STANDARD OPERATING PROCEDURE
FORENSIC SERVICES DIVISION TRAINING

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Author/Lead **Job Title**	Paula Phillips General Manager Secure Services
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Ratified and Quality Checked by: **Date Ratified:**	Divisional ODG 22 May 2023
Name of Trust Strategy / Policy / Guidelines this SOP refers to:	• Appraisal Policy (HR-010) • Learning and Development Policy (HR-019) • Statutory and Mandatory Training Policy (HR-007)

VALIDITY – All local SOPS should be accessed via the Trust intranet

CHANGE RECORD

Version	Date	Change details
V1.0	*May-23*	*New SOP written to support applications and access to staff training and development. Approved at Divisional ODG (22 May 2023).*

Contents

1. INTRODUCTION

Since 1st April 2020 departments became able to manage their own external learning and development opportunities.
Service managers have since been able to decide on any requests for training, and fund through their own budgets.
Each division received an extra sum of funding to help support requests which did not routinely sit within the internal training provision (available on ESR).

2. SCOPE

This Standard Operating Procedure is aimed at all substantive, permanent and forensic bank/peripatetic staff from all registered and non-registered staff groups within the division. Training requests for Dr's do not come under the scope of this procedure as the medical training budget is centralised under the Medical Directorate.

This Standard Operating Procedure should be applied when a member of staff requests training additional to that required mandatory for their role.

3. DUTIES AND RESPONSIBILITIES

Chief Executive
The Chief Executive will assume overall responsibility for ensuring the Trust has appropriate arrangements in place for the equitable division of the allocated training budget.

Director of Nursing
The Director of Nursing has delegated responsibility for ensuring the Division has in place appropriate procedures for responding to training requests and the equitable allocation of the training budget.

Finance Department
The Finance department will divide the training budget received into the Division equitably across the service areas based on number of substantive, permanent staff within each service area.

The allocations will be placed into the separate identified budgets. Flexibility may be applied by General Manager and Clinical Lead where specific development of a service is required.

Managers and Clinical/Professional Leads
Managers are responsible for the implementation of this procedure and for ensuring that systems are in place to achieve the standards within this procedure.

Team Leaders and Charge Nurses
Team Leaders and Charge Nurses are responsible for undertaking annual appraisals with staff and recording individual training needs within it.
At the end of the appraisal period a team/ service training needs analysis (TNA) should be completed and forwarded to the clinical network.
Team leads should ensure that all individual requests are submitted to the workforce meeting and that these are in line with appraisal outcomes and training needs analysis.

Clinical Network

The clinical network considers the overall divisional clinical development through evaluation of clinical need/ patient presentation and with consideration for bed, clinical models and the team TNA's. This network forwards its considerations as report and TNA to the Workforce meeting on an annual basis (after receipt of the team TNA) to advise regarding associated and potential development of the workforce.

All Staff

All staff should ensure that they partake fully in the appraisal process which includes;

- Ensuring that they have a personal development plan which is agreed with their line manager and supports the service vision and goals
- Taking responsibility for a commitment to self-development in the spirit of Caring, Learning and Growing
- Identifying (in conjunction with their line manager) any training needs relevant to their role, development, and service requirements. (Including initial completion of the training and development application form).

Workforce Meeting

This meeting will have annual clinical advice regarding the development needs of the service. Requests for training must meet the needs of the service. Requests relating to individual development must also be in line with service need Individual requests must be supported by line managers hold the authority for sign off of all and any training requests. This will be inclusive of HR and finance considerations. The meeting will consider if requests fall within the scope of the team/service/area of work, agree or reject the request (giving rationale for rejection), determine most appropriate budget (e.g. Divisional training budget or CPD monies via the Professional Educational lead) record decision in the minutes.

