



**West Hampshire**  
Clinical Commissioning Group

# **LEARNING AND DEVELOPMENT POLICY**

**Version 3**

<b>Subject and version number of document:</b>	Learning and Development Policy Version 3
<b>Serial number:</b>	HR/020/V3.00
<b>Operative date:</b>	1 December 2019
<b>Author:</b>	Head of Organisational Development
<b>CCG owner:</b>	Chief Officer
<b>Links to other policies:</b>	This policy should be read in conjunction with: <ul style="list-style-type: none"> <li>• CCG Operational Plan</li> <li>• Human Resources, Inclusion and Organisational Development Strategy</li> <li>• Policy for Performance and Development Reviews, and Pay Progression</li> <li>• Clinical Supervision for Nurse and AHP Registrants: Arrangements within West Hampshire CCG</li> <li>• Nursing &amp; Midwifery Council (NMC) Revalidation: A Policy to Support Registrants and their Line Managers</li> <li>• Travel Expenses Policy</li> <li>• Leave and Flexible Working Policy</li> </ul>
<b>Review date:</b>	October 2022
<b>For action by:</b>	All staff
<b>Policy statement:</b>	In line with the NHS Long Term Plan the CCG is committed to offering career progression that “motivates staff to stay within the NHS and, just as importantly, equips them with the skills to operate at advanced levels of professional practice and to meet patients’ needs of the future.” (NHS Long Term Plan, 2019)  The purpose of this policy is therefore to set out the different ways in which West Hampshire CCG staff are supported to access ongoing learning and development opportunities,
<b>Responsibility for dissemination to new staff:</b>	Line managers
<b>Mechanisms for dissemination:</b>	All new and revised policies are published on the CCGs website and are promoted to staff through the CCG staff newsletter and the policy page on the intranet.

<b>Training implications:</b>	All new staff need to be made aware of the policy at induction with line manager.
<b>Resource implications</b>	<p>A limited budget is allocated each year for staff learning and development. In order to plan and allocate the budget fairly and enable it to be used most efficiently, it is vital that individual and team learning needs are identified by the end of July each year.</p> <p>It is understood that some learning needs cannot be planned for in advance, so a small proportion of the training budget will be held unallocated to account for these ad hoc learning needs identified during the year.</p>
<b>Further details and additional copies available from:</b>	<p>Website:  <a href="https://westhampshireccg.nhs.uk/document-tag/hr-policies/">https://westhampshireccg.nhs.uk/document-tag/hr-policies/</a></p>
<b>Equality analysis completed?</b>	In line with the CCG's commitment to equality and diversity, this policy has been assessed for its impact on employees with characteristics protected by the Equality Act 2010.
<b>Consultation process</b>	<p>Staff Forum  Learning &amp; Growth  Executive Team  Policy Sub Group</p>
<b>Approved by:</b>	Policy Sub Group, ratified by Board
<b>Date approved:</b>	26 November 2019

**Website upload:**

Website	Location in FOI Publication Scheme	<a href="https://westhampshireccg.nhs.uk/document-tag/hr-policies/">https://westhampshireccg.nhs.uk/document-tag/hr-policies/</a>
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**Amendments summary:**

Amend No	Issued	Page(s)	Subject	Action Date
1			Change references from Training & Development to Learning & Development Appendix A amended to Statutory & Mandatory Training Matrix	Mar 14
2	Oct 15	Throughout	Complete review and amalgamation with Mentoring & Coaching policy. Including update of statutory and mandatory training matrix	Oct 15
3	Oct 16	Page 5 Page 20	Inclusion of summary page Update to mandatory training in line with latest requirements.	Oct 16
4	Jun 18	Pages 9, 12 & 13, 18 and 20	Amendments to list of mandatory training, job titles, inclusion of references section, update training matrix	Jun 18
5	2019	Throughout	Complete re-write	2019

**Review log:**

Include details of when the document was last reviewed:

Version Number	Review Date	Reviewer	Ratification Process	Notes
2	Oct 2015	Associate Director Comms	Policy Sub Group / Board	
2.03	Jun 2018	Business Planning Manager	Not required as only minor changes.	
3	2019	Head of OD	Exec Team, Policy Sub Group, Board – November 2019	

# LEARNING AND DEVELOPMENT POLICY

## SUMMARY OF KEY POINTS TO NOTE

The purpose of this policy is to set out the different ways in which West Hampshire CCG staff are supported to access ongoing learning and development opportunities, including:

- Statutory and mandatory training
- Induction
- Core knowledge and skills
- Line managers training
- Role specific learning
- Coaching and mentoring
- Leadership development
- Apprenticeships
- Non role specific learning
- Clinical supervision
- Team development
- Other

Templates of the forms detailed within the policy can be found on the HR Portal.



# LEARNING AND DEVELOPMENT POLICY

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# LEARNING AND DEVELOPMENT POLICY

## 1. INTRODUCTION AND PURPOSE

- 1.1. In line with the NHS Long Term Plan we are committed to offering career progression that “motivates staff to stay within the NHS and, just as importantly, equips them with the skills to operate at advanced levels of professional practice and to meet patients’ needs of the future.” (NHS Long Term Plan, 2019)
- 1.2. The purpose of this policy is therefore to set out the different ways in which West Hampshire CCG staff are supported to access ongoing learning and development opportunities, including:
  - Statutory and mandatory training
  - Induction
  - Core knowledge and skills
  - Line managers training
  - Role specific learning
  - Coaching and mentoring
  - Leadership development
  - Apprenticeships
  - Non role specific learning
  - Clinical supervision
  - Team development
  - Other

## 2. SCOPE

- 2.1. This policy applies to all staff directly employed by West Hampshire Clinical Commissioning Group (CCG).
- 2.2. Only the sections on statutory and mandatory training and induction apply to temporary / agency staff and those on honorary contracts.

## 3. STATUTORY AND MANDATORY TRAINING

- 3.1. All staff employed by the CCG are required to complete their statutory and mandatory training within six weeks of commencing their role.

- 3.2. Individuals are responsible for ensuring they complete their mandatory training updates before the expiry date of the previous completion.
- 3.3. Reports are provided on a quarterly basis to support line managers to monitor compliance.
- 3.4. Individuals must be up to date with their statutory and mandatory training requirements before they are able to access any additional learning opportunities.
- 3.5. A matrix has been designed to help both staff and managers decide which statutory and mandatory training is applicable, what methods are available and how often it needs to be kept up to date. This is attached at Appendix 1.
- 3.6. All in-house face to face mandatory training opportunities will be listed in the learning and development prospectus.

