

Learning and development policy

Board library reference	Document author	Assured by	Review cycle
P090	Head of Learning and Development	Quality and Standards Committee	3 years

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1. Introduction

This policy describes the objectives that underpin learning and development within the Trust, the process through which the annual learning and development plan for the Trust is developed and the mechanisms through which staff can access learning and development. It also identifies the methods for monitoring learning and development and the reporting and assurance routes.

This policy should be read in conjunction with the [Appraisal Policy](#), the [Health and Safety Policy](#), the [Bullying, Harassment and Dignity at Work Policy](#), the Individual Performance Improvement and Capability Policy, the Clinical Supervision Policy, and the [Induction Policy](#).

2. Policy statement

The Trust recognises the important contribution which learning and personal development makes to the Trust's continuing effectiveness as a leading provider of specialist mental health services and accepts its responsibilities in creating an environment where development and learning take place.

Staff will be briefed on the Trust's approach to learning and development as part of the induction process, and enabled to identify learning and development needs and the means of addressing these through the annual appraisal process and ongoing management supervision.

3. Purpose or aim

Learning and development activity within the Trust is guided by the following objectives:

- To improve the quality of the service as experienced by users and carers
- To ensure that personal and service learning needs are identified in a fair, proportionate systematic way which links to service development and organisational priorities.
- To promote a learning and development culture in which people are treated with dignity and where any protected characteristics are respected and valued.
- To promote a philosophy of continuous personal development, which incorporates both informal and formal learning opportunities for all staff.
- To enable the Trust to discharge its statutory and mandatory responsibilities for training staff, and ensure compliance with external standards and frameworks examples include, Care Quality Commission and the requirements of the Clinical Negligence Scheme for Trusts (CNST)
- To ensure that the Trust delivers modern and effective services, through enabling staff to develop their skills in line with changing national priorities, policy guidance, clinical guidelines and service development

These principles are the foundation of the overarching learning and development strategy within the Trust.

4. Scope

This policy covers all post induction learning and development activity across the organisation. The processes in relation to non-medical staff are contained within the body of the policy while the procedure for the continuing professional development of career grade and consultant medical staff can be found on the Medical Education pages on Ourspace.

The statutory and mandatory training standards of the organisation are laid out in the [Training Matrix](#).

The Essential Skill list is held on The Hive and shared with localities to provide an opportunity for individuals, teams and services to identify the core skills required across a team to ensure high quality service provision. These should be identified via supervision and/or appraisal and

supported by the Locality Management team. Learning and Development will source agreed training priorities within the resources of the service.

5. The process for identifying the training needs of all staff

Learning and development needs will be identified in a range of ways, including:-

- Organisational priorities and the service development agenda
- Statutory requirements, as defined by the law
- Mandatory requirements determined by the Trust
- Supervision and appraisal, which should consider core essential skills relevant to the expectations of the role.
- Through national priorities, health and social care policy, good practice guidance, and clinical guidelines.

The Learning and Development team will lead on developing a draft annual learning and development plan on the basis of the drivers identified above. This will be ratified by the Strategic Workforce Group, the membership of which includes representation from across corporate services, staff side, and Localities.

The statutory and mandatory training needs of each staff category will be identified on the basis of legal requirements, the external and internal policy framework, and good practice guidance. The training standards will be developed and agreed in collaboration between in house specialist advisors, the learning and development team. These standards and expectations are agreed at an executive level and presented on the Trust's Matrix, the definitive document that governs training standards for each staff group. On the basis of the TNA, a forecast of training places for the year is made and a plan to fulfil this requirement established, and included within the annual Learning & Development Plan, publicised via a variety of mediums including the Managed Learning Environment (MLE) and The Hive (Ourspace).

6. Developing a training prospectus

On the basis of the annual training plan the Learning & development department will develop a prospectus of courses for staff and managers to access. This will include details of the courses available, target audience and frequency of attendance required. The prospectus (Learning & Development Calendar) will be accessible to all via The Hive on Ourspace.