Training Department

Respond to the learning requests that fall within their scope of responsibility (see App 1)

4. PROCEDURES

- The clinical network will provide advice on clinical service development needs via an annual report/ TNA to the workforce meeting
- Appraisals for all staff should take place within the Trust stated review period.
- Learning and development needs should be formally identified and recorded at this and/or the mid-point review stage and should link to Trust values and Service/Team/Role requirements.
- For individuals the training and development form will be completed either by the individual and their line manager at the point of identifying the training need. This will go to the workforce meeting via the service manager.
- For individuals mandatory training must be up to date prior to further applications.
- Specific training requests that are not mandatory to the role or fall outside of appraisal should be presented to the workforce meeting by service managers for consideration. The training and development application form should be used for this.
- The workforce meeting will hold the authority for sign off of all and any training. It will determine whether funding for the course/training will come from the HEE CPD or Divisional budget.

- The application and authorisation request must be followed to ensure requests and responses are equitably considered. (See Appendix 2)

5.   MONITORING COMPLIANCE

The workforce meeting will maintain continuous review of the budget and allocations to ensure equity across all service areas and that allocation of funding remains within the budget.

6.   REFERENCES

Health Education England Continuing Professional Development (CPD) Funding Allocation for Nursing Associates, Nurses, Midwives and AHPs in NHS Organisations

Appendix 1 – Learning and Development within Humber Teaching NHS Foundation Trust

Learning & Development Team (L&D)

Statutory/mandatory - delivered through L&D via F2F or online supported with contributions by Trust wide staff

Essential training - BP, falls training, DMI etc. delivered through L&D via F2F or online supported by Trust wide staff

SSLDF support staff learning and development fund – this is HEE funding for support staff to develop and enhance skills and career progression. This is managed & allocated by L&D

Trust wide Apprenticeships – coordinated & managed by L&D

Professional Education Lead Nursing & AHP Directorate

CPD funding central funding from Government via Health Education England (HEE) to support the NHS long term plan and develop new clinical skills – the allocation of this will be done via Professional Education Lead
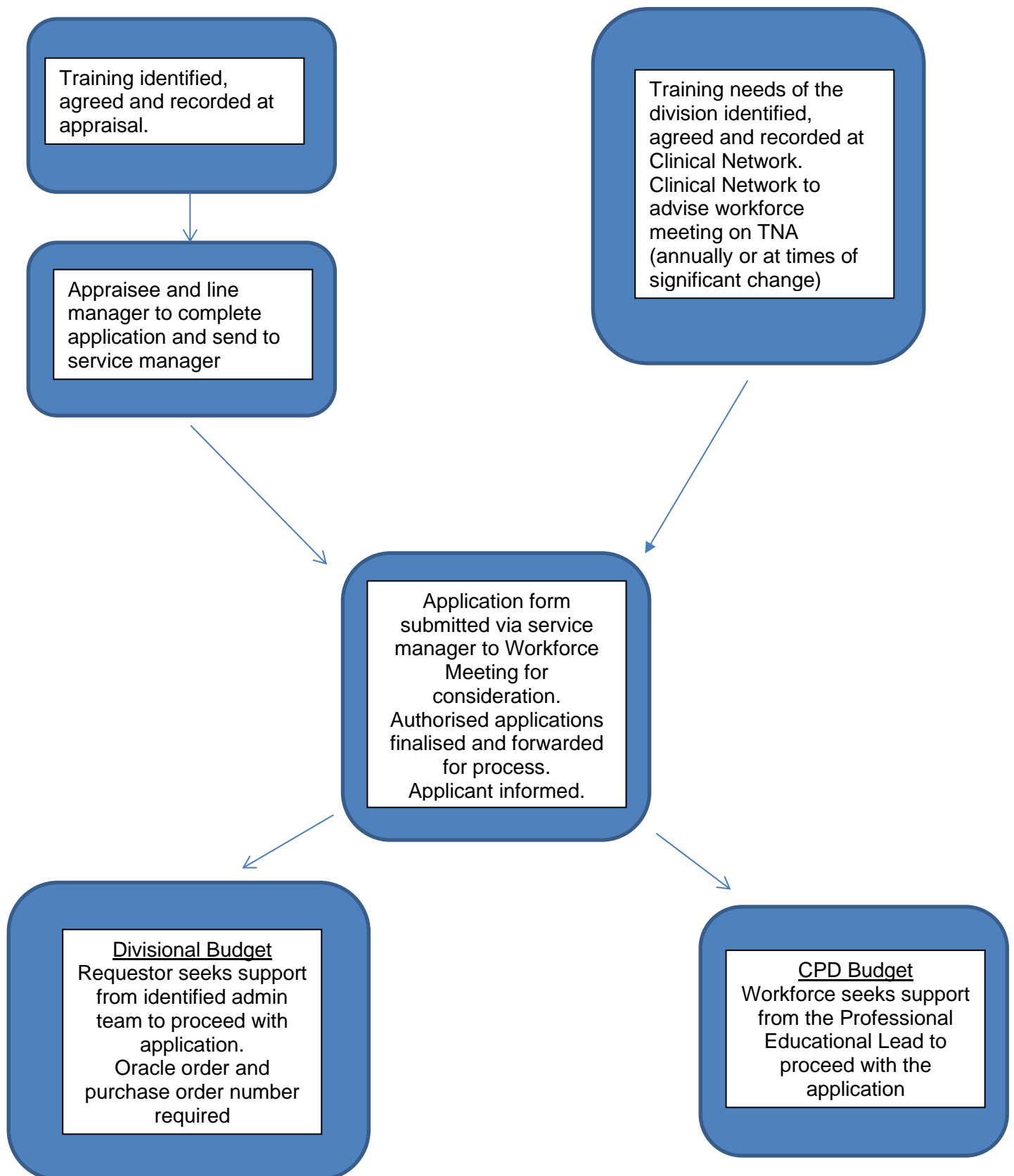
Specialist Skills Post Registration Development (SSPRD) supported by funding from HEE this covers some university courses & Post registration professional courses i.e. District nursing, NMP etc. via Professional Education Lead.