#### **4. INDUCTION**

- 4.1. It is expected that all new starters attend the next available corporate induction session after they start their new role. Sessions are held every two months.
- 4.2. It is the line manager's responsibility to ensure the new starter is booked and scheduled to attend corporate induction as part of planning their wider induction programme.

#### **5. ASSESSMENT OF INDIVIDUAL LEARNING NEEDS**

- 5.1. In accordance with the performance review policy, all staff will have an appraisal between April and June each year. During this period every member of staff will agree a personal development plan with their line manager.
- 5.2. Learning needs for all staff will be collated centrally in July of each year following the appraisal 'season' in April to June. Learning needs will be collated by line managers for their team and submitted to the Head of Organisational Development by the end of July each year.
- 5.3. The learning needs analysis will inform the provision of learning and development opportunities for the following year. The provision will be themed into several groups:
  - Core knowledge and skills
  - Line Managers Training
  - Role specific training
  - Coaching and Mentoring
  - Leadership development

- Apprenticeships
  - Non role specific learning and development
  - Clinical Supervision
  - Other development opportunities
- 5.4. A limited budget is allocated each year for staff learning and development. In order to plan and allocate the budget fairly and enable it to be used most efficiently, it is vital that individual and team learning needs are identified by the end of July each year.
- 5.5. It is understood that some learning needs cannot be planned for in advance, so a small proportion of the training budget will be held unallocated to account for these ad hoc learning needs identified during the year.
- 5.6. All learning and development opportunities will be listed in the organisation's learning and development prospectus which will be revised regularly (at least quarterly) and published on the intranet.

## **6. PROCEDURE FOR ACCESSING LEARNING AND DEVELOPMENT OPPORTUNITIES**

### **6.1. Core knowledge and skills**

- 6.1.1. The Head of Organisational Development will collate a list of the core knowledge and skills deemed necessary for large numbers of staff which include technical, personal effectiveness and line management skills.
- 6.1.2. An internal rolling programme of learning opportunities will be provided based on the need identified, and will be open to all new and existing staff. Individuals can book themselves on to the internal programmes directly, following agreement from their line manager. Once booked individuals are expected to attend. Only illness or other exceptional circumstances will be accepted as a reason for non-attendance.
- 6.1.3. All learning opportunities for core knowledge and skills will be detailed in the learning and development prospectus.
- 6.1.4. The list of core skills will be reviewed annually and development opportunities provided as deemed appropriate through ongoing assessment of demand and organisational need.

### **6.2. Line Management Training**

- 6.2.1. As an organisation we have a responsibility to ensure all our line managers are trained and supported to be the best they can.

- 6.2.2. A line manager's development programme will be available to all new and existing line managers at least once a year.
- 6.2.3. It is expected that all line managers undertake the programme once as soon as possible after starting their role in a line management position.
- 6.2.4. Individuals can book themselves on to the programmes directly, following agreement from their line manager.
- 6.2.5. There may be occasions when there has been a significant change in policy or procedure and it is necessary for all line managers to attend an update.
- 6.2.6. Details of the line managers training is described in the learning and development prospectus.

### **6.3. Role specific training**

- 6.3.1. This refers to formal learning opportunities which can be accessed at a cost which are required by your job role, usually provided by external organisations. These opportunities may include conferences, workshops, courses, and qualifications.
- 6.3.2. Where a learning need has been identified as part of a personal development plan and is required to enable an individual to fulfil their job role, the cost will be covered in full by the organisation.
- 6.3.3. In order to secure funding for role specific training, an application form must be completed and will be processed as described in section 7.

### **6.4 Coaching and mentoring**

- 6.4.1 A description of coaching and mentoring is provided in the learning and development prospectus.
- 6.4.2 The need for coaching and / or mentoring will be discussed with your line manager as part of the ongoing appraisal and personal development process.
- 6.4.3 Access to coaching and mentoring is available all year round for any staff on a request basis via the Thames Valley and Wessex Leadership Academy. In addition, an internal faculty of coaches and mentors will be established and supported.
- 6.4.4 Details on how to access a coach or mentor are provided in the learning prospectus.
- 6.4.5 Coaching is usually provided on the basis of up to six sessions, but will be agreed between the coach and coachee.

- 6.4.6 Individual staff may identify and approach their own mentor through their line manager or professional networks. This is undertaken in agreement with their line manager.
- 6.4.7 Coaching and mentoring sessions should be conducted during work time.
- 6.4.8 Employees are eligible to claim travel expenses to attend coaching and mentoring sessions via the e-expenses platform in the normal way. Please refer to the Travel Expenses Policy for allowances and procedures.

## **6.5 Leadership development**

- 6.5.1 Leadership development opportunities include:
- Healthcare Leadership Model (HLM) 360 degree appraisal
  - Formal leadership programmes such as those provided by the NHS Leadership Academy
  - Peer support networks
  - Coaching (see section 6.4)
- 6.5.2 The 360 degree appraisal Healthcare Leadership Model will be available to a limited number of staff each year dependent on capacity and budget, and will be provided on request. The Head of Organisational Development will facilitate the appraisal process.
- 6.5.3 The Edward Jenner Programme provided by the NHS Leadership Academy is an online programme available for any staff to complete for free at any time. This is recognised as the first step in the leadership journey for any member of staff. Any staff member undertaking the Edward Jenner programme will be expected to attend a peer support network to cement and share learning.
- 6.5.4 The organisation will fund a specific number of places on more advanced leadership courses each year, dependent on the budget and availability. These may include, but are not limited to the programmes provided by the NHS Leadership Academy. Available leadership programmes will be detailed in the learning prospectus.
- 6.5.5 The application process is described in section 7.
- 6.5.6 If an individual is approved they will be offered a place on the next available programme.
- 6.5.7 Staff undertaking leadership development programmes will be invited to a peer support network to help cement and share their learning. Opportunities to share learning through written reflections and blogs,

posters, delivery of lunch and learn sessions, and other forums will be provided.

## **6.6 Apprenticeships**

6.6.1 As a levy payer, the CCG is able to offer a number of apprenticeship programmes for staff. This method of learning enables staff to access learning opportunities and undertake qualifications relevant to their job roles, whilst being fully funded through the levy. Examples of apprenticeship programmes include:

- Health and Social Care (level 2 and 3)
- Team Leader in Health and Social Care (level 4)
- Associate Project Manager (level 4)
- Junior Content Developer (level 4)
- Assistant Accountant (level 3 and 4)
- Operational manager (level 5)
- Senior Leader Masters degree (level 7)

6.6.2 Apprenticeship programmes take between 1 to 3 years to complete dependent on the level of the qualification.

6.6.3 Anyone wishing to explore apprenticeship opportunities should discuss with their line manager and the Head of Organisational Development in the first instance and submit an application as per the process described in section 7.