7. The process for checking that all permanent staff complete relevant training programmes

The Learning and Development team and the office of the Director of Medical Education are jointly responsible for co-ordinating training records within the Trust.

Learning and development activity within the Trust is recorded on the Managed Learning Environment (MLE). The statutory and mandatory training requirements of all individual staff are held within the MLE, and the compliance of each individual, team or service with these training requirements can be reported upon. Trust wide reports on statutory and mandatory training compliance are delivered via Ourspace on a monthly basis, and are reviewed by the Strategic Workforce Group and quarterly meetings with localities within a Workforce Dashboard.. More detailed service and team based reports identifying individual staff are available to individuals and team managers via Ourspace and within the MLE system. This reporting process enables the organisation to monitor compliance with training standards and take action to address issues as they arise.

On an individual basis, managers direct staff to the training matrix during their induction programmes and attend to these during annual appraisals. Managers countersign applications by staff for training places. The learning and development team advise the manager and employee in writing if the employee does not attend for a booked training event.

Detailed reports on team training activity, showing who has and has not attended key training events, are circulated to localities, reminding them to ensure that staff with outstanding training need to attend required events. Information about persistent non attendees is highlighted to managers, and if still not resolved, is escalated to Locality Triumvirates to take appropriate action using the trusts performance management/ disciplinary procedures where necessary.

8. Roles and responsibilities

8.1 The Director for Organisational Development is accountable for:

- the activity of the learning and development function, in the context of the overall workforce portfolio;
- ensuring that learning and development activity enables the organisation to achieve compliance with a range of learning and development focussed external standards;
- co-chairing the Strategic Workforce Group
- reporting to the Board on learning and development activity via the quarterly Workforce Report.

8.2 The Head of Learning and Development is responsible for:

- managing the Learning and Development Team, and learning and development funding streams;
- overseeing the development and delivery of the annual Learning and Development Plan, ensuring that this is aligned with service priorities, and that it enables the organisation to meet the requirements of relevant legislation and external standards,
- developing and making available an annual training prospectus detailing all learning and development opportunities provided. This prospectus also describes the process for applying for funds for other training opportunities through AWP's Bursary Panel.
- ensuring that comprehensive reports on learning and development activity are delivered to the Board integrated governance routes, and that the performance team are given the necessary information to inform their reporting on learning and development targets.

8.3 The Locality Triumvirates and Corporate Directorates are responsible for:

- having an overview of the learning and development requirements and priorities of the workforce within their locality and directorate, and
- ensuring the right conditions are in place for these to be met, through the workforce, activity, and financial components of the integrated business planning process.

8.4 In-house specialist advisors are responsible for:

- making an assessment of the training activity required to enable the organisation to meet the requirements of relevant legislation and external standards, and
- developing deliverable training standards, which will then be delivered through the annual Learning and Development Plan in discussion with The Triumvirates of Localities and Corporate Directorates, and the Director Organisational Development.
- providing sufficient training capacity to meet the training needs analysis.

- assisting the L&D team to evaluate outcomes and constantly improve the learning experience.

8.5 The Learning and Development Team is responsible for:

- developing the annual Learning and Development Plan, in collaboration with operational managers, heads of profession, service users and carers, which is accessible and with sufficient capacity; delivered as local to need as possible
- coordinating the delivery of the Learning and Development Plan, within budget, through a combination of internal and external provision;
- managing CPD provision, both through Health Education England contracts and through the internal Bursary Panel mechanism.
- managing the apprenticeship engagement process aligned to workforce planning and the career framework, ensuring appropriate returns are provided on a quarterly basis to Health Education England and other associated approved bodies.
- ensuring that information on learning and development opportunities is available to all staff
- managing the application processes for all learning and development activity. Guidance regarding application process and the relevant forms are available on The Hive on Ourspace.
- monitoring learning and development activity through maintaining the Managed Learning Environment (MLE), and report on this via the Learning and Development Group, to the Strategic Workforce Group.
- advising on the most effective and efficient means of identifying and meeting learning and development needs.
- ensuring that all staff are enabled to apply for, access and participate in training events making reasonable adjustments, where appropriate.
- supporting and meeting any additional learning needs of staff through appropriate adjustments to materials, style of presentation and technical assistance at facilities.

