

Northern Ireland Blood Transfusion Service



Learning and Development Strategy

2011 - 2014

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1. Introduction

Mission

“The NIBTS function exists to fully supply the needs of all hospitals and clinical units in the province with safe and effective blood and blood products and other related services. The discharge of this function includes a commitment to the care and welfare of our voluntary donors”.

Vision

The following statements set out the NIBTS vision and strategic direction for the next three years 2011/12 – 2013/14.

There are five corporate goals which will help NIBTS to achieve its vision and strategic direction for the next four years. These are:

1. **Donor/Customer-***Improving the Donor/Customer Experience*
2. **People-***Engage, Empower and Encourage learning and development*
3. **Improvement-***Embedding a culture of continuous improvement*
4. **Quality-***Ensuring governance and compliance*
5. **Resources-***Improving performance and achieving excellent results*

This learning and development strategy covers the period 2011/12 – 2014/15. The overall aim of this Learning and Development strategy is to provide a structured approach to learning to enable employees to meet the operational needs and service standards of NIBTS and to deliver the NIBTS Annual Business Plan. The acquisition of skills and knowledge that go beyond what is needed to fulfil these – personal and career development is also included in recognition of the role of learning and development in motivating and retaining employees.

Our Learning and Development mission is:

“To provide continuous, efficient and effective training to ensure we have skilled and motivated staff able to maintain and improve all aspects of quality within the service. Inherent in this philosophy is a commitment to helping all staff develop and reach their full potential”

This strategy will be reviewed on an annual basis. Progress against objectives in the learning and development strategy will be monitored.

2. Strategic Aims

Our mission will be realised through the delivery of our 4 strategic aims:

2.1 Strategic Aim 1 - To equip employees with the skills needed to deliver NIBTS Corporate plan

- Ensuring that our approach to Learning and Development identification and analysis begins with the linkage of individual objectives to corporate objectives and departmental plans through the Staff Development Review (SDR) process
- Ensuring that Staff Development Reviews reinforce the link between the individuals personal development plan and the NIBTS corporate plan
- Designing and delivering in house training events and programmes relevant to corporate plan priorities

2.2 Strategic Aim 2 – To effectively identify skills and knowledge requirements at Departmental and individual level via the KSF process and Team Development Plans

- Ensuring that all staff have a Staff Development Review in line with the KSF process
- Ensuring that Staff Development Reviews (SDR's) identify individual learning and development needs
- Ensuring that each department has a team development plan that incorporates development needs for the department

2.3 Strategic Aim 3 - To contribute to performance improvement

- Designing and delivering a management development programme which equips managers with the skills to deliver the Knowledge, Skills and Behaviours (KSB) required

- Ensuring that the learning opportunities we deliver are directly aligned to performance improvements and personal development in job roles

2.4 Strategic Aim 4 - To enable NIBTS to achieve Investors in People by March 2012

The IIP standard provides a framework for improving business performance and competitiveness through a planned approach to setting and communicating business objectives and developing people to meet these objectives. NIBTS is committed to the principles contained within the IIP standard and recognise its value to the organisation as a tool for improvement.

NIBTS has been in retaining recognition status for two years and has been permitted to retain recognition for a third year to allow the implementation of a new corporate action plan with departmental action plans supporting this.

3. Context

NIBTS employs 211 staff across 7 different departments as listed below:

- Donor Services
- Laboratories
- Finance and I, M and T
- Quality
- Regulatory, Affairs and Compliance
- HR and Corporate Services
- Medical

The composition of the staff in NIBTS spans across 5 sectors:

- Professional and Technical
- Managerial, administrative and clerical
- Ancillary and General
- Nursing
- Medical

NIBTS is committed to equality of opportunity and as a public agency abides by Section 75 of the Northern Ireland Act (1998). NIBTS is committed to tackling the obstacles that prevent fair access to high quality training opportunities and will ensure that no group is disadvantaged when applying for courses.