Post Registration Programmes – DN, ACP, SCPHN, via Professional Education Lead

Non-Medical Prescribing course Request via the Non-Medical Prescribing Lead/Medicine Optimisation Lead Nurse

Apprenticeships – Professional pathways leading to recordable professional qualification i.e. Nursing OT, Social work, Nursing Associate via Professional Education Lead and Professional leads for each discipline and funding via Apprenticeship levy (this will be supported by the Trust apprenticeship manager)

Appendix 2 – Flowchart

Training identified, agreed and recorded at appraisal.

Training needs of the division identified, agreed and recorded at Clinical Network. Clinical Network to advise workforce meeting on TNA (annually or at times of significant change)

Appraisee and line manager to complete application and send to service manager

Application form submitted via service manager to Workforce Meeting for consideration. Authorised applications finalised and forwarded for process. Applicant informed.

Divisional Budget
Requestor seeks support from identified admin team to proceed with application.
Oracle order and purchase order number required

CPD Budget
Workforce seeks support from the Professional Educational Lead to proceed with the application

Appendix 3 – Forensic Services Division – Training and Development Application Form

| PERSONAL DETAILS | (please PRINT your name, job title and work address) |

Surname: [_____] **Forename:** [_____]

Job title: [_____] **Assignment N°** *(from your payslip):* [_____]

Work base address (including postcode): [_____]

Tel No: [_____] **Mobile No:** [_____]

Course Title & Provider	Level/Area *(if applicable)*	Date	Time
			.

Duration of course/ Time Commitment:
Cost of Training:
Please tell us why you are making an application for training below:
Date discussed at appraisal/mid-point review and managers comments:

AUTHORISATION

Applicant's signature:		**Date:**	
Manager's signature:		**Managers name:**	
Manager's email:		**Date:**	

Date Discussed at Clinical Network/ Clinical Focus:

The above application is in line with the service needs as identified by the forensic clinical network: Yes/No
;

The application is in line with the needs of the individual as identified in their appraisal: Yes/No

The application has been **Approved/ Declined***

Reason for decision below:

Source of Funding: (e.g. CPD/ Divisional budget/ Training Department – HEE funded opportunities etc.);

Next steps: (e.g. requester to submit details to identified admin team to support application process and request oracle order and purchase order number/ requester to approach to: