Training and CPD Policy

Document Control

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1. Purpose

This policy sets out South Cumbria Skills Exchange (SCSE)'s, operated by Whamos Training and Development CIC, approach to staff training, continuing professional development (CPD), and the maintenance of professional competence.

Because SCSE delivers accredited qualifications through Qualifications Network (QNUK) and Open Awards, and provides unregistered Alternative Provision (AP) to children and young people, the competence and currency of staff is fundamental to safe, high-quality delivery. The standards in this policy reflect both employment-law good practice and the specific expectations of awarding bodies and AP commissioning frameworks.

2. Scope

This policy applies to all employees, sessional workers, volunteers and Directors. The level of training expected varies according to role; mandatory training requirements are set out in this policy and recorded against each member of staff.

3. Principles

SCSE is committed to:

- Ensuring all staff have the knowledge, skills, and competence to perform their role safely and effectively.
- Maintaining accurate records of training, qualifications, and CPD for every member of staff.
- Refreshing mandatory training at the intervals set by statutory guidance, awarding bodies and good practice.
- Supporting development that strengthens both individual practice and SCSE's overall provision.
- Promoting equality of opportunity in access to training and development.

4. Mandatory training

The following training is mandatory for all members of staff working with children and young people. It is completed at induction and refreshed at the intervals indicated:

Training	Refresh interval
Safeguarding and child protection (Level 1 minimum)	Annually

Designated Safeguarding Lead (DSL) and Deputy DSL training	Every 2 years
Prevent awareness (WRAP or equivalent)	Every 2 years
Working Together to Safeguard Children (key updates)	Refreshed when guidance changes
GDPR and Data Protection	Annually
Health and Safety (general)	Every 2 years
First Aid at Work	Every 3 years
Fire safety and emergency evacuation	Annually
Equality, diversity and inclusion	Every 2 years
Online safety / e-safety	Annually

Role-specific training is in addition to the above and is identified at recruitment and through the appraisal process. Examples include:

- For first aid trainers: appropriate teaching qualification and currency with QNUK assessment standards.
- For functional skills tutors: appropriate teaching qualification and currency with Open Awards assessment standards.
- For staff working with neurodivergent learners: appropriate awareness training, trauma-informed practice, and relevant adjustments training.

5. Induction

Every new member of staff completes an induction that includes:

- Introduction to SCSE's mission, vision, values and current provision.
- A walk-through of all safeguarding policies and the named DSL / Deputy DSL.
- Health and safety induction including site-specific risk assessments.
- Data protection and confidentiality.
- The Acceptable Use Policy and how SCSE systems are used.
- The Code of Conduct and behaviour expectations.
- An overview of the policy suite and where policies are kept.

Induction is signed off by the inductee and a Director, and recorded. The inductee is allocated a mentor or buddy for their first three months where possible.

6. Continuing professional development (CPD)

All staff are expected to engage in CPD relevant to their role. SCSE will:

- Discuss CPD priorities at each appraisal.
- Provide a reasonable CPD allowance for time and (where applicable) cost.
- Support staff to maintain awarding body and professional registration where applicable.
- Encourage participation in sector networks, conferences, and peer learning.
- Make available learning relating to AP, SEND, neurodiversity, mental health, and trauma-informed practice.

Staff who undertake CPD outside scheduled hours may be entitled to time off in lieu by prior agreement.

7. Training records and Single Central Record

SCSE maintains a Single Central Record (SCR) which includes, for each member of staff:

- DBS check date, level, and certificate number.

- Right-to-work checks.
- Reference checks.
- Mandatory training completion dates and renewal due dates.
- Role-specific qualification details.
- Identity verification.

The SCR is reviewed monthly by a Director. Staff with overdue mandatory training are identified and supported to complete refreshers without delay. Persistent failure to engage in required training may be addressed under the Disciplinary and Grievance Policy.

The SCR is held in line with the Secure Data Handling and Data Protection Policy.

8. Awarding body requirements

For staff delivering accredited qualifications, awarding body requirements take precedence where they exceed this policy. Specifically:

- Trainers and assessors must hold the qualifications and currency required by QNUK or Open Awards for the qualifications they deliver or assess.
- Internal quality assurance arrangements must align with the awarding body's centre handbook.
- Any standardisation activity required by an awarding body is mandatory.

The Training Manager is responsible for ensuring all assessment staff meet awarding body requirements.

9. Promotion and progression

Where opportunities for promotion or progression exist within SCSE, they will be offered fairly and transparently and in line with the Equality and Diversity Policy and the Safe Recruitment Policy. Decisions on promotion will take account of:

- Demonstrated competence in the current role.
- Relevant qualifications and CPD.
- Capacity to take on additional responsibilities.
- Operational need.

10. Equality monitoring

SCSE will maintain and review training and promotional records of all employees to monitor whether opportunities are being offered equitably. Monitoring may include classification of staff and applicants by protected characteristic where they have consented to provide this information, examination of the distribution of opportunities, and review of the reasons for decisions taken.

Where monitoring identifies any pattern of inequity, a Director will agree corrective action through the appraisal cycle or through review of recruitment and progression practice.

11. Failure to maintain required competence

Where a member of staff fails to maintain a qualification, registration, or training currency that is required for their role:

- A Director will discuss the matter with them and identify a route to address the gap.
- Where the matter relates to a safeguarding-critical qualification (such as DSL training or first aid), the member of staff may be deployed away from the relevant activity until the gap is addressed.
- Where it is not possible to address the gap within a reasonable time, the matter may be progressed through the Capability provisions of the Disciplinary and Grievance Policy.

12. External training providers

Where external training is commissioned, providers will be selected on the basis of quality, relevance, value for money, and any required accreditation. Records of external training (including provider, date, content, and outcome) are kept on each member of staff's training record.

13. Related policies

This policy should be read alongside:

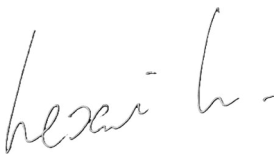
- Safeguarding Policy
- Safe Recruitment Policy
- Disciplinary and Grievance Policy
- Equality and Diversity Policy
- Quality Assurance Policy
- Handling of DBS Certificate Information
- Recruitment of People Who Have a Criminal Record Policy
- Secure Data Handling and Data Protection Policy

14. Policy review

This policy is reviewed annually by the Directors, or sooner in response to any change in awarding body requirements, statutory guidance, or significant operational learning.

Approval & Review

This policy has been approved on behalf of the Directors:

Elizabeth Amos-Milburn *Co-Director*	**Alexandra Gager-Liebhart** *Co-Director*
	

Date of approval: 18th May 2026

Next review: 18th May 2027

Schedule 1 — Record of Changes

Version	Date	Nature of Change
001	18th May 2026	Initial published version included in the Combined Policies and Procedures 2026 edition.