3.1 Consultation

In drafting this strategy the HR and Corporate Services department consulted with staff across the organisation by providing two stakeholder meetings which all staff were invited to attend; one meeting was held in Omagh and one in Belfast. The format of these meetings was a short overview from the Head of HR and Corporate Services and then staff were involved in group work to allow staff views to be gathered.

Managers were encouraged to discuss learning and development with staff by the Chief Executive at the corporate business update for managers which was held in March. Hand-outs were provided for managers to facilitate this discussion with staff.

In addition all staff were given the opportunity to submit any general comments to the HR and Corporate Services department.

All comments submitted by staff were considered and where possible have been incorporated into the strategy.

3.2 Learning and Development Budget

The learning and development budget for 2011/12 is currently £15,200.

4. Delivery and Resources

4.1 Learning Needs Analysis

The Learning and Development will be based on thorough learning needs analysis (LNA) carried out annually by all departments in conjunction with the HR and Corporate Services department. The aims of the learning needs analysis are:

- To identify training and development needs in order to achieve the corporate plan and Annual Business Plan objectives
- To inform budget setting
- To ensure that NIBTS can measure the link between learning activities and performance improvement

The LNA is informed by:

- The Corporate plan and Annual Business plan
- Departmental Team Development Plans
- Annual Staff Development Reviews

The process is shown as a flowchart at Appendix 1.

4.2 Management of Learning and Development: Responsibilities

The HR and Corporate Services department oversee achievement of the Learning and Development Strategy KPI'S & co-ordinate learning and development opportunities within NIBTS.

A training schedule of in-house training activities is available to view on the learning and development calendar on the intranet pages.

Line Managers

Line Managers are responsible for identifying team learning needs during the business planning cycle (see Appendix 2), discussing training needs with employees as part of the staff development review, and for ensuring the learning needs agreed in the staff development review are achieved. They are also responsible for ensuring employees attend mandatory training courses and for providing an effective induction for new employees.

Line managers need to evaluate learning transfer to the individual's job role following training via course evaluation forms. (See Appendix 3)

All Employees

Learning and development is the responsibility of every employee. Individuals are expected to identify their own needs in advance of their staff development review discussion with their line manager.

Employees are also responsible for giving reasonable notice if they are unable to attend a course or other event. Pressure of work will not be accepted as sufficient reason unless endorsed by the relevant Head of Department. Due consideration must be given to any cost the Agency might bear in such circumstances for both internal and external Learning and Development events.

Course bookings

Employees must have the permission of their line manager before submitting a course application to HR and Corporate Services. All applications must be completed via relevant documentation (Appendix 4).

4.4 Budget

The learning and development budget for 2011/12 is currently £15,200.

Expenditure is allocated to the following:

Service Level Agreement with Beeches Management Centre

Conferences

Post Entry Qualifications

Health and Safety related courses

Equality Awareness/Disability Awareness

5. Definitions of Learning and Development

5.1 Mandatory Training

Mandatory training includes all learning and development activity which the Northern Ireland Blood Transfusion Service requires a member of staff to undertake to enable that person to fulfil the functions of their role. This type of learning and development activity will be required because it is a professional or statutory requirement to complete it or it is required by the Northern Ireland Blood Transfusion Service for the individual to undertake it.

In order to meet statutory requirements and provide the best possible induction for new staff the following events will be mandatory:

Corporate and Local Induction– all new staff will complete induction locally with their line manager. In addition staff must attend an introduction to NIBTS from the Senior Management Team within their first 6 months of joining the service.

GMP-The activities undertaken by NIBTS are subject to regulation including those which aim to assure safety and quality for patients. These regulations require compliance with Good Manufacturing Practice (GMP) as applied within the pharmaceutical industry. GMP sets out how organisations should approach managing certain aspects of the organisation. GMP training is delivered on an annual basis to all staff however new starts must receive GMP training within a two week period.

Fire training-All staff must attend Fire training on an annual basis.

Equality Awareness- All staff must attend equality awareness training which conveys the essentials of Section 75 of the Northern Ireland Act.

