

**Training Needs Analysis Questionnaire 2017**

Please save and send all returns to [pennyyeulet@thefis.org](mailto:pennyyeulet@thefis.org)

Individual TNA code ……../………

# Section 1 General information

**Company Name**

**Contact Name & Position**

**Telephone Number/Mobile Number**

**Email Address**

**CITB Registration Number**

**No of PAYE**

**No of LOSC**

**Limited Company Net Value**

**Limited Company Gross Value**

|  |  |  |
| --- | --- | --- |
| **How many workers in your company are:** |  | As of November 2016 |
| **Labourers** |  | |
| **Apprentices** |  | |
| **Craft Operatives** |  | |
| **Supervisrs** |  | |
| **Managers** |  | |
| **Professionals** |  | |

|  |  |  |
| --- | --- | --- |
| **Numberof workers in each age range:** |  | As of November 2016 |
| **16 -24** |  | |
| **25 - 30** |  | |
| **31 - 35** |  | |
| **36- 40** |  | |
| **41 - 45** |  | |
| **46 -50** |  | |
| **51 years and above** |  | |

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| **Nationality of Workers PAYE & LOSC** |  | As of November 2016 |
| **UK** |  | |
| **Albanian** |  | |
| **Polish** |  | |
| **Romanian** |  | |
| **Bulgarian** |  | |
| **Estonian** |  | |
| **Latvian** |  | |
| **Lithianian** |  | |
| **Other EU** |  | |
| **African Continent** |  | |
| **Others - please advise** |  | |

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| **Workforce Immigration Status Documentation** |  | As of November 2016 - How many holders |
| **UK Passport** |  | |
| **EU Identity Card or Passport** |  | |
| **Student Visa (Non EU)** |  | |
| **Right to Work Visa (Non EU)** |  | |
| **Unable to Answer - Please specify** |  | |

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| **Section 2 - Training Analysis** | | | | | |
| **Do you have a Training and Development Plan**  **for 2017?** | **Yes** | |  | **No** |  |
|  | | | | | |
| **Are you planning to carry out any of the following activities in the next twelve months?** | | | | | |
| Please tick accordingly |  | If yes - please provide estimates |  |  |  |
| **Company Induction Programmes?** | Yes | |  | No |  |
|  | | | | | |
| **Qualification/training of Support Staff?** | Yes | |  | No |  |
|  | | | | | |
| **Qualifications/training of Technical Operational**  **Staff?** | Yes | |  | No |  |
|  | | | | | |
| **Qualifications of Managers?** | Yes | |  | No |  |
|  | | | | | |
| **NVQ assessments for CSCS cards for site**  **operatives?** | Yes | |  | No |  |
|  | | | | | |
| **CPCS assessments for plant operatives?** | Yes | |  | No |  |
|  | | | | | |
| **Card Schemes applications/renewals?** | Yes | |  | No |  |
|  | | | | | |
| **Recruitment of new staff/operatives?** | Yes | |  | No |  |
|  | | | | | |
| **Employ Apprentices?** | Yes | |  | No |  |
|  | | | | | |
| **Apply for or attain Quality Standards?** | Yes | |  | No |  |
| **Section 3 - Skills Needs** | | | | | |
| **Apprenticeship Training** | | | | | |
|  | | | | | |
| **Have you employed apprentices within the last**  **year** | Yes | |  | No |  |
|  | | | | | |
| **If yes, how many and in what trades/occupation** |  | | | | |
|  | | | | | |
| **Are you considering employing apprentices**  **within the next 12 months** | Yes | |  | No |  |
|  | | | | | |
| **If yes, how many and in what**  **trades/occupations** |  | | | | |
|  | | | | | |
| **Compliance Training** | | | | | |
| Please indicate your estimated compliance training needs for 2017 to ensure Health and Safety compliance | | | | | |
|  | | | | | |
| **Compliance Training** | **Y/N** | **Estimated Candidate Requirement Value** |  | | |
| **First Aid at Work /Emergency First Aid** |  |  |
| **Asbestos Awareness** |  |  |
| **Manual Handling** |  |  |
| **PASMA** |  |  |
| **IPAF** |  |  |
| **CPCS (Plant Operations)** |  |  |
| **Harness Safety** |  |  |
| **Safe working at Height** |  |  |
| **COSHH** |  |  |
| **SSSTS** |  |  |
| **SMSTS** |  |  |
| **Traffic Banksman** |  |  |
| **Cartridge operated tools** |  |  |
| **Fire safety** |  |  |
| **IOSHH** |  |  |

