

**Training Policy**

Introduction

PRISM Independent School and Youth Project recognise that staff are its most important resource. It is therefore committed to the training and development of its entire workforce so that they gain the necessary skills to reach their full potential. This commitment will be evidenced by an annual training calendar published and reviewed each year.

Principals

PRISM’s ongoing training package will assist in enabling the organisation to achieve its aims and objectives through a well-trained and supported working team. By increasing the skills and knowledge of its staff the organisation will produce confident, highly qualified staff working as an effective and efficient team.

The training and development needs identified will be met through a variety of activities depending on the nature and extent of the requirements deemed necessary after assessment.

PRISM recognises the need for both Management and employee led training. Training needs are identified through:

* Qualification and training audit – reviewed annually in line with the appraisal process
* Mandatory training e.g. safeguarding, H&S
* Induction Training
* Personal needs – identified using the personal training and development form, appendix 1

As part of the organisation’s continuing commitment to training and development, employees are required to provide evidence of successful completion of the training along with feedback on the value and effectiveness of the training and development they undertake (Appendix 2). This evidence and information will be:

* Held in the employees’ CPD and centrally in personnel files
* Used to assess and improve the training process
* Used to record mandatory training dates to allow employees to be informed of expiry/re-qualification dates.

This policy respects equal opportunities and applies to all employees.

**Appendix 1**

**Personal Training and Development Form**

**Part A**

|  |  |
| --- | --- |
| Name  |  |
| Job Title |  |
| Course Title |  |
| Provider |  |
| Time Commitment Required |  |
| Cost |  |

**Part B**

|  |  |
| --- | --- |
| What additional skills, knowledge or competence will be gained from the training? |  |
| How will these improve your performance or contribute to the organisation? |  |

**Approved by Manager**

|  |  |  |
| --- | --- | --- |
| Yes | No | Reason: |
| Date due for evaluation  |  |  |

**Signed and dated:**

* **Manager**
* **employee**

**Appendix 2**

**Training Evaluation Form**

**Part A**

|  |  |
| --- | --- |
| Name: |  |
| Topic of Training |  |
| Date of Training |  |
| Venue |  |

Part B

|  |  |
| --- | --- |
| What were your expectations prior to the training? |  |
| Were these met? |  |
| List 3 learning outcomes from the training and explain how they will be embedded into your practice? |  |

Part C

|  |  |
| --- | --- |
| Actions from training | Completion Date |
|  |  |
|  |  |
|  |  |

Please send a copy of this form to your line manager, the trainer (if training is internal) and place a copy in your PDP. Attach a copy of evidence of completion e.g. certificate.