Disability Awareness- Disability awareness is mandatory for all frontline staff.

Equality Screening Training-Equality screening training is mandatory for all staff that are responsible for composing policies and strategies.

Health and safety – All staff must attend manual handling training. In addition designated staff will attend first aid at work training.

Risk management- All staff must attend Risk Management Awareness training. This provides a basic awareness of what risk management is and what staff should be aware of.

In addition the following training is provided in relation to risk management:

1. Risk Register Process training for the Risk Management Sub Group and the Clinical Governance and Risk Management Group. This includes:
 - how to complete a risk register including scoring of risks
 - corporate themes and how to categorise risks
 - overview of risk register process
2. Corporate Level Risk Management training for the Board members. This provides an overview of the risk register process and how NIBTS score risks.

Emergency Planning and Business Continuity Awareness Training-This training provides a basic awareness of Emergency Planning and Business Continuity (existence of plans and procedure if notified of internal or external major incident).All relevant staff must attend.

FOI/DPA Training-Under the Data Protection Act NIBTS has a duty to keep information safe, secure and confidential. The Data Protection aspect of this training aims to make employees aware of their obligations under the Act and their general duty of confidentiality as a NIBTS employee.

As a public body NIBTS must comply with the Freedom of Information Act. The FOI Act gives the public the right to ask for access to information held by public bodies. The FOI aspect of this training aims to make employees aware of the Act, to train them to recognise potential requests and what they should do if they receive a request for information.

Some Records Management training is delivered in conjunction with the DPA & FOI training. This informs employees of the reasons why we need to create and keep good records and some things they need to do when creating and storing records.

Personal and Public Involvement (PPI)- The Health and Social Care (Reform) Act (NI) 2009 placed a duty of involvement on most HSC organisations. NIBTS is an organisation listed by DHSS PS. A number of specific requirements flow from this legislation, and key to this is accountability at the top of the organisation. Accountability is key to PPI.

In addition, it is important that staff are fully aware of the requirement to involve users of the Service, and this also extends to the requirement to involve communities in pursuance of the goals of the Service. In order to meet this need, staff must have training in PPI.

5.2 Management Development

NIBTS has agreed a set of Knowledge, Skills and Behaviours (KSB) for all identified managers and supervisors.

Managers need to be familiar with the framework and use any skills gaps they have to structure their personal development plans. To facilitate this managers will complete a self-assessment identifying their own development needs according to KSB. The KSB will be used in the managers Staff Development Review (SDR) and are intended to give NIBTS more robust performance management and empower individual employees. They will also be used to structure the in house training that is delivered.

5.3 Vocational Skills

NIBTS requires a complex range of technical skills for the variety of posts contained within the service. These requests will have a high priority provided a sound case for investment is made at departmental planning stage and individual SDR stage.

5.4 Professional Development

Professional development relates to a learning and development activity which is not a mandatory or essential requirement for a job, but is closely related to the individual's role and will add significant value to the service.

5.5 PEQ-Post Entry Qualifications

These are generic post entry qualifications which offer development opportunities for individual employees related to their specific post. Examples of PEQ requests from the 2010/11 Learning and development plans are Msc in Biomedical Science, Diploma in Access Studies and CIM Introductory Marketing.

PEQ applications which are directly related to achievement of objectives within NIBTS corporate plan and SDR will have the highest priority.

NIBTS is committed to the continuing professional development of all its employees. Our funding qualifications policy is available at Appendix 5.

5.6 Incident Based Training Needs

Sometimes things go wrong and mistakes are made which highlights a gap in skills or competencies within the workforce. These gaps may not have been included in personal development plans or budget allocation. If a training solution is required these should be discussed with the Head of Department as they arise.

5.7 Conferences and Seminars

Conferences are either profession or discipline specific and will result in best practice or new learning to be brought back to the Northern Ireland Blood Transfusion Service. Members of staff may be invited to present at a conference.

Employees should inform HR and Corporate Services when you have attended a conference or seminar where you didn't require approval so we can update your training record on Q pulse.