6.6.4 The organisation will fund a specific number of places on apprenticeship programmes each year, dependent on the budget and availability.

## **6.7 Non role specific learning and development**

6.7.1 Where an activity is undertaken at the request of the individual and there is identified benefit to the organisation, the organisation may contribute 50% of the cost and allow time off for staff to attend the course.

6.7.2 Staff must complete a learning and development application form in line with the application process outlined in section 7.

6.7.3 Where there is limited budget available, priority will be given to role specific courses and leadership development, over non role specific programmes.

6.7.4 There may be circumstances when an employee identifies a learning and development opportunity which does not necessarily align to

organisational objectives but with the longer term aspirations of the employee. In these circumstances the employee is expected to self-fund the programme and use annual leave to cover any time required to complete the programme.

## **6.8 Clinical Supervision**

6.8.1 Clinical supervision is important as part of professional registration and revalidation. It is a vehicle to support nurses and Allied Health Professionals (AHPs) to improve care quality, to optimise risk management, as a way to monitor one's own performance, and to contribute to robust systems of accountability and responsibility.

6.8.2 Please refer to the policy 'Clinical Supervision for Nurse and AHP Registrants: Arrangements within West Hampshire CCG'.

## **6.9 Other development opportunities**

6.9.1 These may include shadowing, secondments, reading, and will be agreed and arranged between the individual and their line manager.

6.9.2 The Head of Organisational Development may be able to offer support to access specific opportunities where individuals require some guidance. If financial support is required, this should be indicated in the annual learning needs analysis and the individual should complete the application process outlined in section 7.

6.9.3 A number of new learning opportunities will become available ad hoc during the year which may be on offer from local providers at no cost. These will be advertised to all staff and opportunities allocated on a first come first served basis. All individuals must discuss such opportunities with their line managers before expressing their interest.

## **7 APPLICATION PROCESS**

7.1. Applications for learning and development programmes are completed as follows:

1. Any learning opportunity that is free or costs up to £300 should be approved by the line manager and funded from within the department budget. This might include one day courses, conferences, etc.
2. Requests for role specific training over £300 must be submitted once a year by the end of July as part of the learning needs analysis.
3. To submit a formal request, the individual must complete the learning and development form in Appendix 3 and submit to the Head of Organisational Development by end July each year.
4. All requests up to a maximum of £1000 will be reviewed with the Director responsible for learning and development.

5. All requests will receive a response within four weeks. There are four possible responses:
  - a. Approved
  - b. Approved subject to conditions
  - c. Further information required
  - d. Not approved, with specific feedback given as to why
  
- 7.1 Where programmes cost more than £1000, application forms must be signed by a Director and will be considered by the executive team, assessed against set criteria to ensure fairness and equality, and funding will be allocated according to the budget available.
  
- 7.2 A limited number of staff from all levels of the organisation will be selected based on the following criteria:
  - Alignment with organisational objectives
  - Benefits to individual, team and organisation
  - Previous learning and development activity
  - Readiness and potential
  
- 7.3 Where an additional learning need arises during the course of the year, the individual must contact the Head of Organisational Development with their request and complete the application process outlined above. Additional requests will be reviewed ad hoc over the year and will be subject to budget availability.
  
- 7.4 Any financial approval does not include subsidiary expenses such as travel or accommodation. Employees are eligible to claim travel expenses via the e-expenses platform in the normal way. Please refer to the Travel Expenses Policy for allowances and procedures.
  
- 7.5 Individuals who are suitable for the programme but cannot be supported at the time due to budget, service or personal restraints may be offered a guaranteed place in the following year.

## **8 TEAM DEVELOPMENT**

- 8.1 There may be circumstances when training is more appropriately delivered in a team setting either at a meeting or a team development session.
  
- 8.2 It is expected that every Directorate team will have at least one team development day each year.
  
- 8.3 The team leader should in the first instance discuss the team development needs with the Head of Organisational Development.

- 8.4 A team development planning session form is provided in Appendix 5 to help team leaders articulate the team development needs and facilitate the discussion with the Head of Organisational Development.
- 8.5 The Head of Organisational Development will support the creation of an appropriate team development session based on the agreed objectives.
- 8.6 Team development opportunities may be accessed at any time during the year but should be planned well in advance to ensure capacity and budget can be planned accordingly.

## **9 SHARING LEARNING OUTCOMES**

- 9.1 It is expected that all learning and development opportunities benefit the individual, team and organisation as a whole.
- 9.2 Following completion of a learning activity, it is good practice to reflect upon the learning outcomes. All staff should complete the learning reflection in Appendix 3 and discuss with their line manager at their next 1:1 meeting.
- 9.3 The line manager must provide opportunities for the individual to share their learning as appropriate, this may include team meetings or discussions, small working groups, presentations, written feedback.
- 9.4 Additional opportunities to share learning will be provided throughout the year for anyone in the CCG via written reflections and blogs, posters, delivery of lunch and learn sessions, and other forums.

## **10 STUDY LEAVE**

- 10.1 Study leave is not the same as time off to attend the learning. It is the leave allowed to support the staff member to complete their personal development objectives. Study leave may include time to:
  - a) complete assignments or projects
  - b) revise for examinations
  - c) undertake reflective practices
  - d) prepare for revalidation
  - e) write up a dissertation
  - f) attend assessment centres
- 10.2 This list is not exhaustive and is designed to provide indicative study leave time allocation for staff. It is the applicant's responsibility to plan ahead and ensure time taken is agreed by the line manager and meets the needs of the team.

- 10.3 Agreement on the amount of study leave allocated will be agreed between the individual and their line manager.
- 10.4 In total, a maximum of five days study leave (pro rata if part time) will be granted per year.
- 10.5 Additional annual leave or unpaid leave may be requested to support studies in line with the leave policy.
- 10.6 Staff working part time and undertaking training specific to their job role on a non-working day or as an extension of their normal hours, will be enabled to take time back in lieu.