8.6 The line manager is responsible for:

- briefing staff on the Trust's approach to learning and development as part of the induction process.
- understanding the statutory and mandatory training requirements of their team, as outlined in the training matrix.
- carrying out appraisal and supervision, bearing in mind the service and team objectives, and the competence requirements for the employee's role.
- identifying learning and development needs with the individual employee and together determining the priority and how each need will be met, supported by the Learning and Development team and professional advisor(s) where appropriate.
- enabling employees to access agreed learning and development activity by supporting them in carrying out the application process, and ensuring that they can be released from the workplace to attend learning opportunities when necessary.
- ensuring that cover is available where appropriate.
- designating an area within the unit where a member of staff can take time to study for a short period or provide release to a suitable place (e.g. IT training suite or library);
- identifying the learning objectives with the member of staff prior to an employee commencing learning or development,

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- checking that the learning was appropriate following a training event and drawing up an action plan to ensure that the learning is put into practice. After a period of time, to evaluate the learning and how it has assisted in carrying out the duties of the post and/or developing the service.
- ensuring that individual training, whenever possible, is cascaded to other members of staff within the unit so that all can share the learning outcomes.
- ensuring that the employee has the opportunity to access appropriate learning opportunities, making reasonable adjustments, where appropriate, to enable access to training.

8.7 The individual employee is responsible for:

- actively participating in appraisal and personal development processes.
- being aware of the statutory and mandatory training requirements for their role, as described in the training matrix and booking training to maintain compliance prior to expiry date
- assessing their own knowledge and skills in the context of the competence requirements for their role, and engage in a discussion with their manager regarding this during the appraisal meeting and within management supervision.
- their own development, including, where appropriate, CPD for ongoing professional registration
- engaging with their line manager in ensuring access to appropriate learning opportunities.

8.8 Professional advisors

- should assist in identifying individual learning and development needs through the clinical supervision and appraisal process; and recommend appropriate learning and development opportunities.

8.9 Union learning reps and lifelong learning advisors

- are staff side representatives which have a role in assisting individual learners in identifying learning needs, gaining line management support in addressing these, working in collaboration with Learning and Development to identify wider learning support and supporting learners on an ongoing basis.

8.10 The Strategic Workforce Group

This group draws its membership from operational management, staff side and corporate services. It is chaired by an Executive Director. The role of the group is to:-

- ratify the annual learning and development plan.
- oversee the development and delivery of the annual learning and development plan, monitoring the delivery of learning and development against the plan, identifying issues, and collectively identifying solutions.
- receive reports on learning and development activity on a quarterly basis, reviewing these in the context of the annual learning and development plan, Care Quality Commission, and CNST requirements.

8.11 The Bursary Panel

This panel is co-ordinated by Learning and Development and the Panel is comprised of Locality Triumvirate representation and is held twice a year, and is chaired and coordinated through the Learning and Development team. The role of the panel is to:-

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- screen applications from individual staff for bursaries to support development activity, or access to post graduate development.
- to progress applications; all applicants must have an up to date appraisal and all statutory/mandatory training is required to be in date.
- all successful applications can demonstrate that the training will support delivery of the organisational objectives.
- make decisions regarding which applications to support on the basis of the Bursary Panel Criteria which includes consideration of protected characteristics of applicants as appropriate

Guidance regarding the Bursary Panel Criteria, the application process and appropriate forms are available on Ourspace.

9. Standards

Learning and development processes, structures and activity will be assessed against relevant Care Quality Commission standards

Further assessment will be made on the basis of the requirements of the Clinical Negligence Scheme for Trusts, and the learning and development agreement with the Strategic Health Authority.

The following factors will be considered when making assessments of compliance:

- quality of training based on external standards and the outcome of internal evaluation
- amount of training available, and the take up and attendance at this training, in the context of internal training standards.

