IT Services
2020/21 Training Strategy
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Version Control

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Document Control

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1. Introduction

1.1. The Training Strategy and Training Programmes have evolved year on year in line with the GP IT Operating Model updates. A new approach to end user training is now required, utilising blended learning techniques to address individual skills gap needs. A new Training Needs Analysis (TNA) was carried out, that identified skills gaps across different CCG's which were similar and that, with changes in the training approach, would enable the training team to cover more efficiently, using webinars and video's to deliver training. Where more in-depth refresher training is identified, this can be delivered either in shared group sessions or by in-practice training. There will still be a need for GP IT core and mandated services (Appendix A -) example New Starter training; as well as Local Digital Roadmap needs and National training programmes/rollouts, with SLA days/time ring-fenced for these activities.

1.2. A Blended learning approach will enable training and support to be delivered across the wider CCG areas, reducing duplication of work with better utilisation of training resources.

1.3. System optimisation training is becoming a bigger focus, with most CCG's and GP Practices utilising experience from the training team, high-preforming GP Practices and other resources, to agree best practice models and streamline system use to make patient experience better.

1.4. The Training Strategy and Training Programmes will encompass the following criteria in deciding the use of the agreed service days, ring-fenced where required:

- LDR priorities

- Training courses as identified from the TNA – BAU core services, as per the Securing Excellence in GP IT Services Operating Model 2019-2021

- Supporting practice mergers and migrations including any development work.

- Training maintenance and development work – this is the work needed to maintain and update core materials, develop new course materials and establish new modes of delivery e.g. tutor notes, training hand-outs, video's, e-learning, webinars and user guides, quick reference guides and any other training materials as per the Securing Excellence in GP IT Services Operating Model 2019-2021

2. Purpose

2.1. The purpose of this Training Strategy is to outline the amended IT Training and Support service delivery model, which will link into an agreed training programme that will detail how service days will be utilised during 20/21.

3. Scope

3.1. The function is available to users operating under GMS, PMS and APMS contracts, provided they:

- Are contracted to provide Primary Care Essential Services to a registered patient list
- Have signed the CCG Practice agreement

3.2. The function may be available to other services and users provided the request has been agreed via the work reception process.

3.3. 'In scope' services that are documented in the service portfolio.

3.4. The scope does not extend to:

- Services or users that do not have a current SLA or agreed statement of work to support the work or service request
- GP data quality service elements:
  - Data extractions and national audits e.g. ACG, GPES, CQRS, NDA
  - General reporting
  - Data migrations as part of system deployments
- Beta testing of resources created as part of a service request

4. Objectives

4.1. Implement initiatives aimed at improving efficiency:

- Work at scale e.g. sharing of resources, ideas and concepts
- Increase use of blended[1] and micro learning[2] approaches that address skills and knowledge gaps
- Enhanced evaluation and quality assurance methodologies to support a 'do it once, do it right' approach i.e. reduce rework
- Reduce the number of ad hoc service requests i.e. refresher training, whilst increasing the number of end user support service requests

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[1]   Combining learning methods i.e. classroom training, learning technologies, etc.
[2]   Servicing training needs in small learning units.

4.2. Deliver training requirements identified in this training strategy on time and within agreed resource levels.

4.3. Manage work and service requests within a defined process.

4.4. Improve the reporting methodology

- Support the design of tools to capture time spent on different activities
- Manage service day utilisation to avoid over and under utilisation
- Analyse activity to predict trends
- Design the evaluation model to incorporate Kirkpatrick's Model of Evaluation

4.5. Maintain subject matter expertise across GPSoC clinical systems, national and other services. Plan all team development in line with predicted demand.

5. Benefits

5.1. Employing efficiency measures to free up service days will optimise availability; reallocating services days in support of work requests.

5.2. Sharing concepts, ideas and resources will reduce replication and will facilitate the sharing of 'best practice'.

5.3. Delivering training on time and within agreed resource levels will ensure the objectives within this training strategy are achieved.

5.4. Maintaining subject matter expertise will ensure the function is capability of meeting current and future service requests.

5.5. Implementing an evaluation methodology may realise further benefits that have not yet been identified.

6. Assumptions

6.1. Apportioning service day allocations according to CCG population (%) is an appropriate method to ensure that distribution is fair and equitable.