## **11 WHEN THINGS CHANGE**

- 11.1 The development of staff is essential to the on-going success of the organisation. It also represents significant organisational investment in employees and requires reciprocal commitment from the individuals concerned.
- 11.2 Where an individual completes a programme which is funded by the CCG of £1,000 or more, and leaves the CCG within a period of two years after completion of the activity, the following will apply:
- Leaving the CCG during or in the first 12 months after completion will require individuals to reimburse the following depending on their destination on leaving:
    - Health and social care in the Hampshire and Isle of Wight area – 0%
    - Within the NHS but out of the area – 50%
    - Another organisation – 100%
  - Leaving the CCG between 12 and 24 months after completion will require individuals to reimburse the following depending on their destination on leaving:
    - Health and social care in the Hampshire and Isle of Wight area – 0%
    - Within the NHS but out of the area – 25%
    - Another organisation – 50%
- 11.3 This can be waived in exceptional cases at the line manager's discretion, for example if an individual leaves due to ill health or is made redundant.
- 11.4 Where an individual has been fully supported but has failed to attend or complete the learning programme without acceptable reason, the CCG may seek reimbursement of the full cost.
- 11.5 There may be occasions when a programme is not quite what was thought or personal circumstances change meaning it isn't practical to continue with a

development programme. Where this occurs, it should be discussed with the line manager in the first instance and then the relevant Director and the Head of Organisational Development as soon as possible so that arrangements can be made to defer or cancel the commitment.

- 11.6 Where learning programmes include examinations or assessments, the CCG will cover the costs of the first attempt. Any retakes must be self-funded where applicable.

## **12 ROLES AND RESPONSIBILITIES**

### **12.1 Executive Team**

The Executive team are responsible for:

- Ensuring teams undertake appraisals during April to June and submit all learning needs in July of each year;
- Reviewing and assessing learning and development applications annually as part of the learning needs analysis, and ad hoc as they arise, using the agreed criteria to ensure fair allocation of resources;
- Overseeing the training budget and reviewing reports on spend via the Learning and Growth Group.

### **12.2 Head of Organisational Development**

The Head of Organisational Development is responsible for:

- Collating the annual learning needs analysis by end July;
- Provide support and advice to managers and staff on the implementation of the policy, identification and meeting of needs and, where possible, information about courses and training resources;
- Make arrangements for or assisting in the delivery of in-house development programmes, as appropriate to meet identified needs;
- Make arrangements for developing and delivering bespoke training programmes to meet group needs;
- Monitor, record, and evaluate training and development activity;
- Manage the training budget;
- In partnership with the Finance Department produce a quarterly report on the training and development budget for Learning and Growth Group.

## **12.3 Line Managers**

Line managers are responsible for:

- Ensuring all staff are aware of this the policy and know how to access learning and development;
- Ensuring that annual appraisals are conducted and personal development plans agreed by the end of June each year or three months after commencement in the role;
- Monitoring team compliance with statutory and mandatory training and ensuring that individuals are up to date with their statutory / mandatory training at the point of agreement of any additional learning;
- Submitting a team learning needs assessment in July of each year;
- Supporting staff to access appropriate learning and development opportunities;
- Ensuring learning outcomes are reviewed and shared where appropriate.

## **12.4 Individual Employees**

Individual employees are responsible for:

- Ensuring they know how to access and follow this policy;
- Maintaining compliance with statutory and mandatory training;
- Participating in the appraisal process and mutually agreeing specific learning objectives as appropriate;
- Attending courses and training as agreed;
- Fulfilling the requirements of the learning programmes;
- Completing an evaluation of all learning activity and sharing their learning where appropriate.

## **13 TRAINING**

13.1 There are no training requirements associated with the implementation of this policy.

## **14 EQUALITY ANALYSIS**

14.1 In line with the CCG's commitment to equality and diversity this policy has been assessed for its impact on employees with characteristics protected by the Equality Act 2010.

14.2 The CCG will equality monitor applications and take up of statutory and mandatory training, and additional learning and development opportunities to ensure that the policy is implemented fairly, and no employee is disadvantaged on the grounds of one or more of their protected

characteristics. Where equalities monitoring highlights differential access this will be addressed.

- 14.3 Line managers will implement the policy in a way that considers and meets each individual employee's needs. For example, where an employee has a learning difficulty or disability that requires consideration and implementation of reasonable adjustments in order for them to access learning and development opportunities.

## **15 SUCCESS CRITERIA / MONITORING THE EFFECTIVENESS OF THE POLICY**

- 15.1 The success of this policy will be monitored via:
- Annual learning needs analysis
  - Quarterly review of training budget
  - Database of training requests
  - Annual staff survey results
  - Workforce Race Equality Standard (WRES) indicator 4 (access to non-mandatory training and Continuing Professional Development), and indicator 7 (equal opportunities for career progression and promotion)
  - Workforce Disability Equality Standard (WDES) metric 5 (equal opportunities for career progression or promotion), and metric 8 (provision of adequate adjustments).

## **16 REVIEW**

- 16.1 This document may be reviewed at any time at the request of either staff side or management, but will automatically be reviewed on a three yearly basis.

## **17 REFERENCES AND LINKS TO OTHER DOCUMENTATION**

- CCG Operational Plan
- Human Resources, Inclusion and Organisational Development Strategy
- Policy for Performance and Development Reviews, and Pay Progression
- Clinical Supervision for Nurse and AHP Registrants: Arrangements within West Hampshire CCG
- Nursing & Midwifery Council (NMC) Revalidation: A Policy to Support Registrants and their Line Managers
- Travel Expenses Policy
- Leave and Flexible Working Policy

## **Appendix 1 Statutory and Mandatory Training Matrix: West Hampshire CCG**

Statutory and mandatory training is a key element of the induction of new staff and their ongoing development.

This matrix is designed to help both staff and managers decide which statutory and mandatory training is applicable, what methods are available and how often it needs to be kept up to date. Please discuss your requirements with your line manager.

Statutory and Mandatory training takes priority over all other learning and development and is not optional.

### **What does 'statutory' and 'mandatory' mean?**

Statutory Training is training that you are required to do by law as defined in the Health & Safety at Work Act 1974.

Mandatory Training is training that your organisation has decided is essential to the safe practice and delivery of services.

All on line courses can be accessed using your login to the ConsultOD portal.