10. Monitoring, audit and penalty charges

The Head of Learning & Development is responsible for monitoring that the requirements of this policy have been met

Compliance with this policy will be monitored through a variety of different mechanisms described below.

Monthly reports will be publicised via Ourspace to all services within AWP. These reports will include data on attendance at those training events highlighted within the CNST minimum data set, those required by the Care Quality Commission, and other key compliance frameworks.

It is the responsibility of the assuring group of the Board to monitor the provision of learning and development agreed within the annual learning and development plan, and in the context of the requirements of the standards described above.

Statistical information will be considered and action taken to minimise non-attendance as appropriate. This will include targeted reminders to individuals and managers. Participants in training activity will be asked to complete evaluations of activity and this will be collated, reported & course content modified as appropriate.

Charging localities for non-attendance on booked internal statutory/mandatory/essential skills programmes will be introduced in accordance with Trust agreement and will reflect the programme length/cost. Charges will be raised on a monthly basis and informed by the non-attendance reports.

Charging services/individuals for non-attendance on external programmes which include national, regional and local programmes such as leadership development programmes may be incurred in accordance with agreed programme registration agreements.

Successful bursary applicants will be expected to agree conditions of support which will be provided by letter to the individual in relation to programme support. Examples would include

time limitations for study; shared contribution if a programme is determined to have a higher proportion of personal benefit versus organisational benefit. The bursary offer letter will also provide clear expectations that any organisational expense incurred would be proportionally claimed back if the applicant leaves the organisation within two years of the programme start date.

11. Definitions

- **continuing professional development (CPD):** Development activity undertaken post qualification. This is often compulsory for members of professions, in order to maintain registration.
- **the managed learning environment (MLE):** An IT platform that is a learning and development database, from which monitoring reports are generated, but which also functions as an e learning platform
- **training matrix:** The training matrix is a chart which illustrates the statutory mandatory and essential training needs of all of the occupational groups within the Trust. All staff joining the organisation receives a copy of the training matrix as part of their induction pack.
- **statutory training:** Training for which there is a legal requirement for the organisation to provide and for staff to attend.
- **mandatory training:** Training which there is an organisational requirement for staff to attend.
- **protected characteristics:** The 2010 Equality Act covers 9 “Protected Characteristics:” They are Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion or Belief, Sex and Sexual Orientation.

12. Associated and related procedural documents

- Appraisal Policy
- Workforce Diversity and Equal Opportunities Policy
- Health and Safety Policy
- Dignity at Work Policy
- Policy for Managing Poor Staff Performance
- Staff Supervision Policy
- Induction Policy

13. References

This policy has been drawn up with reference to current UK and European employment legislation and relevant national terms and conditions.

14. Document life cycle control

Representatives from trades unions formally recognised by the Trust and management representatives have drawn up this policy. Management as part of the review will provide meaningful statistics.

This policy will be reviewed after 3 years or earlier at the request of either party.

Version History				
Version	Date	Revision description	Editor	Status
1.0	01 Sept 2005	Version approved by the Board on 2005-09-01	LN	Approved
1.1	04 Sept 2007	Permission given at Integrated Governance Committee to roll forward the review date to September 2008	AM	Approved
2.0	25 Feb 2009	Approved by Trust Board	AM	Approved
2.1	01 Sept 2009	Change supported by Q&HGC. No change in revision date	AM	Approved
2.2	02 Nov 2010	Policy has been amended to address the new CNST monitoring requirements with the support of Linda Hutchings. Approved by Q&HCG with no change in review date	TW	Approved
3.0	01 Nov 2011	Amendments approved by QHCG on 01 November 2011 with a 3 year review	TW	Approved
3.1	30 Nov 2012	Administrative amendments agreed (no change in review date) by LNG, GNG and MWMG. Noted by ESEC on 30 November 2012	TW	Approved
3.2	16 Mar 2016	Amendment to terminology and clarify requirements to access learning opportunities	WK	Draft
4.0	19/04/2016	Approved by Quality and standards committee	WK	Approved
4.1	30 /07/2019	Extended until 31 March 2020	Head of learning & Development	Approved