6.2. Planned service day utilisation has been calculated using service requests received between April 2019 and March 2020 and extrapolated across a 12 month period (Appendix B -).

- New staff training requirements are based on one request equating to one day
- Refresher training requirements are based on a request equating to ½ day
- Resource creation requirements are based on a request equating to one resource for each system (EMIS, TPP and Vision) can be completed in one day

- A true reflection of service day utilisation will become apparent during the course of the year and any disparities can be managed via the reporting methodology and governance mechanisms

- A 10% tolerance is required for each work activity to offset the lack of available data.

6.3. Practices will disseminate the TNA to their staff and we expect a 50% practice response rate will be achieved.

6.4. Sufficient budget will exist to pay for non-staff costs.

6.5. End users will be receptive to the efficiency measures being used to providing greater access to the function.

6.6. Training programme phases will achieve a 30% response rate.

6.7. Suitable no-cost venues can be identified and made available for classroom based training events.

6.8. The TNA will provide sufficient data to create a role-based training matrix.

6.9. Access to a web presence will be possible for the dissemination of training material and resources.

7. Training Needs Analysis

7.1. The TNA (refresher training) is designed to identify skills and knowledge gaps on a range of tasks. Analysis on this data would determine blended and micro learning approaches. The design and content of the TNA is subject to prior approval.

7.2. Respondents' are to choose the role that closely matches theirs; this information will be used to develop a role-based training matrix.

7.3. TNAs are distributed annually via Survey Monkey and practices will be asked to disseminate to their staff for completion.

8. Training Approach

8.1. The training delivery model incorporates a number of programmes, each adopting its own approach with allocated service days (As shown in the Training plans). The agreed service days will be utilised across the whole year and an average monthly usage will apply, unless agreed as part of the Training Programme.

Allocation of days to LDR priorities will need to be reviewed regularly, in order to ensure a smooth consumption profile/ run-rate for training days throughout the year. SCW do not

have the resources to be able to deliver on projects that are left to the end of the financial year unless they are included in the Training Programme. We will reflect on lead in times for booking training and provide further advice to the CCG as required. Training needs to be allocated to agreed delivery objectives and booked ahead, proactively managed so that resources are committed to supporting the CCG's prioritised activities, and so that the CCG benefits from investment in the training service.

- Training consultancy is available when expert advice and guidance is required on supported clinical systems.

- System optimisation and data quality will support the exploitation of advanced system functionality and the creation of data quality improvement plans.

- End user support provides users with the opportunity to raise training related issues for systems they have previously received training on. The support desk facility is in operation during office hours.

- The refresher training programme provides training for existing staff on existing systems; with priorities derived from the TNA and delivered in phases throughout the year using a variety of blended and micro-learning approaches.

- The new staff training programme provides training for new staff on existing systems. Training will be provided using a mix of classroom and onsite role-based training. Evolution of this programme should incorporate blended and micro learning approaches.

- Requests for training on Microsoft Office applications will be directed, in the first instance, to the IT Skills pathway, where registered learners can complete online learning. Further requests will be managed, where possible, using classroom based training.

- The resource creation programme supports the development of pre-formatted items e.g. clinical and document templates, searches, etc. All requests are subject to approval and validation processes prior to the service request being raised. Completed resources will be returned to the requestor after successful Alpha testing and when they are ready for Beta testing.

- Deployment training is a project orientated programme that supports practices as they migrate from one principle clinical system to another or merge with another practice.

- The new systems / new functionality training is a project-orientated programme that supports projects where new functionality is being added to existing systems or new systems are being implemented.

8.2. Training design, methods and delivery will employ flexible and appropriate methods, taking into account learners' needs, the nature of the course content and service day utilisation.

- Training to be enhanced by learning technologies (blended learning) and to incorporate micro learning in order to facilitate effective learning techniques.
  - Webinars, workshops and seminars are best suited where a small amount of information needs to be disseminated to many people in a relatively short time
  - E-learning / videos are ideal for enhancing the learning experience where time or service days are limited and where training material should be reused
  - Classroom style training can be applied to hands-on training for multiple delegates
  - Onsite training can be applied to hands-on training for multiple delegates and will be incorporated when necessary

8.3. Training programmes should offer the flexibility to respond to capacity, demand and the CCG's change in priorities, whereby courses / phases can be accelerated, extended or paused, depending on the circumstances and as agreed.

8.4. Access to any of these programmes will be via service or work requests.

9. Resources

9.1. Utilisation of service days is outlined in the Training plans with further explanation to be found in the draft SFIA role profiles defined in Appendix B - .

9.2. The following equipment is required to assist the provision of the function:

- e-learning authoring tool
- Survey Monkey for TNA
- Service Desk platform
- GPSoC demo clinical systems and licences (EMIS, Docman, TPP & Vision)
- Online meeting / training platform (Webex)
- Remote access software for virtual desktop support to end users
- Training laptops / Projectors
- Learning Management System
- Web Presence / Repository

9.3. Test patients will be used where it is necessary for training to be delivered in 'Live' environments. Patient data in training environments will be configured to facilitate the learning experience.

9.4. Training courses will have an approved course plan created by SCW Subject Matter Experts (SMEs). Course plans will outline the aims, objectives, trainer and learner activities,

resources and assessment methods. Course plans will form a key part of the assessment, evaluation and quality assurance methodologies.

- The following training materials will be provided:
    - Course plans
    - User guides
    - Quick Reference Guides
    - E-learning courses (where appropriate) or videos
- All training material will be available for sharing and dissemination

10. Assessment

10.1. Course plans will have aims and objectives linked to assessments. Learners' will be assessed using formative and / or summative techniques.

10.2. Learners' to be provided with constructive feedback on their progress and supported with next steps (if appropriate).

10.3. The Compliments and Complaints procedure will document how delegates may contest assessment results.

10.4. The assessment methodology will be linked to the Kirkpatrick Model of Evaluation.

11. Evaluation

11.1. Course evaluation will take place throughout the learning cycle; allowing for continuous improvements in the quality of training and will follow the Kirkpatrick Model of Evaluation:

1. Delegates' reaction to the training / learning experience
2. Evidence of learning
3. Whether delegates applied the learning back in the workplace
4. The effects resulting from the delegate's performance
5. Return on investment

11.2. Trainer evaluation will take the form of Peer-to-Peer observations and self-evaluation.

12. Training Administration / Management

12.1. IT Training Administrators manage service requests, following procedures and process as defined in the IT Training and Support Administration processes documentation.

12.2. Time has been allocated to ensure service level management is closely monitored; ensuring service day utilisation is appropriate and on target. To make certain that standards maintained and the function is undertaking a continued service improvement plan.

13. Reporting

13.1. The reporting methodology will monitor progression of this training plan and on report activity. The IT Training Manager is accountable for ensuring reports are available by the second Friday of each month and KPIs on the forth working day.

13.2. Activities Summaries are submitted each month and will outline:

- Service day utilisation
- The number and type of service request received
- Course evaluations and feedback

13.3. The reporting methodology will also analyse training data establish any trends and manage accordingly.

14. Key Performance Indicators

14.1. End user satisfaction will achieve a minimum 80%.

15. Quality Assurance

15.1. Legislative and organisational polices will be adhered to at all times.

15.2. Trainers must have or be working towards a recognised training qualification, have equivalent training experience, or are being supported to deliver training to the desired standard.

15.3. Where provided, trainers must successfully complete Train the Trainer courses or have attained suitable knowledge and experience before delivering training. Trainer knowledge and competencies are recorded in the skills matrix and managed via their development plan. A Peer-to-Peer observation process will monitor and feedback on their performance.

15.4. Training courses will follow the course design process to ensure the application of learning principles. Prior to release, training material will be validated and approved to maintain consistency.

15.5. Assessment results will be used to improve the quality of courses and trainer efficacy. Trainers to undergo annual refresher training to keep their skills and knowledge current.

16. Stakeholders and Communications

16.1. The IT Training and Support marketing and communications plan will outline this approach. Below is a summary of the stakeholders affected by this training plan:

16.2. Clinical Commissioning Groups:

- Set priorities and to agree planned service day utilisation
- Provided with a monthly overview of activity and demand i.e. demonstrate how service deliverables and KPIs are being achieved and where required to approve changes the utilisation of service days

16.3. CCG Member Practices:

- To be apprised on the TNA design and content and the subsequent actions derived from its results
- Invited to attend clinical system user groups
- To be acquainted with what training and support is available

16.4. South Central & West:

- To collaborate with other services, specifically where crossovers exist with core and mandated services, and work requests

16.5. Third Party Suppliers:

- To develop working relationships with GPSoC clinical system suppliers and attend national user groups / conferences
- To maintain trainers' knowledge and skill levels in line with GPSoC clinical system developments

17. Risks

17.1. An unpredicted increase in service requests or the inability to provide adequate resources could result in users waiting too long for their requests to be resolved and consequently, users may discontinue using facility.