## Requirements for all staff

<b>Training</b>	<b>Staff Group</b>	<b>Delivery Method</b>	<b>Frequency</b>
Corporate Induction	All new employees	1 day, face to face	Once, within 8 weeks of starting
Identifying and Supporting Victims of Modern Slavery (TRF)	All staff	Online	Once, within 8 weeks of starting
Fire Safety	All staff	Online	Annually
Data Security Awareness – Level 1	All staff	Online	Annually
Conflicts of Interest Module 1	All staff	Online	Annually
Conflicts of Interest Declaration	All staff	Paper form	Annually (or when there is something new to declare)
Display Screen Equipment	All staff	Online	Annually
Equality and Diversity	All staff	Online	Every 3 years
Health, Safety and Welfare	All staff	Online	Every 3 years
Moving and Handling	All staff	Online	Every 3 years
PREVENT radicalisation	All staff	Online	Every 3 years
Safeguarding Adults Level 1	All staff (unless completed level 3 or above)	Online	Every 3 years
Safeguarding Children Level 1	All staff (unless completed level 3 or above)	Online	Every 3 years

## Role specific mandatory training

Training	Staff Group	Delivery Method	Frequency
Adult Basic Life Support (with Paediatric Modifications and Anaphylaxis training if required)	All staff with professional registration, e.g. nursing, medical, AHP, pharmacy	Face to Face	Annually
Conflict resolution	All staff with professional registration, e.g. nursing, medical, AHP, pharmacy	Face to face	Every three years
Infection Prevention and Control and Hand Hygiene	All staff with professional registration, e.g. nursing, medical, AHP, pharmacy	Face to face	Annually
Mental Capacity Act & DOLS Level 2	All staff with professional registration, e.g. nursing, medical, AHP, pharmacy	Face to face	Once Updates to be provided if there is statutory change.
Non patient Manual Handling	All staff with professional registration, e.g. nursing, medical, AHP, pharmacy	Face to face	Annually
Safeguarding Children Level 2	Non-clinical and clinical staff who, in their role, have contact ( <i>however small</i> ) with children, young people and/or parents/carers <i>or adults who may pose a risk to children. E.g. CCG complaints teams, CCG Communications Team, CCG primary and secondary care commissioners, nurses working in community services</i>	Face to face (4 hours)	Every 2 years

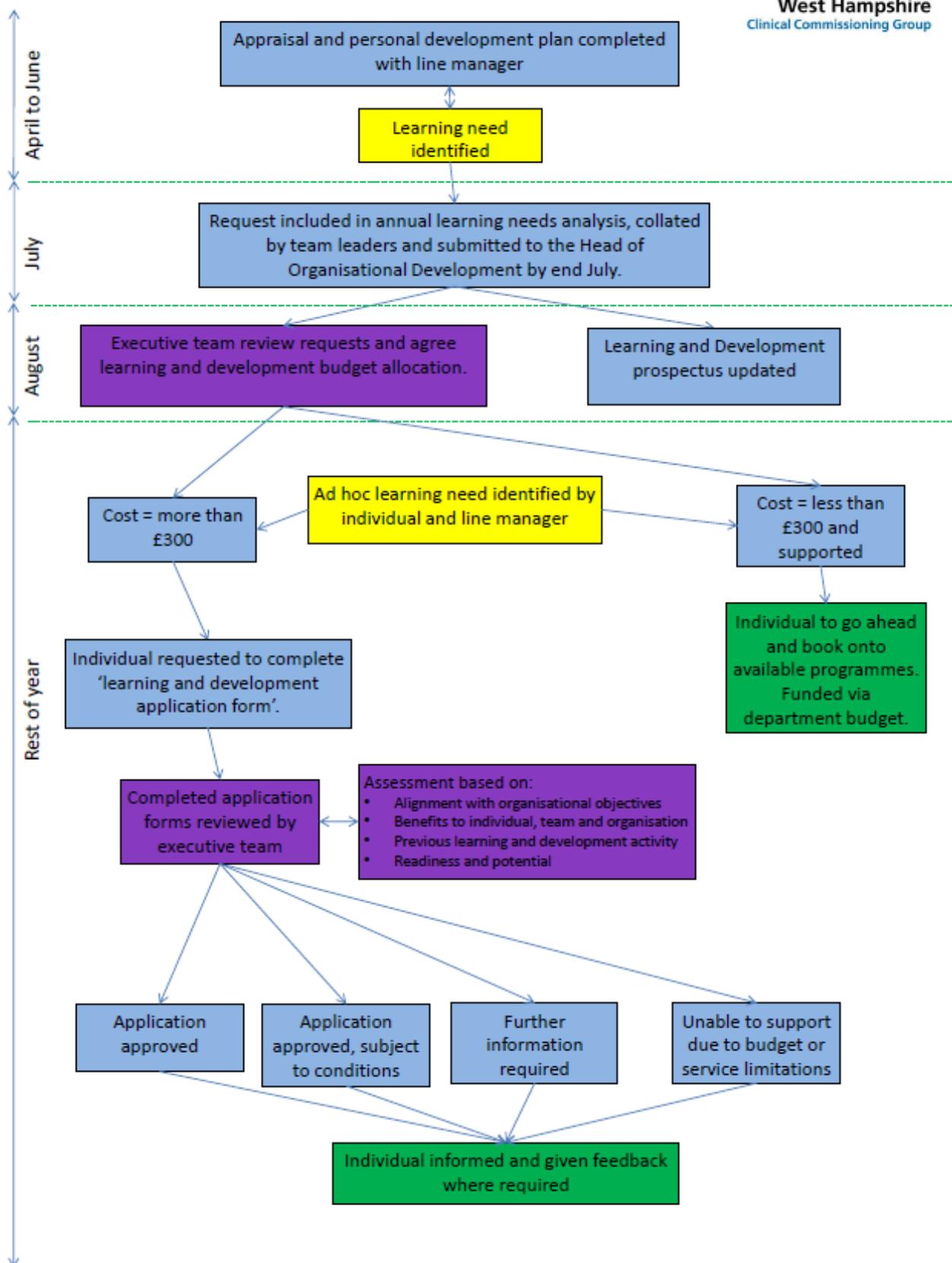
Training	Staff Group	Delivery Method	Frequency
Safeguarding Children Level 3 (this includes Level 1 Prevent and other subjects)	<p>All clinical staff working with children, young people and/or their parents/carers</p> <p><b>and/or</b></p> <ul style="list-style-type: none"> <li>• any adult who could pose a risk to children</li> </ul> <p><b>and</b></p> <ul style="list-style-type: none"> <li>• who could potentially contribute to assessing, planning, intervening and/or evaluating the needs of a child or young person and/or parenting capacity</li> </ul> <p>CCG Children's Continuing Health Care assessors</p>	Face to face	Every 2 years
Safeguarding Children Level 3 Additional Knowledge	This includes, for example: GP practice safeguarding leads and specialist nurses/AHPs for safeguarding and looked after children.		16 hours over 3 years
Safeguarding Children <b>Level 4:</b> Specialist roles – Named Professionals <b>for safeguarding and LAC</b>	Named Professionals including Named GPs		24 hours over 3 years
Safeguarding Children <b>Level 5:</b> Specialist roles – Designated Professionals <b>for safeguarding, child death and LAC</b>	Designated Professionals		24 hours over 3 years