5.8 Standard Operating Procedures (SOP's)

NIBTS follow a set of standard operating procedures (SOP's). These SOP's set the context for required procedures for staff. SOP's are issued accordingly as changes are made within the organisation. Staff will be required to read and sign SOP's.

6. Evaluation

All in house events are evaluated through a course evaluation form (Appendix 3).

7. Learning and Development Plan for 2011/12

Priorities for 2011/12 are:

- 1. To deliver NVQ/QCF training within Donor Services in line with the corporate plan**
- 2. To deliver management development training to equip managers with the relevant Knowledge, Skills and Behaviours**
- 3. To trial a roll out of 360 degree appraisal for SMT members**
- 4. Ensure the development and roll out of team development plans for staff in all departments**
- 5. To endeavour to fund all PEQ requests received by the 11/12 deadline**
- 6. To support registered staff through CPD activities**
- 7. To continue to provide mandatory training**

8. Glossary of Terms

Corporate Plan-The corporate plan within NIBTS is available to download from the staff intranet. The corporate plan sets out the vision for NIBTS for the next 3 years.

Business plan-The business plan sets out the objectives for the organisation for the next year.

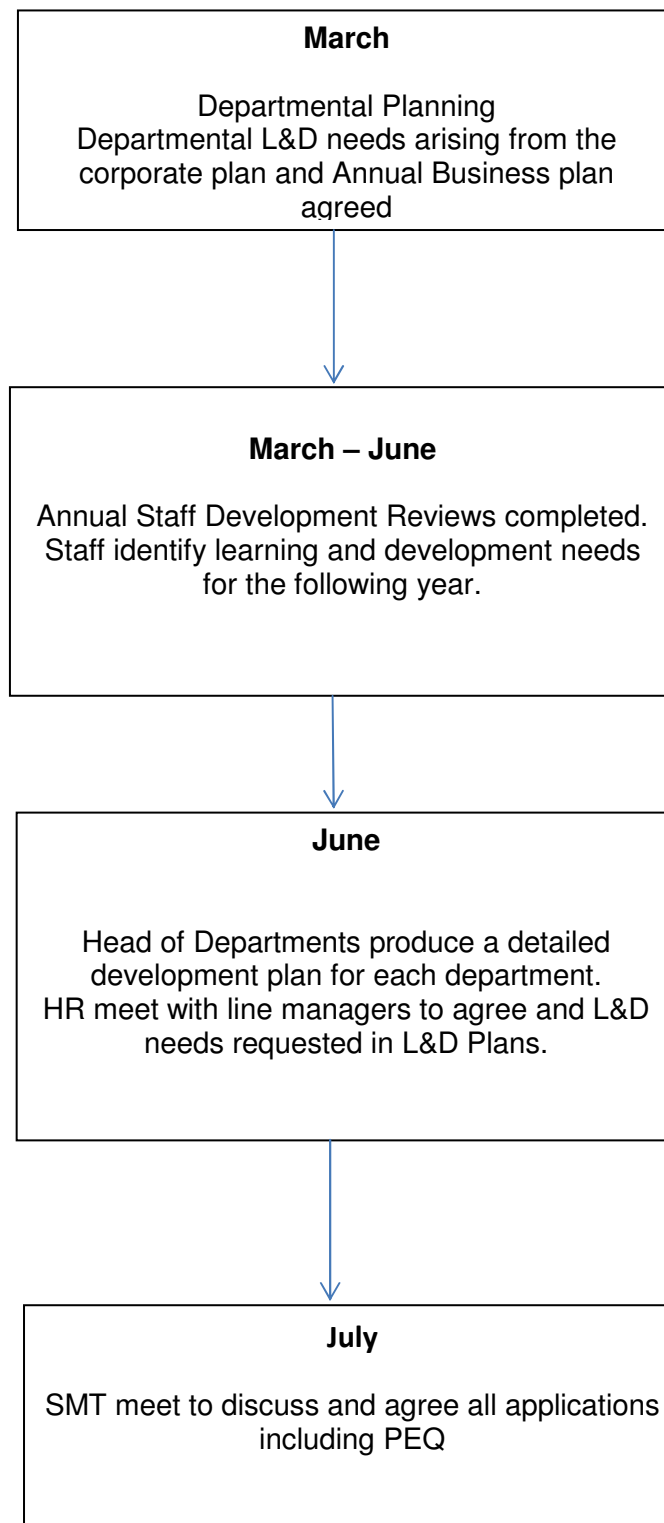
KSF Process-The Knowledge and Skills Framework (KSF) process is a regional framework which sets out standards that must be followed within the NHS and HSC with regard to the Staff Development Review (SDR) process. This process was implemented as a result of Agenda for Change initiative.