17.2. The TNA may result in a larger than expected number of skills and knowledge gaps that would take a greater number of service days to address, meaning that they may not be available to support other programmes.

17.3. The training and development of staff in this specialist role requires a significant investment, which, after spending significant resources developing staff they may not remain with SCW.

17.4. Practices may not be willing to release their staff for training events, where the location of the venue results in significant travel and additional time out of the practice. This could mean that some training programmes may not yield the planned delegate numbers to make this approach efficient.

17.5. If classroom based training is too generic, staff may not be fully trained or may return to their workplace requiring further training on the practice's processes.

17.6. Other risks identified will be managed via the risk and issue register.

18. Constraints

18.1. Access to the function is only available during office hours, but in the future support may be required out of hours.

18.2. SCW's service desk strategy and the subsequent standardisation of the service desk platform restricts further develop of the current solution and limits reportable data.

18.3. SCW's time recording tool does not allow for time to be recorded by work activities listed. This is currently under review.

18.4. Practice staff may not be available at peak / busy times e.g. March (QOF), therefore timescales need to consider these factors.

18.5. Some services are managed outside the control of the IT Training Manager, close collaboration is required to ensure service requests and work requests are not raised without due consideration on capacity and availability.

18.6. To provide training within localities, access to venues with appropriate infrastructure is required.

18.7. The potential impact of SNOMED is continually being assessed by SCW, and resource requirements will be modified in accordance with the latest updates from third part suppliers and NHS Digital.

18.8. Delivery of remote group training sessions are difficult when hands on access to training is required as the training domain don't work at GP Practices on individuals' laptops or PC's. It is also difficult to monitor that delegates are following as the ability to view multiple screens via a laptop screen or even on bigger monitors is difficult. New tools for remote group training are required allowing different ways of delivery.

19. Dependencies

19.1. A number of processes and tools need to be reviewed, defined or finalised:

- Non-staff costs plan
- Trainer development plans
- Communications and marketing plan
- Evaluation model
- Peer to Peer Observation process

- Course design process
- Resource creation process
- Administration processes
- Web presence
- Reporting methodology
- Service portfolio

19.2. Training environments need to replicate practice environments to support training courses.

19.3. Test NHS patients are required to train on some systems.

19.4. The acquisition of sufficient licences for training environments and laptops to provide classroom based training events.

19.5. Training material to be reviewed to ensure it is suitable for the new training approach.

19.6. Videos and e-learning material need to be created to support a more efficient service model.

19.7. To support resource creation, a process for approving and validating the request is required.

20. Lessons learned

20.1. TNAs that capture training 'wants' over training 'needs', as previous versions have, require greater levels of resource for the subsequent training programmes. TNAs must focus on skills and knowledge gaps, if training needs are to be addressed efficiently.

20.2. The role-based training matrix tend to be more time consuming for individuals to complete and so we have seen poor return numbers for these type of TNA's, this in turn means the data capture and analyse skills and knowledge gaps within staff groups and therefore the design of appropriate training courses is produced based on a smaller percentage of users.

20.3. The agreed training strategy and training program makes it easier to manage service day utilisation and sharing of resources across customers has meant better utilisation of Training SLA making it easier to manage demand within the confines of available capacity.

20.4. During 2018/19 there has been a significant increase in the number of work requests (non-core and mandated services). A defined process has been setup to differentiate between

service requests (core and mandated services) and work requests (any other type of request).

20.5. Current reporting tools now afford the opportunity to determine how much time is spent on different activities such as refresher training and new starter training; this makes it easier to understand how service days are being utilised. Work is underway to address some further issues. Reports should be aligned to training requirements as documented in this training plan. Improved analysis should identify trends in service requests and facilitate appropriate approaches to facilitate their resolution.