<b>Training</b>	<b>Staff Group</b>	<b>Delivery Method</b>	<b>Frequency</b>
Safeguarding Children <b>CCG Board/Governing Body Level</b>	Chief Executive Officers, executive and non-executive directors, including lay members and commissioning directors.		Annual update.  This will require a tailored package to be delivered which encompasses level 1 knowledge, skills and competencies, as well as board level specific as identified in this section.
Prevent Healthwrap training	For designated and consultant professionals in safeguarding plus any nominated trainers	Face to face	Once
The Role of the Caldicott Guardian (NHS Digital Workbook)	Caldicott Guardian  Also recommended for: <ul style="list-style-type: none"> <li>• Senior Information Risk Owner</li> <li>• Data Protection Officer</li> </ul>	Online workbook  Please follow this link to the <a href="#">workbook on the Information Governance Toolkit</a>	Annually
Introduction to Risk Management for SIROs and IAOs (NHS Digital Workbook)	Senior Information Risk Owner <ul style="list-style-type: none"> <li>• Information Asset Owners,</li> <li>• Data Protection Officer</li> </ul> Also recommended for: <ul style="list-style-type: none"> <li>• Caldicott Guardian</li> <li>• Executive team and lay members</li> <li>• Data custodians</li> </ul>	Online workbook  Please follow this link to the <a href="#">workbook on the Information Governance Toolkit</a>	Annually  Every three years  Every three years
First Aid at Work	First aiders	Face to face, 2 days	Every 3 years

<b>Training</b>	<b>Staff Group</b>	<b>Delivery Method</b>	<b>Frequency</b>
Display Screen Assessment	Health & Safety Representatives / DSE Assessors	Face to face	Every 2 years
Fire Warden Training	Fire Wardens	Face to face	Every 3 years
Fire Warden Building Familiarisation	Fire Wardens	Face to face	Every 2 years

Appendix 2:

## Learning and Development Flow Chart



### Appendix 3 Learning and development application form

#### Section 1: Personal and programme details

Name:	
Department:	
Please select type of activity:	
Leadership Development	<input type="checkbox"/>
Role Specific training	<input type="checkbox"/>
Apprenticeship	<input type="checkbox"/>
Non Role specific training	<input type="checkbox"/>
Other	<input type="checkbox"/>
Name of activity/course:	
Name of provider:	
Start date and length of activity/course:	
Cost of activity (including course fees, materials, travel, accommodation):	
Time commitment (to attend course, study leave, exams / assessments):	

#### Section 2: Learning objectives

Please describe the learning need as identified in your personal development plan.
Please describe how this activity will support achievement of organisation strategic priorities:
Please describe the benefits to you, the team and the wider organisation by completing this programme:

Please describe how your learning from this activity will be shared with colleagues, the team and the wider organisation:

How critical is this learning opportunity to you carrying out your job role?

- Critical
- Somewhat critical
- Not critical

Please elaborate:

### **Section 3: Resources**

List any other non-mandatory training you have undertaken in last 2 years:

Please describe the proposed staff contribution in terms of time or funding

Please describe the proposed organisation contribution in terms of time or funding

#### Section 4: Personal declarations

I confirm that I am up to date with my statutory and mandatory training requirements and have completed an appraisal and personal development plan within the last 12 months (NB additional learning and development will not be supported until basic mandatory requirements are met).

I agree to the following financial contribution if I do not complete the activity or leave the CCG in the first two years after completion of the activity:

Destination on leaving CCG	Time period after completion	Personal Financial Contribution
Health and social care in Hampshire and Isle of Wight	0-12 months	0%
	12-24 months	0%
Within the NHS but out of the area	0-12 months	50%
	12-24 months	25%
Another organisation	0-12 months	100%
	12-24 months	50%

Applicant Signature:	
Date:	

#### Section 5: Line manager support

Line Manager testimonial. Please describe why you support this application.	
Line Manager Name:	
Line Manager Signature:	
Date:	

**Section 6: Director support**

***Please complete only where the programme costs more than £1000.***

Director testimonial. Please describe why you support this application. Specifically please describe the applicants readiness and career potential.	
Director Name:	
Director Signature:	
Date:	

Please complete and send to the Head of Organisational Development.

## Appendix 4 Learning and Development Reflection / Evaluation

Name:	
Department:	
Name of activity/course:	
Describe the learning needs that this activity set out to address:	
Please write some reflections on the learning activity. You may wish to consider the following: <ul style="list-style-type: none"><li>• What did you do?</li><li>• How were you involved?</li><li>• How did you feel during the activity?</li><li>• How do you look back on the activity?</li><li>• What went well during the activity? Why was that?</li><li>• What didn't go so well? Why was that?</li><li>• What have you learnt?</li><li>• How can you apply the learning?</li><li>• What will you do differently going forward?</li><li>• How could others benefit from your learning?</li><li>• Did the activity achieve what you set out to do? If not, why not?</li></ul>	
Please describe how your learning from this activity will be shared with colleagues, the team and the wider organisation:	

## Appendix 5: Team Development Planning Form

Contact Name:	
Team:	
Team development activity Date: Time: Venue:	
Describe what the team does well:	
Describe how the team could improve:	
What are you hoping to achieve from the team development session:	
What will be different in three months' time after the event: What will we see? How will the team and others see a difference:	
What ideas do you / the team have for the team development session:	
What help do you need:	

Please complete this form and discuss it with the Head of Organisational Development.

**Appendix 6: Equality Analysis**

**Equality analysis**

<b>Title of policy, project or proposal:</b>
Learning and Development Policy

<b>Name of lead manager:</b> Kate Hardy, Head of Organisational Development
<b>Directorate:</b> Quality

<p><b>Q1 What are the intended outcomes of this policy, project or proposal?</b></p> <ul style="list-style-type: none"> <li>• That the West Hampshire Clinical Commissioning Group (CCG) approach to staff learning and development is in line with, and supports, the NHS Long Term Plan commitment to offer career progression that “motivates staff to stay within the NHS and, just as importantly, equips them with the skills to operate at advanced levels of professional practice and to meet patients’ needs of the future.” (NHS Long Term Plan, 2019)</li> <li>• That the CCGs employees know the full range of learning and development opportunities available to them and how to access them. This includes:             <ul style="list-style-type: none"> <li>○ Statutory and mandatory training</li> <li>○ Induction</li> <li>○ Core knowledge and skills</li> <li>○ Line managers training</li> <li>○ Role specific learning</li> <li>○ Coaching and mentoring</li> <li>○ Leadership development</li> <li>○ Apprenticeships</li> <li>○ Non role specific learning</li> <li>○ Clinical supervision</li> <li>○ Team development.</li> </ul> </li> </ul>
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<p><b>Q2 Who will be affected by this policy, project or proposal?</b></p> <ul style="list-style-type: none"> <li>• This policy impacts on all staff directly employed by West Hampshire CCG</li> <li>• Only the sections on statutory and mandatory training and induction apply to temporary / agency staff and those on honorary contracts.</li> </ul>
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<p><b>Evidence</b></p> <p><b>Q3 What evidence have you considered?</b></p> <ul style="list-style-type: none"> <li>• CCG Workforce Diversity Profile</li> <li>• ConsultOD database – compliance of statutory and mandatory training only</li> </ul>
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- CCG record of training undertaken kept by the Administration Team
- Record of attendance for induction, line managers training and other internal training days
- Training survey completed in Feb 2019

