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Blue Triangle (Glasgow) Housing Association Ltd

Development and Training Policy

HR 004 REV 1

30 March 2017

Our Mission Statement

“Blue Triangle exists to support, accommodate and assist vulnerable people achieve better lives.”

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Revision history

Rev No.	Rev. Date	Consultation Requirements (See Section 4 – Consultation)	Lead Officer	Committee	Approved by COM
0	2005*		DS		
1	2016	Board/senior staff	DS	HR	30 Mar 2017
2	2019	Board/senior staff	DS	HR	

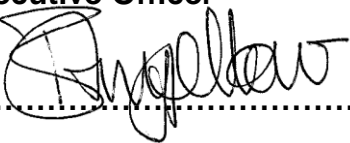
***normal cycle for policy review is every 3 years**

Chairman

Signed: .....

Dated: 30 March 2017

Chief Executive Officer

Signed: .....

Dated: 30 March 2017

Section 1 Introduction

1.1 Rationale for the policy

This policy describes Blue Triangle (Glasgow) Housing Association's approach to staff development. Staff development includes training but also covers induction and on-going learning.

We recognise that individual staff members have varying developmental needs and that these needs are subject to change. Our training programmes are, therefore, ongoing and subject to development and change. This also ensures that staff knowledge and skills are maintained to require Association standards.

1.2 Risk assessment statement

This is an area of medium risk to the Association as it is critical that we monitor training and development needs appropriately particularly in relation to changing needs of our client group and also our local authority requirements for service delivery to vulnerable people.

1.3 Policy context

This policy explains our commitments in respect of staff development. It is important to emphasise that we regard staff development as an investment and not as a cost. We develop policies and procedures in order to give clear guidance to staff teams on legal issues, best practice, and consistent standards of service ensuring skills are increased in all relevant areas around service delivery. It is essential that comprehensive training is provided on policies and procedures to ensure that knowledge and skills are maintained at levels which enable high quality consistent services to be delivered. As the employer of a regulated workforce, it is important that we provide regular training and support around the standards of practice and behaviour expected both by us as an employer and staff as workers. Staff also receive support and guidance around the National Care Standards which determine the expected standards for service delivery to our service users. Our own standards of service delivery exceed that expected by the National Care Standards in line with the expectations on staff to commit to our values and to provide a high quality service to our service users.

Section 2 Legal and regulatory standards

The standards referred to in this section have been taken directly from each Regulator's guidance. Each Regulator has written their guidance according to the audience being addressed: service user, staff or board member.

2.1 Legal framework

Regulation of Care (Scotland) Act 2001 (which created both the Care Inspectorate and its regulation requirements and also the SSSC and its regulation requirements)

2.2 Regulatory standards: the Scottish Housing Regulator (SHR) (Governance and Financial Management)

Regulatory standard 1

The governing body leads and directs the RSL to achieve good outcomes for its tenants and other service users.

Regulatory standard 2

The RSL is open and accountable for what it does. It understands and takes account of the needs and priorities of its tenants, service users and stakeholders. And its primary focus is the sustainable achievement of these priorities.

Regulatory standard 2.3

The RSL seeks out the needs, priorities, views and aspirations of tenants, service users and stakeholders. The governing body takes account of this information in its strategies, plans and decisions.

Regulatory standard 5

The RSL conducts its affairs with honesty and integrity.

Regulatory standard 5.2

The RSL upholds and promotes the standards of behaviour and conduct it expects of governing body members and staff through an appropriate code of conduct. It manages governing body members' performance ensures compliance and has a robust system to deal with any breach of the code.

Significant performance failures

The Scottish Housing Regulator (SHR) has a duty to consider issues raised with them about "significant performance failures". A significant performance failure is defined by the SHR as something that the landlord does or fails to do that puts the interests of its tenants at risk, and which the landlord has not resolved. That is something that is a systemic problem that does, or could, affect all of a landlord's tenants. Examples of a significant performance failure could be if social landlords are not:

- delivering the outcomes and standards in the Scottish Social Housing Charter over a period of time; or

- achieving the regulatory standards on governance or financial management.

2.3 OSCR (Office of the Scottish Charity Regulator

The Targeted Regulation Framework

You must act in the interests of the charity (standard 1)

You must act with care and diligence (standard 1.2)

- You have to protect your charity including its beneficiaries, assets and reputation. This means understanding and assessing potential risks to make sure decisions are as robust as possible.

2.4 The Scottish Social Housing Charter

Social Landlords manage their businesses so that:

- Tenants and other customers find it easy to participate in and influence their landlord's decisions at a level they feel comfortable with.

Scottish Social Housing Charter Indicators

There are no relevant Scottish Social Housing Charter Indicators

2.5 Regulatory standards for housing support: the Care Inspectorate

You experience good quality housing support. This is provided by management and staff whose professional training and expertise allow them to meet your needs. The service operates in line with all applicable legal requirements and best-practice guidelines **(standard 3)**.

You can be confident that the staff providing your housing support have the knowledge and skills gained from the experience of working with people whose needs are similar to yours. If they are new staff, they are being helped to get this experience as part of a planned training programme **(standard 3.3)**.