20.6. Further consideration needs to be placed on the availability of resources. On occasion, staff with specialised skills and knowledge have not been available to support service requests relating to their specialty because they have been allocated to other work. Improved planning and foresight into demand should help ensure it is matched to availability; coordination with the Trainer Development programme is also required.

20.7. Due to the Covid-19 pandemic, it has shown that more remote and on-line e-learning training content is required to support staff where on-site or group training is not feasible. It is also felt that additional e-learning content will allow more flexibility to support local and national projects when required.

21. Governance

21.1. The Head of Service Development and Support is accountable for IT Training and Support.

21.2. The IT Training Manager is responsible for delivering this training plan.

21.3. Approval for this training strategy and the training programmes will be sought through agreed governance mechanisms. Once approved, further changes will be subject to the same approach, which will be described in the IT Training and Support communications and marketing plan.

21.4. Work requests for other services and users are subject to the SCW work reception process before work commences.

22. Charging Against Allocated Service Days

22.1. The IT Training and Support function is funded via GPIT. The allocation of services days is based on CCG population percentages.

22.2. Some elements of the function are charged collectively against allocated service days and others are charged separately. The Training plan differentiates when this occurs.

22.3. All work requests will be charged against service days by agreement. Where service days have already been fully allocated, a discussion around changes to the Training plan will be needed, in order to re-allocate resources and make changes to the training plan.

22.4. If no changes can be accommodated within the agreed training plan then additional funding will be needed for any new work request to be completed.

Appendix A - GP IT Core and Mandated Services (Training)

Service Name	Service summary (scope)	Service Category	Service Description	DPCMA Indicator	DMA Reference
GPSoC System Support	GPSoC systems and centrally funded subsidiary systems accessed through the GPSoC framework. Support for core general practice clinical systems on behalf of the GP practices	Core and Mandated GP IT Systems	**Migrations and mergers:** Subject to local business case approval, core service provision would include deployment costs such as data migration, essential infrastructure upgrade requirements, project management, training, technical support, retention of legacy system and/or data and audit retrieval requirements.	There is support available to all practices for deployment, training, technical issues, tracking database maintenance and supplier liaison and escalation for GPSoC (lot 1) clinical systems.	166
Training and Systems Optimisation	Training service supporting the safe and effective use of core clinical systems and their optimisation.	Core and Mandated GP IT Systems	The Practice and CCG responsibilities for training are described within the CCG Practice Agreement. The local SLA should quantify training resources based on either the number of practice staff or the number of practices (weighted by population where appropriate). The service should include training for: • GPSoC core clinical systems • National digital systems e.g. SCR, EPS2, ERS And will include training requirements arising from: • Staff turnover • Refresher training • New system functionality **System Optimisation**: Support practice optimisation of principle GP clinical systems and national digital systems, by providing support, guidance and advice, including User Group facilitation to enable sharing of best practice Training delivery should reflect: • Practice training plans and staff training needs analysis • Environment and estate accommodation and facilities • Virtual and online delivery channels • Resource availability • User satisfaction and customer feedback N.B. Training for business administration and office systems is the responsibility of the practice.	There is a comprehensive ongoing training and clinical system optimisation service to support GP Principal clinical systems and national clinical services available to all practices.	7
GP Data Quality Service	Data quality training, advice and guidance	Core and Mandated GP IT Systems	Comprehensive data quality advice and guidance service is available to all GPs, including training in data quality, clinical coding and information management skills. Development and delivery of a general practice data quality improvement plan, where necessary. The service should include support for: • National data audits/extracts/reporting e.g. National Diabetes Audit • General reporting • Template development/QA • Spreading best practice • Data migrations as part of system deployments • National system deployments for example: GP2GP, SCR, CAB/e-RS, EPS	There is a comprehensive data quality advice and guidance service is available to all GPs, including training in data quality, clinical coding and information management skills	30

			• Clinical/medical terminology including use of SNOMED CT in GP principle clinical systems		

Appendix B - Role Profiles

South, Central & West CSU IT Services / DT SFIA Role-Skills Profile	IT Training Manager B 8a	Purpose summary • Manage delivery of IT training and support in own regions. • Line manage Assistant IT Training Managers. • Direct, motivate and develop the training team. • Monitor utilisation of training & support services and related service levels. • Engage with stakeholders (SCW, users, customers, 3rd party suppliers) to ensure requirements are met.