Staff Development Review (SDR)-Each year every member of staff will have a SDR with their manager. The aim of this review is to identify learning and development needs for the individual and discuss objectives for the year ahead.

Team Development Plans-Each department will be required to complete a team development plan which includes development needs that have been identified for more than one individual.

KSB-Knowledge, Skills and Behaviour are the agreed set of skills required by managers within the organisation.

CPD-In many professions, registering bodies require individual registrants to provide evidence of CPD activity they have undertaken within a defined timeframe. Some registering bodies require their registrants to demonstrate they have completed a certain amount of CPD usually expressed in hours per year. CPD consists of a wide range of activities including, but not exclusively limited to: reflective practice; mentoring; project work in the workplace; on-the-job training; reading; job shadowing; formal education and/or training programmes.

Appendix 1: Learning Needs Analysis Process

Appendix 2



Appendix 3**COURSE EVALUATION FORM**
DD:300:02:NIBT

NAME : _____

DEPARTMENT : _____

BAND/POSITION : _____

Course Attended : _____

Trainer: _____ Date Attended: _____

1. Why did you attend this course ?

2. What did you enjoy most/least about the course?

3. What topics would you have added/deleted?

4. What did you gain from attending this course?

5. How do you feel attending the course will influence your job?

6. Was the course? (Please circle to indicate).

Too long Too short.
 1 2 3 4 5 6 7 8 9 10

7. Was the course content? (Please tick to indicate).

Good

☐

Average

☐

Very Good

☐

8. How do you feel the trainer conveyed the information ? (Please tick to indicate).

Good

☐

Average

☐

Very Good

☐

9. Would you recommend this course to any other NIBTS staff? If so to whom and why?

10. Is there anything that could have been done better to meet the needs of trainees / NIBTS staff who have a disability?

11. Any other comments?

Signature: _____ Date : _____

Thank you for your help and co-operation

Line Manager comments:

Signature: _____ Date : _____

Appendix 4



Application for Post Entry Qualification

Personal details

NAME			
JOB TITLE			
DATE OF JOINING NIBTS			
DATE APPOINTED TO PRESENT POST			

Educational Qualifications

Please state qualifications presently held.

SUBJECT	LEVEL	DATE OBTAINED

Course Applied For

Qualification to be obtained					
Educational Provider (i.e. name of University / College)					
Length of course		Date course is expected to begin		Date course is expected to be completed	
Method of Study	Day Release / Night class / Correspondence / Other (If other, please give details)				
Is this a continuation of the same?			Yes / No		
Please state below					
(1) How the qualification is relevant to your job.					
(2) What benefits will this bring to NIBTS?					
(3) Was this course identified as a result of your P.D.P. (Personal Development Plan) at your KSF staff review?					
(1)					
(2)					
(3)					

Financial Assistance required

Please give precise costs below. Please do not leave blanks. If necessary write not applicable

Course Fees	
Travel Expenses	
Exam Fees	
Other (Please specify)	

Previous Funding

Have you received financial assistance for previous years for this course Yes / No

Have you previously received funding from NIBTS for a qualification? Yes / No If so, state?