## Age

The CCG Workforce Diversity Profile 2018/19 gives an indication of the age profile of employees (snap shot date 31 December 2018):

	2013	2014	2015	2016	2017	2018	Comparator
<b>Total number of employees</b>	190	197	204	229	275	<b>322</b>	
<b>Age group</b>							<b>National CCG workforce</b>
16-24	3.7%	2%	1.5%	1.7%	2.2%	<b>4%</b>	2%
25-44	28.9%	35.5%	35.3%	37.6%	40%	<b>42%</b>	43%
45-64	65.8%	60.4%	60.8%	59.4%	56.4%	<b>53%</b>	53%
65+	1.6%	2%	2.5%	1.3%	1.5%	<b>1%</b>	2%

- The age profile of the CCG workforce has been shifting year-on-year with a gradual increase in 25-44 year olds, and a decrease in staff aged 45-64 (although this older age group still make-up the majority the workforce).
- Employees aged less than 24 years and over 65 years, make-up a small proportion of the workforce at just 4% and 1% respectively.

The increase in younger members of the workforce where expectations of work and life may differ is an important consideration, particularly as they remain a minority group. We need to understand more the learning and development needs and expectations of the younger members of the workforce. It is proposed to develop a peer support group for 16 to 25 year olds to generate some deeper understanding of their needs, and to enable them to have a voice.

## Disability (physical and mental)

The CCG Workforce Diversity Profile 2018/19 gives an indication of disability amongst employees (snap shot date 31 December 2018):

	2013	2014	2015	2016	2017	2018	Comparator
<b>Total number of employees</b>	190	197	204	229	275	<b>322</b>	
<b>Disability</b>							<b>National CCG workforce</b>
No disability	-	31%	72.5%	76.4%	77.1%	<b>78%</b>	71%
Yes I have a disability	-	1%	2%	4%	3%	<b>4%</b>	3%
Prefer not to say	-	19.8%	21.1%	16.2%	10.9%	<b>8%</b>	0%
Undefined	-	48.2%	4.4%	3.9%	8.7%	<b>10%</b>	26%*

- The proportion of declared disability in the CCG workforce remains low and does not reflect levels of disability in the local population (7%).

All core skills development days have asked staff to refer to the Head of Organisational Development or the training supplier directly where there are specific access or communication needs.

### **Dementia**

As far as we know, no employees have a diagnosis of dementia. No impact identified.

### **Gender reassignment (including transgender)**

The policy aims to have a positive impact irrespective of transgender status. All members of staff have equal entitlement to apply for learning and development opportunities under this policy, and successful applications granted based on a set of objective criteria unrelated to protected characteristics.

### **Marriage and civil partnership**

The policy aims to have a positive impact irrespective of marital status. All members of staff have equal entitlement to apply for learning and development opportunities under this policy, and successful applications granted based on a set of objective criteria unrelated to protected characteristics.

### **Pregnancy and maternity**

The age profile coupled with the CCG Workforce Diversity Profile which shows that on 31 December 2018 79.5% of employees were female and 20.5% were male, highlights that the CCG has a predominantly female workforce, with an increasing proportion of staff of child bearing age.

This means the CCG needs to ensure that robust arrangements are in place to support staff whilst ensuring service delivery – the Maternity, Paternity, Adoption Leave and Shared Parental Leave and Pay Policy aims to support this and ensure requests are dealt with fairly and consistently. The Maternity policy states that staff are able to use KIT days to undertake training and development.

Communication with staff on maternity or adoption leave could be a barrier to ensuring staff know about learning opportunities available. Consideration will be given to how we communicate learning opportunities with staff currently on leave spanning longer than four weeks.

## Race

The CCG Workforce Diversity Profile 2018/19 gives an indication of the ethnic make-up of employees:

	2013	2014	2015	2016	2017	2018	Comparator
<b>Total number of employees</b>	190	197	204	229	275	<b>322</b>	
<b>Ethnic background</b>							<b>Local population</b>
White British	-	69.6%	80.9%	86.5%	84.7%	<b>84%</b>	93%
Any other White background	-	2%	3.5%	3.1%	3.3%	<b>3%</b>	3.1%
Mixed ethnicity	-	0.5%	1%	1%	1%	<b>2%</b>	1.2%
Black, Asian and Minority Ethnic	-	2.5%	3%	3%	4%	<b>5%</b>	4.1%
Other specified	-	0%	0.5%	0.4%	1.8%	<b>0%</b>	0.2%
Undefined/ not stated	-	25.3%	11.3%	6.1%	4.7%	<b>6%</b>	0%

- The proportion of staff from 'White other' ethnic backgrounds reflects the ethnic diversity of local population. This includes staff from European backgrounds
- For the first time since 2013, this year the proportion of employees from 'Black, Asian and Minority Ethnic' and 'Mixed' ethnic backgrounds is higher than the ethnic diversity of the local population. Previously these groups were under-represented in the workforce.

The policy aims to have a positive impact for all staff regardless of their ethnic background. There are often opportunities for staff from BAME backgrounds to access bursaries or specific leadership development opportunities. This is positive action, but consideration should be given to whether these staff feel segregated and pushed towards those opportunities rather than other development opportunities which are open to all, and could be seen as being disadvantaged.

### Religion or belief

The CCG Workforce Diversity Profile 2018/19 shows there remain significant data gaps for the employee protected characteristic of religion or belief. This means we do not know the faith profile of the workforce.

	2013	2014	2015	2016	2017	2018
<b>Religion or belief</b>						
Atheism	-	5.1%	6.4%	7%	11.6%	14%
Christianity	-	15.2%	33.8%	37.6%	40.7%	41%
Other	-	0%	10.3%	12.6%	11.6%	13%
Prefer not to say	-	33.5%	48.5%	40.2%	30.9%	25%
Undefined	-	45.2%	1%	3%	5%	7%

The policy aims to have a positive impact for all staff regardless of their religion, belief or non-belief.