SFIA Skills   (Skills listed in SFIA framework sequence, which does not reflect relative priority or importance)

Skill name	SFIA Code	SFIA Level	SFIA skill-level description selected for this role	Context
Consultancy	CNSL	6	Manages provision of consultancy services, and/or management of a team of consultants. In own areas of expertise, provides advice and guidance to consultants and/or the client through involvement in the delivery of consultancy services. Engages with clients and maintains client relationships. Establishes agreements/contracts and manages completion and disengagement.	
Service level management	SLMO	6	Ensures that a catalogue of available services is created and maintained and that service level agreements are complete and cost effective. Ensures that service delivery is monitored effectively and that identified actions to maintain or improve levels of service are implemented. Ensures that operational methods, procedures, facilities and tools are established, reviewed and maintained. Negotiates with relevant parties in respect of disruptions and major amendments to the provision of services. Reviews service delivery to ensure that agreed targets are met and prepares proposals to meet forecast changes in the level or type of service.	
Learning and development management	ETMG	5	Manages the provision of learning and development, ensuring optimum use of resources. Maintains, publicises and promotes catalogue of learning and development activities. Ensures that courses are up to date and accredited (when required). Arranges facilities and schedules with learning and development providers as appropriate.	
Learning assessment and evaluation	LEDA	6	Specifies methods, tools and standards for assessing knowledge, skill and behaviour of learners. Specifies the methods, tools and standards for evaluating the impact of a learning programme against defined outcomes.	
Performance management	PEMT	6	Manages individuals within change and/or service delivery environments. Allocates management and supervisory responsibilities. Provides coaching and support and delegates responsibilities where possible, in order to achieve corporate objectives. Mentors and influences senior individuals in consideration of their career opportunities and contribution to the organisation. Sets performance objectives, and monitors progress against agreed quality and performance criteria. Initiates, develops and monitors effective performance management processes. Leads on formal processes such as compensation negotiations and disciplinary procedures.	
Customer service support	CSMG	5	Ensures that the inventory of components to be supported is complete and current. Drafts and maintains policy, standards and procedures for the customer service or service desk functions. Responsible for day-to-day management and work allocation to meet agreed service levels. Specifies, agrees and applies standards. Ensures that tracking and monitoring of performance is carried out, metrics and reports are analysed, and issues are resolved.	

South, Central & West CSU IT Services / DT SFIA Role-Skills Profile	Assistant IT Training Mgr B7	Purpose summary • Responsible for delivery of IT training and support in own region. • Line manage team of Senior IT trainers, IT trainers and IT Training Administrator. • Responsible for managing designated aspect of IT training & support • Provide in-depth subject matter expertise on IT systems within the Service Portfolio. • Engage with stakeholders (SCW, users, customers, 3rd party suppliers) to ensure requirements are met.

SFIA Skills   (Skills listed in SFIA framework sequence, which does not reflect relative priority or importance)

Skill name	SFIA Code	SFIA Level	SFIA skill-level description selected for this role	Context
Consultancy	CNSL	5	Takes responsibility for understanding client requirements, collecting data, delivering analysis and problem resolution. Identifies, evaluates and recommends options, implementing if required. Collaborates with, and facilitates stakeholder groups, as part of formal or informal consultancy agreements. Seeks to fully address client needs, enhancing the capabilities and effectiveness of client personnel, by ensuring that proposed solutions are properly understood and appropriately exploited.	
Learning assessment and evaluation	LEDA	5	Administers and ensures the accuracy of knowledge, skill and behavioural assessments based on specified methods and according to specified standards. Conducts analysis and evaluation of learning programmes using tools, methods and following standards.	
Learning design and development	TMCR	6	The specification of solutions for use in learning and development programs in the workplace or in compulsory, further or higher education. Commissions the development of learning materials, allocates resources to learning teams, defines learning outcomes. Leads learning programs, recommends and specifies learning interventions for design, development and deployment according to learning outcomes.	
Learning delivery	ETDL	5	Plans and schedules the delivery of learning activities, based on learning objectives. Manages the delivery of programmes of learning. Customises formal and informal learning activities, incorporating relevant business scenarios and case studies. Designs appropriate environments, and delivers learning activities to specialist audiences. Advises/coaches others in learning delivery techniques and options.	
Performance management	PEMT	5	Manages individuals and groups. Allocates responsibilities and/or packages of work. Provides support and guidance as required, in line with individuals' abilities. Delegates responsibilities as appropriate. Advises individuals on career paths, and encourages pro-active development of skills and capabilities. Sets performance targets, and monitors progress against agreed quality and performance criteria. Provides effective feedback, throughout the performance management cycle, to ensure optimum performance. Mentors individuals, possibly within other parts of the organisation. Participates, as appropriate, in formal processes such as compensation negotiations and disciplinary procedures.	

