skills applicable to each job-holder shall be identified.

The Staff Training Record shall be used to monitor the overall success rate as a percentage against the company targets. The Staff Training Record shall be used as a measure of how effective planned training has been and to identify 'gaps' in competency levels within the company.

Departmental Managers, in conjunction with the Training Manager, shall review and update the staff training record on a monthly basis.

In addition, competency levels and company training requirements must be reviewed during the Clinical, Governance & Risk Board (CG&RB) meetings.

8.0 Training Certificates

A copy of all training certificates shall be retained, where issued, in respect of any internal or external training course. Staff have an obligation to provide PTUK with a copy of any training certificate that is applicable to their role or position within PTUK.

9.0 Auditing

The training records will be reviewed during internal and external audits to confirm compliance. The PTUK Governance Officer will conduct the internal audits according to the PTUK Internal Audit Schedule.

10.0 Appendices

Appendix 1

Appendix 2

Appendix 1 - Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
	• Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2	Is there any evidence that some groups are affected differently?	No	
3	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4	Is the impact of the policy/guidance likely to be negative?	No	
5	If so can the impact be avoided?	N/A	
6	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7	Can we reduce the impact by taking different action?	N/A	

If you have identified a potential discriminatory impact of this procedural document, please refer it to Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

Appendix 2 - Checklist for the Review and Approval of Procedural Document

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

	Title of document being reviewed:	Yes/No/Unsure	Comments
1.	Title		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2.	Rationale		
	Are reasons for development of the document stated?	Yes	
3.	Development Process		
	Is the method described in brief?	Yes	
	Are people involved in the development identified?	Yes	
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	Yes	
	Is there evidence of consultation with stakeholders and users?	No	
4.	Content		
	Is the objective of the document clear?	Yes	
	Is the target population clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
	Are the statements clear and unambiguous?	Yes	
5.	Evidence Base		
	Is the type of evidence to support the document identified explicitly?	No	
	Are key references cited?	No	
	Are the references cited in full?	No	
	Are supporting documents referenced?	No	
6.	Approval		

	Title of document being reviewed:	Yes/No/ Unsure	Comments
	Does the document identify which committee/group will approve it?	Yes	
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	Yes	
7.	Dissemination and Implementation		
	Is there an outline/plan to identify how this will be done?	Yes	
	Does the plan include the necessary training/support to ensure compliance?	Yes	
8.	Document Control		
	Does the document identify where it will be held?	Yes	
	Have archiving arrangements for superseded documents been addressed?	Yes	
9.	Process to Monitor Compliance and Effectiveness		
	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	Yes	
	Is there a plan to review or audit compliance with the document?	Yes	
10.	Review Date		
	Is the review date identified?	Yes	
	Is the frequency of review identified? If so is it acceptable?	Yes	
11.	Overall Responsibility for the Document		
	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	Yes	

Individual Approval			
If you are happy to approve this document, please sign and date it and forward to the chair of the committee/group where it will receive final approval.			
Name		Date	11/04/2020
Signature			
Committee Approval			
If the committee is happy to approve this document, please sign and date it and forward copies to the person with responsibility for disseminating and implementing the document and the person who is responsible for maintaining the organisation's database of approved documents.			
Name		Date	11/04/2020
Signature			