Qualifications	Date Obtained	Method of Study

Applicants signature: _____ Date: _____

HEAD OF DEPARTMENT APPROVAL (SMT LEVEL)

I do / do not support this application for the following reasons:

Head of Department Signature: _____

Date received by HR Department : _____ Approved / Not
Approved

Date applicant notified _____

NB ONLY APPLICATIONS THAT HAVE BEEN FULLY COMPLETED WILL RECEIVE CONSIDERATION FOR UP TO 75% FUNDING. INCOMPLETE APPLICATIONS WILL BE RETURNED.

Key Change From Previous Revision:

Revised Format.

The Document Code identifier has changed from 09:01:HRS:002:NIBTS to 09:PE:003:01

1 RESPONSIBILITY

The HR & Corporate Services Manager will be responsible for reviewing and updating this procedure as appropriate.

The Senior Management Team will review each application (DD:397) for Post Entry Training in line with the organisations Equal Opportunity policy (Pol:PP:006).

2 INTRODUCTION

For the purposes of this scheme post entry training means studying/training (including research), which leads to the attainment of an academic qualification or membership of a professional body. The subject of study will have a direct bearing on the employees normal work or will be of benefit to the Service.

It is the policy of the Northern Ireland Blood Transfusion Service to maintain, promote and develop the skills and knowledge of the staff in both the performance of their current duties and with a view to their potential career progression. It is therefore necessary to establish a procedure for granting of leave and expenses for post entry training.

2.1 This procedures will apply to all staff.

2.2 This procedures will not apply to study, which is a statutory requirement of the post held.

2.3 The granting of leave and expenses shall be at the discretion of the Service. Neither leave nor the reimbursement of expenses can be claimed as a right.

3 HEALTH AND SAFETY

There are no specific health and safety implications involved in implementing this SOP, however, where relevant, full Health and Safety risk assessments and COSHH assessments will be undertaken.

4 MATERIALS

College / Course Prospectuses

5 PROCEDURE

5.1 Criteria for Leave and Expenses

When costing applications for leave (paid or unpaid) and the possibility of reimbursement of expenses, the Senior Management Team will review each case individually on its merits.

The following factors will be taken into account when applications are reviewed:

- (a) All applications (DD:397) must be fully supported by the appropriate Senior Manager.
- (b) A clear relationship between the aims of the course, the individual, the job and the organisational needs has to be established.
- (c) Opportunities or lack of them for the applicant to add to his/her knowledge of the subject should be considered.
- (d) The needs of the service where leave is requested are paramount.
- (e) Any previous study leave / support afforded to the applicant will be taken into account. Second or subsequent years of attendance are conditional on a satisfactory level of attainment and are at the discretion of the Senior Manager.
- (f) Any applications resulting from personal performance reviews or business plans will be given special attention.
- (g) All applications involving course fees, travel etc may be subject to the availability of training funds (in particular higher cost courses).

5.2 Reimbursement of Expenses

When granting approval, the Senior Management Team will review each case individually on its merits.

The normal rate of reimbursement is up to 75% for all “relevant course expenses” defined as:

- Course fees
- Registration and examination fees
- Excess travelling expenses
- Text books up to a maximum of £50.00
- Residential course expenses

NB Every effort should be made to borrow books from libraries or purchase second-hand from other students or with on-line bookshops

5.3 Miscellaneous

5.3.1 **Day Release**

Leave should not exceed the equivalent of one whole day per week during the period of the course of instruction.

5.3.2 **Open University Courses**

Paid leave will be given to attend Summer School conditional upon the course of study being work-related. Funding in such instances should be sought from the local Education and Library Boards.

5.3.3 **Correspondence Courses**

in 5.3.2 above). Including on-line and distance learning courses (excluding those in 5.3.2 above). Conditions of approval as in accordance with paragraph 4 outlined above. Reimbursement of expenses similar to those outlines in 5 above.

5.3.4 **Night Classes**

Conditions of approval as in accordance with paragraph 4 outlines above. Reimbursement of expenses similar to those outlined in 5 above. Time off in lieu will not be granted for night classes.