Section 3 Policy content

3.1 Staff Development Defined

Staff development includes a number of elements including induction, training and staff learning. These issues are explained in separate sections. The main purpose of staff development is to ensure that staff:

- meet the required job standards
- have the opportunity to develop personal skills and abilities

We also recognise that learning is an essential part of staff motivation; this, in turn, is part of our commitment to developing our organisation and its staff to ensure that we provide quality services to all service users.

Our staff development programme includes the following elements:*

- Induction both organisational and locally
- Needs assessment
- Training and education
- Validation and evaluation
- Staff supervision.

* These elements constitute what is known in theory as the “Training Cycle”; this covers all elements necessary to achieve quality training.

We recognise that staff development is an ongoing process that allows managers and staff to:

- Identify learning needs
- Agree appropriate development programmes
- Understand the benefits to service users, staff and the Association.

Given that staff development is necessary to achieve effective working practices, we recognise it as being part of normal work practice. Therefore, staff are required and encouraged to participate in relevant learning programmes as part of their terms of employment and role within the association.

3.2 Policy Principles

We provide comprehensive training to staff on a wide range of topics, including training on legal and good practice guidance requirements. For example, we provide training on social care legislation and equality law, as well as organisational policies.

We base training on needs assessments of individual staff. Although training relates mainly to work issues we may also include training associated with personal development. For instance, we provide training on management of aggression which reinforces personal assertiveness techniques and develops self-awareness.

We provide a broad range of development opportunities relevant to the staff member’s role from general training sessions, to the development of specific management skills and specialist topics such as social care theory and practice, including a modular development system allowing for role progression throughout the association and for leadership development.

We use a number of external training organisations to provide quality training that offers value for money.

We monitor the effectiveness of training through our evaluation systems, as well as through our staff supervision system.

We encourage staff to study for formal qualifications relevant to their particular post such as NVQ awards.

We support staff seeking to become members or associate members of an appropriate professional body.

We provide regular training for Committee Members, including induction and participation at relevant training events.

We monitor levels of training for individuals over time to ensure that there is regular refresher training provided on many mandatory topics alongside tailored training to build on the individual training gap analysis.

We encourage service users to identify training which would assist them move on to independent living.

Section 4 Consultation

Section 54 of the Housing (Scotland) Act 2001 stipulates a requirement of RSLs to consult their tenants on policies and procedures which significantly affect their tenants. BTHA has no tenants but considers this a right which should be given to its service users. The occupancy agreement that we use, therefore, includes a clause which indicates our commitment to consult with service users.

The regulatory standards (Care and Housing) also stipulate that service providers should have robust consultation processes in place in order to comply. This means that if there are proposals or policies which could significantly impact on service users such as those in relation to housing management, repairs and maintenance or more strategic changes that we endeavour to notify service users/residents of this and listen to any concerns. The main vehicle for this will be our service user's forum.

We also operate a policy on consulting with staff and taking feedback on board. Service users and staff will not be consulted on all policies – an assessment will be made at policy review as to what level of consultation (if any) will take place.

Section 5 Monitoring and review link with KPIs

Policies will be reviewed on a three yearly cycle by the Committee of Management according to a policy programme provided on an annual basis at the start of the financial year. All policy reviews will take into account our Equality Impact Assessment toolkit requirements. Committees will report on performance to committee of management at the end of the year. We use a small number of key performance indicators (KPIs) which monitor critical success factors. Our policy monitoring

framework tracks any policies which impact on KPIs. Other policies may have indicators which are monitored at departmental level.

The policy and its implementation will be reviewed by the Committee of Management

Section 6 Publishing and availability of policy

This policy is available in electronic format or hardcopy to all staff, service users, Committee members and other customers, as appropriate.

Section 7 Accessibility

We are committed to promoting accessible services that address the needs of individual service users, as appropriate. For example, our policies can be provided in other formats such as in larger print or in audio-format.

Section 8 Other relevant policies and procedures

The Association has a wide range of policies covering corporate services (covers the entire association) and operational services (covers only specific operational areas). It is important that this policy is not viewed in isolation but consideration is given to the wider context in which it operates.

Section 9 Complaints

We follow the Model Complaints Handling System that has been developed by the Scottish Public Services Ombudsman (SPSO). This is a comprehensive procedure that allows for complaints to be dealt with in either one of two stages.

Complaints must be dealt with in line with set timescales so that complaints are dealt with quickly.

If still dissatisfied after Stage 2 has been completed, a dissatisfied customer can take their complaint to the SPSO.

Any service user wishing to complain should ask for a copy of our complaints procedure. A service user, alongside their right to complain to the SPSO, can also complain to the Care Inspectorate, the Local Authority or other commissioner of the service, and they may have the right to complain to the Scottish Housing Regulator. To take their complaint further, a service user generally needs to go through our internal complaints procedure in the first instance.

Section 10 Equality Impact Assessment

Equality Impact Assessments are required when developing or amending or reviewing policies. This is to ensure that the impact of any policy is understood in terms of EO requirements.