It is possible that some staff are disadvantaged by holding training on specific days of the week (e.g. Friday afternoons), therefore training will be rotated through different days to enable equal access.

In addition, though should be given to avoiding particular festival times, such as Eid or Diwali where staff may take annual leave, or Ramadam, where staff may be fasting and learning may be less effective. Mapping out the annual calendar of specific religious festivals would be helpful in identifying dates to avoid for learning opportunities, and ensuring that alternative options are provided where learning opportunities do clash.

### Sex (gender)

The CCG Workforce Diversity Profile shows that on 31 December 2018:

- 79.5% of employees were female
- 20.5% were male.

The gender balance of the workforce has remained similar since 2013, at around 80% female and 20% male.

<p>National evidence highlights that after having children women tend not to progress in their careers at the same rate as men. This contributes to the gender pay gap. We do not have data about whether this happens to female employees in the CCG.</p>
<p><b>Sexual orientation</b></p> <p>The policy is intended to have a positive impact for all staff irrespective of their sexual orientation.</p>
<p><b>Carers</b></p> <p>We do not have collated data about how many/ which staff have caring responsibilities. There is potential for an employee who is the carer of a dependent to be unable to access certain learning opportunities due to location of courses, potential residential elements of a programme, or due to length of courses differing from their usual hour of work.</p> <p>A shift of 30 minutes to the start time of a course held in October 2019 resulted in a staff member with caring responsibilities to be able to attend.</p> <p>Staff working part time and undertaking training specific to their job role on a non-working day or as an extension of their normal hours, will be enabled to take time back in lieu.</p>
<p><b>Serving Armed Forces personnel, their families and veterans</b></p> <p>The policy is intended to have a positive impact for all staff.</p>
<p><b>Meeting psychological needs</b></p> <p>Not applicable</p>
<p><b>Other identified groups</b></p> <p>Learning and development opportunities will be rotated around venues and areas to ensure those staff who do not drive are able to access such opportunities equally. In addition, lifts will be sought on behalf of staff where access is more challenging for them.</p> <p>Opportunities will be available for all staff across all pay bands to ensure no staff groups are disadvantaged.</p>
<p><b>Involvement and consultation</b></p>
<p><b>Q4 How have you involved stakeholders with an interest in protected characteristics in gathering evidence or testing the evidence available?</b></p> <ul style="list-style-type: none"> <li>• Engagement sought via training survey in February 2019</li> <li>• 1:1s with more than 40 people, team conversations, cultural audit undertaken in autumn 2018 to inform the organisational development strategy which includes all learning and development activities.</li> </ul>

- Learning and Growth group reviewed a draft policy in May 2019 and fed back comments.
- Training lead in Continuing Healthcare team involved in development of the policy
- Hampshire Partnership CCG OD lead involved in development of policy to ensure fairness and equity across Hampshire CCGs.
- Equality issues discussed at the Human Resources Policy EIA Group on 23 October 2019
- Exec team reviewed in October 2019
- Policy EIA Group involved in equality impact assessment
- Governance Manager supported process of review and ensuring all elements of the policy review were completed
- Equality and Diversity Manager involved in equality impact assessment
- Head of Organisational Development led policy review and development

**Q5 How have you involved stakeholders in testing the policy or programme proposals?**

As above

**Q6 For each involvement activity, please state who was involved, how and when they were engaged, and the key outputs:**

As above

**Equality statement**

**Positive impacts**

Policy intended to have a positive equality impact for staff from different protected groups by setting out the range of learning and development opportunities available and putting in place a clear and equitable framework for staff to request learning and training.

**Negative impacts**

A number of potential negative impacts identified:

- There is potential for employees with a disability to face barriers to accessing learning and development opportunities if course materials and resources are not available in alternative formats when needed and/ or communication support is not available. This may also be the case if employees have mobility issues and venues used to deliver training are not accessible. To reduce the risk of this, the policy has been amended to prompt managers to ensure access issues for employees with a disability are considered and actioned. In addition, all joining instructions include reference to a contact to inform the training provider of any access or communication needs.
- Staff that work part-time (less and/ or have childcare/ caring responsibilities (evidence suggests more likely to be women) may face barriers to accessing learning activities if they are run on days/times when they do not work or need to be at home. This can be mitigated by giving these staff notice of course dates well in advance so they can make alternative arrangements. We will hold training on different days of the week and we will

add to policy to state that staff that undertake training outside of their normal working hours will get time back

**Health inequalities**

Not applicable.

### Action planning for improvement, and to address health equalities and discrimination

Please give an outline of the key actions based on any gaps, challenges and opportunities you have identified. Include here any general action to address specific equality issues and data gaps that need to be addressed through consultation or further research.

Action	Person responsible	By date	Progress/ review (Add new actions if required)
1. To add to the policy that staff working part time and undertaking training specific to their job role on a non-working day or as an extension of their normal hours, will be enabled to take time back in lieu.	Kate Hardy	31/10/19	Added at section 10.1.6. Action complete.
2. Add a statement to the learning and development prospectus to describe how we support staff with specific access, communication or learning needs to have equal opportunity for development.	Kate Hardy	30/11/19	
3. Set up a young persons (age 16-25) peer support group to help identify needs and expectations in work as well as learning and development.	Kate Hardy Nick Birtley	31/12/19	Item on agenda for discussion at staff forum meeting on 5 November 2019.
4. Consider how we communicate learning opportunities with staff currently on leave spanning longer than four weeks.	Kate Hardy Nick Birtley	31/12/19	Can we add something to the mat leave form to say whether staff want to receive communications, what they want, and how they want them?

<b>Action</b>	<b>Person responsible</b>	<b>By date</b>	<b>Progress/ review</b> (Add new actions if required)
5. Consideration as to how we advertise learning opportunities targeted at BAME staff groups to ensure staff are not pushed towards these opportunities.	Kate Hardy Nick Birtley	31/12/19	
6. To map out the annual calendar of specific religious festivals to identify dates to attempt to avoid for learning opportunities, and to ensure that alternative options are provided where learning opportunities do clash.	Kate Hardy	31/12/19	

<b>For your records</b>	
<b>Person who carried out this assessment:</b>	Head of Organisational Development
<b>Date assessment completed:</b>	4 November 2019
<b>Date to review actions:</b>	31 December 2019
<b>Responsible Director:</b>	Director of Quality & Nursing
<b>Date assessment was approved:</b>	