

## Scottish Ambulance Service Education, Learning & Development - Funding Request

The Scottish Ambulance Service aims to support any professional education or learning and development that fulfil the following criteria

- Statutory/mandatory training
- Specific requirement of posts/registration to practice
- KSF post outline requirements
- Meeting the Service's strategic objectives
- Agreed Continuing Professional Development courses
- Individual learning and development needs
- Career progression

Funding for individual learning and development activities will normally only be considered if the requirement is outlined in the individual's Personal Development Plan recorded in Turas Appraisal, agreed between individual staff member and their manager. Requests for learning and development will be considered in priority order as illustrated below and actioned as all requests for each preceding priority level have been met.<sup>1</sup>

Priority	Please provide an outline of the Service priority to be addressed by the learning and development activity
1. Learning and development to meet statutory/mandatory or regulatory requirements in order to fulfil the role.	
2. Learning and development to improve performance including professional and management development	
3. Learning and development in order to build capacity for the future	
4. Personal learning and development	<p><i>Please note that in line with the Learning and Development Policy any learning and development that is solely for the purposes of personal development and not connected to Service strategic intent or building capacity for current or future requirement will not attract funding support.</i></p>

<sup>1</sup> Please see Section 7 of the Scottish Ambulance Service Learning and Development Policy for further detail.

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Please outline the learning and development method considered to meet the learning need<sup>2</sup>

<b>Is the learning need contained in a current and agreed Personal Development Plan, recorded in Turas Appraisal</b>	<b>Yes</b>		<b>No</b>

## Applicant's details

<b>Employee Name and e-mail</b>	
<b>Job Title</b>	
<b>Line Manager Name and e-mail</b>	
<b>Directorate</b>	
<b>Department/Function</b>	
<b>Location and phone number</b>	

## Learning and Development activity details

<b>Learning activity name</b>	
<b>Provider<sup>3</sup></b>	
<b>Duration of activity</b>	
<b>Commencement date</b>	
<b>Total amount of funding requested for this financial year<sup>4</sup></b>	
<b>Total amount of funding required for the duration of the activity</b>	<i>Please note funding is on a period to period basis and cannot be guaranteed at the outset for the duration of the activity.<sup>5</sup></i>

<sup>2</sup> Please see Section 5 of the Scottish Ambulance Service Learning and Development Policy for further detail.

<sup>3</sup> Have you and your line-manager/reviewer sought the most cost effective means of learning and development provision, is this provider known to NHSScotland?

<sup>4</sup> Please indicate what percentage of the funding could be met by you/your Directorate/Region/Department in the event of limited funding availability through the Capable Workforce Group

<sup>5</sup> Have you considered where alternative funding may be requested in the event that it is not available for future periods?

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Is there any other form of support required in order to undertake this learning activity?

Example	Description
<b>Study Leave</b>	
<b>Day Release</b>	
<b>Course Materials</b>	
<b>Examination Leave</b>	
<b>Other</b>	

Any backfill costs for operational staff must be identified and agreed with the accountable line manager, agreed with the appropriate budget holder and funded from the Directorate/Region/Department

All travel and subsistence expenses are to be in compliance with Scottish Ambulance Service policy, agreed with the appropriate budget holder and funded from the Directorate/Region/Department

### Declaration

**I request funding support for the education, learning and development activity identified above – this has been discussed and agreed with my line manager/sponsor**

Employee Signature	
Date	
Line Manager/Sponsor Signature	
Date	
Budget Holder Signature <sup>6</sup>	

Please forward this application to:

Electronically	By e-mail to: <a href="mailto:agnesjoyce@nhs.net">agnesjoyce@nhs.net</a>
Physically	By mail to: Capable Workforce Group c/o Agnes Joyce, Education and Professional Development Range Road, Motherwell ML1 2JE

<sup>6</sup> Please obtain agreement from the Budget holder for backfill/travel and subsistence costs where this is not the line manager.