5.3.5 **Further Degrees**

Defined as Post Graduate Degrees/diplomas e.g. Post Graduate Diplomas, MAs, M.Sc, Phds.

5.3.5.1 Applications to undertake further degrees will be considered by the Chief Executive.

5.6 Attendance

Where approval is granted for time off for attendance at courses, evidence of satisfactory attendance may be requested by the participants Manager.

5.7 Time Off for Study Leave

Applicants who require time off for study as part of their preparation for an examination must already have had approval to undertake the course. No time off can be given where applications have been turned down.

The maximum time off will be as follows: -

Study leave / exam preparation	- 1 day for each examination, up to a maximum of 3 days
Attendance at the examination	- 1 day for each examination (where these are held one a year) - ½ day for each examination (where held twice a year i.e. each semester)
Evening examinations	- ½ day for each exam

5.8 Staff Who Undertake Lecturing / Training Sessions

From time to time staff from the Northern Ireland Blood Transfusion Service may be invited to other hospitals or academic institutions to provide lectures, talks or training sessions. There may be benefits for NIBTS in developing links with other institutions and organisations.

Heads of Departments should be consulted in advance as attendance at sessions outside NIBTS is discretionary. The demands of providing a service must always take precedence.

Staff who give lectures and talks who are acting as representatives of NIBTS should arrange to have NIBTS reimbursed at least for the cost of their time. Fees should be remitted to NIBTS where lectures / talks are given during working hours.

Staff may opt to take annual leave for outside training activities in which case fees will be retained by the individual.

Where staff are acting as representatives of NIBTS on NIBTS business normal terms of employers liability insurance will apply.

5.9 Human Resource Advice and Support

If there are any queries arising from post entry training, guidelines or applications, or where general advice is required, contact should be made with the Personnel & Training Manager.

Appendix 6**Northern Ireland Blood Transfusion Service****Corporate Training Policy****1 Introduction**

This Policy should be read in conjunction with the Knowledge and Skills Framework (KSF) Policy (ref Pol:PP:021) which is central to the Agency's commitment to the staff review process.

The policy sets out the training requirements in NIBTS with respect to compliance with relevant legislation and regulations.

Under the Blood Safety and Quality Regulations 2005/50 there is a legal responsibility that staff are qualified for tasks which they perform. There is also a requirement that training is periodic, timely and relevant and that there is practical assessment of the effectiveness of training.

NIBTS also requires to comply with the requirements of the Human Tissue Authority with respect to the Belfast Cord Blood Bank. With respect to the laboratory diagnostic service NIBTS must meet the standards for Clinical Pathology Accreditation. A common approach to training will be applied for all departments thus ensuring compliance with all legislation and regulations affecting the Service's activities.

This training policy sets out the resources, responsibilities and links to other procedural documents and specific BSQR requirements in relation to training.

This policy has supporting SOP documents detailing arrangements for training across departments within the Service. These are listed as follows:

- 1) SOP on Training for Donor Services, Author: Donor Services General Manager
- 2) SOP on Training for Laboratory Services, Author: Laboratory Manager
- 3) SOP on Training for Quality Department, Author: Quality Manager
- 4) SOP on Training for HR & Corporate Services, Author: Head of HR & Corporate Services
- 5) SOP on Training for Finance and IM&T Services, Author: Finance Manager

Complying with BSQR is necessary to maintain the NIBTS Blood Establishment Authorisation Licence. This corporate training plan sets out the resources, management responsibilities, links to other procedural documents and specific BSQR requirements in relation to training.

2 Resources for Training

Current dedicated resources are a Band 5 Training Administration Manager in Corporate Services and a Band 7 Laboratory Training Officer in Laboratory Services. Other identified resources are training responsibilities contained within the job descriptions of various line managers and section heads.

3 Responsibilities for Training

Each member of staff has responsibility to maintain his/her training record. The section head or line manager will oversee staff members' training record. The training record may be stored by the member of staff or the line manager. This detail is specified in the relevant department SOP. Oversight of training is provided by the Training and Clinical Audit sub-group of the Clinical Governance and Risk Management Committee.