South, Central & West CSU IT Services / DT SFIA Role-Skills Profile	**Senior IT Trainer B6**	Purpose summary • Deliver training and ongoing support for Service Portfolio and lead on training projects. • Develop and maintain training materials for SCW customers. • Provide subject matter expertise on IT systems within the Service Portfolio. • Respond to requests for end-user training support. • Engage with stakeholders (users, customers, 3rd party suppliers) as required • Support, motivate and develop IT trainers, when required.

SFIA Skills   (Skills listed in SFIA framework sequence, which does not reflect relative priority or importance)

Skill name	SFIA Code	SFIA Level	SFIA skill-level description selected for this role	Context
Technical specialism	TECH	4	Maintains knowledge of specific specialisms, provides detailed advice regarding their application and executes specialised tasks. The specialism can be any area of information or communication technology, technique, method, product or application area.	
Learning assessment and evaluation	LEDA	4	Performs routine and non-routine assessments of knowledge, skills and behaviour using specified methods and according to specified standards. Gathers inputs for the analysis and evaluation of learning programmes.	
Learning design and development	TMCR	5	Specifies the content and structure of learning and development materials. Takes responsibility for design, creation, packaging and maintenance and manages development to deliver agreed outcomes. Where required, designs, configures and tests learning environments, including population of simulated databases, and replication of external systems, interfaces, and assessment systems. Secures external accreditations as appropriate.	
Learning delivery	ETDL	4	Prepares or customises and delivers learning activities to a variety of audiences.	

South, Central & West CSU IT Services / DT SFIA Role-Skills Profile	**IT Trainer B5**	Purpose summary • Deliver training and ongoing support for Service Portfolio and training projects. • Develop and maintain training materials for SCW customers. • Respond to requests for end-user training support. • Engage with service users as required

SFIA Skills   (Skills listed in SFIA framework sequence, which does not reflect relative priority or importance)

Skill name	SFIA Code	SFIA Level	SFIA skill-level description selected for this role	Context
Learning assessment and evaluation	LEDA	4	Performs routine and non-routine assessments of knowledge, skills and behaviour using specified methods and according to specified standards. Gathers inputs for the analysis and evaluation of learning programmes.	
Learning design and development	TMCR	4	Designs, creates, develops, customises and maintains learning materials and resources to deliver agreed outcomes, and meet accreditation requirements if appropriate. Assists with design, configuration and testing of learning environments, including creation of simulated data, and replication of external systems, interfaces and assessment systems.	
Learning delivery	ETDL	4	Prepares or customises and delivers learning activities to a variety of audiences.	

South, Central & West CSU IT Services / DT SFIA Role-Skills Profile	**IT Training Administrator B4**	Purpose summary: • First point of contact for IT Training & Support service requests. • Responsible for ensuring calls are tracked, resolved and closed. • Collate activity summaries and KPI monthly reports. • Responsible for maintaining and updating training schedule.

SFIA Skills   (Skills listed in SFIA framework sequence, which does not reflect relative priority or importance)

Skill name	SFIA Code	SFIA Level	SFIA skill-level description selected for this role	Context
Learning and development management	ETMG	4	Contributes to the development and maintenance of a catalogue of learning and development resources. Books and organises learning events. Updates and controls training records, including attainment of certificates and accreditations.	(Not certifications and accreditations)
Customer service support	CSMG	3	Acts as the routine contact point, receiving and handling requests for support. Responds to a broad range of service requests for support by providing information to fulfill requests or enable resolution. Provides first line investigation and diagnosis and promptly allocates unresolved issues as appropriate. Assists with the development standards, and applies these to track, monitor, report, resolve or escalate issues. Contributes to creation of support documentation.	