4 Good Manufacturing Practice (GMP) Training and Assessment

There is a BSQR requirement for all staff to receive GMP awareness training and assessment. At induction new staff should receive GMP awareness training within two weeks of commencing employment. This applies to all staff but GMP training awareness and assessment will be tailored as appropriate to the staff group or individual staff member. For example laboratory staff will be expected to have a more detailed knowledge of equipment maintenance schedules, calibration, reporting of deviations etc and an administrative and clerical member of staff will be required to be trained and assessed on SOPs and use the incident reporting system appropriately. The organisational requirement for provision of GMP training and assessment is annual and should be certified. The area of GMP training to be provided will be determined by information gathered in other areas such as incident reports and audits. The certificate should be entered into the staff members' individual training record.

5 SOP Training

New SOPs should be trained within 4 weeks of issue. Priority is given to training of new staff and where SOPs vary significantly from the previous existing version. It may be justified on the basis of a risk assessment to lengthen this time line especially for experienced members of staff and where SOPs change very little. This detail will be specified in the relevant department SOP. This is the responsibility of the line manager/section head and the decision should be documented and be accessible to the Quality Department. This detail will be specified in the relevant department SOP.

A list of SOPs should be entered into the staff member's individual training record with an assessment framework supporting this.

6 Assessment Framework

Staff training should be assessed to give assurance that training is effective. There are various assessment tools which may be used and the following are suggested for consideration.

Participation in National External Quality Assurance Scheme exercises.

Internal quality assurance exercises.

Written assessment of training provided.

Visual assessment or observation of tasks being performed.

Oral questioning of staff member after training.

Ongoing monitoring of staff performance.

Review of quality incidents related to 'training post'.

The assessment framework should be appropriate for the staff group or individual staff member. For example, for a laboratory assistant in component processing assessment on the use of the Compomat and filtration of red cells by direct observation would be appropriate and for blood collection staff who undertake personal donor interviews a written assessment with a predefined pass mark threshold is recommended.

It is not expected that every SOP is assessed every time but the assessment framework should be scheduled and informed by risk assessment.

Competency assessments should be entered in the individual staff member's training record.

7 Training Records

Individual training records are required and should contain the following elements. Essential elements are in bold type.

- 1 **Induction programme - induction programme should include GMP awareness training.**
- 2 **Job description.**
- 3 **GMP training and assessment.**
- 4 **Relevant SOPs.**
- 5 **Assessment of relevant SOPs.**
- 6 **Mandatory training e.g. fire safety, manual handling, data protection etc**
- 7 CPD portfolio for certain professional groups e.g. biomedical scientists and nursing staff.
- 8 **Training programme.**
- 9 Personal development review records.
- 10 Optional curriculum vitae or academic history.

8 Individual Training Programme

Each staff member should have an individual training programme informed by his/her KSF staff development review. This will identify training gaps and training needs for the following year and will include attendance at courses, conferences, professional development through development of new techniques, involvement in validation projects etc. Note there is a separate requirement for certain professional groups e.g. biomedical scientists and nurses to maintain registration with their professional bodies which includes participation in Continuous Professional Development (CPD) which is subject to periodic audit and review by the relevant professional body – Health Professions Council and Nursing and Midwifery Council.

9 Timelines for Training and Assessment

Staff should be trained and assessed on new SOPs within four weeks of issue. Staff members who have had absence of greater than 6 months should be trained on existing SOPs within four weeks of return to work. Where there is cumulative absence of 6 months in the preceding 12 months staff members should be trained and assessed on existing SOPs before 4 weeks.

It may be justified on the basis of a risk assessment to lengthen this time line especially for experienced members of staff and where SOPs change very little. This is the responsibility of the line manager/section head and the decision should be documented and be accessible to the Quality Department.

Written by: I Ritchie, Head of HR & Corporate Services

Signature: _____ **Date:** _____

Authorised by: Dr K Morris, Chief Executive