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| **SEATS** |  |  |  |
|  | | | |
| **Please note any other training you intend to**  **undertake** |  | | |
|  | | | |
| **Operatives Skills Training** | | | |
| **Please indicate which courses you will undertake in 2017 as a company to ensure the skills of your operatives** | | | |
|  | | | |
| **Operatives Skills Training** | **Y/N** | **Estimated Candidate Requirement Value** |  |
| **Dry Lining Finishing** |  |  |
| **Dry Lining Fixing** |  |  |
| **Taping and Jointing** |  |  |
| **MF/Casoline Ceilings** |  |  |
| **Suspended Ceiling fixing** |  |  |
| **Access Floors** |  |  |
| **Demountable Partition** |  |  |
| **Solid Plastering** |  |  |
| **Interior Systems** |  |  |
| **Fibrous Plastering** |  |  |
| **Steel Frame Systems** |  |  |
| **Tiling** |  |  |
| **Screeding** |  |  |
|  | | | |
| **Please note any other training you intend to**  **undertake** |  | | |
|  | | | |
| **Management Skills Training** | | | |
| **Please indicate which courses you will undertake in 2017 as a company to ensure the skills of your managers** | | | |
|  | | | |
| **Management Skills Training** | **Y/N** | **Estimated Candidate Requirement Value** |  |
| **NEBOSH General/Construction cert** |  |  |
| **Directing Safely** |  |  |
| **CILM Certificate** |  |  |
| **CILM Award** |  |  |
| **IT Skills** |  |  |
| **Work/Defect Inspections** |  |  |
| **SEATS** |  |  |
| **CDM Regulations** |  |  |
| **Commercial Awareness** |  |  |
| **Managing Teams** |  |  |
| **Customer Service** |  |  |
| **Employment Law** |  |  |
| **Conflict Resolution** |  |  |
| **Motivating Others** |  |  |
| **BIM Process Training** |  |  |
| **NVQ 3 Occupational Work Supervision** |  |  |
| **Project Management Skills** |  |  |
| **NVQ Level 6** |  |  |
|  | | | |
| **Please note any other training you intend to**  **undertake** |  | | |
|  | | | |
|  |  | **Skills Cards** |  |
| **Please indicate which skills cards your workforce currently hold to prove competence.** | | | |
|  | | | |
| **Green Labourers Card** |  | |  |
| **Red Provisional Card** |  | |
| **Red Apprentice Card** |  | |
| **Red Technical, Supervisor or Manager Card** |  | |
| **Red Experienced Worker Card** |  | |
| **Red Trainee Card** |  | |
| **Blue Skilled Worker Card** |  | |
| **Gold Advanced Craft Card** |  | |
| **Gold Supervisory Card** |  | |
| **Black Manager Card** |  | |
| **White Professionally Qualified Person** |  | |
| **White Construction Related Occupations** |  | |
| **Yellow Construction Site Visitor** |  | |
| **Other older cards still in circulation** |  | |

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| **Current Work Force Status** | | | |
| **What percentage of your workforce currently hold skills cards?** | | | |
| Please tick accordingly | | | |
| **Less than 50%** |  |  |  |
| **50-60%** |  |  |
| **60-70%** |  |  |
| **70-80%** |  |  |
| **80-90%** |  |  |
| **90 -100%** |  |  |
|  | | | |
| **What percentage of your workforce currently hold NVQ qualifications?** | | | |
| Please tick accordingly | | | |
| **Less than 50%** |  |  |  |
| **50-60%** |  |  |
| **60-70%** |  |  |
| **70-80%** |  |  |
| **80-90%** |  |  |
| **90 -100%** |  |  |
|  | | | |
| **Future skills development – please indicate which areas you would like to see additional training programs developed.** | | | |
| Please tick as appropriate | | | |
| **Specific Trade Skill** |  | **Please indicate which areas below** | |
|  |  |  | |
| **Supervisory Skills** |  | **Please indicate which areas below** | |
|  |  |  | |
| **Leadership and Managements Skills** |  | **Please indicate which areas below** | |
|  |  |  | |
| **Business Management Skills** |  | **Please indicate which areas below** | |
|  |  |  | |
| **Technical Skills** |  | **Please indicate which areas below** | |
|  |  |  | |
| **IT Skills** |  | **Please indicate which areas below** | |
|  |  |  | |
|  | | | |
| **Future Business Needs** | | | |
| **Over the next 12 months do you feel that your workload will;** | | | |
| Please tick accordingly | | | |
| **Increase** |  |  |  |
| **Remain the same** |  |  |
| **Decrease** |  |  |
| **Unknown** |  |  |
|  | | | |
| **By Approximately what percentage?** | | | |
|  | | | |
| **Over the next 12 months do you see your business facing increasing labour demands?** | | | |
| Please tick accordingly | | | |
| **Yes** |  |  |  |
| **No** |  |  |
|  | | | |
| **If yes in which areas?** |  |  |  |
| Please tick all relevant areas | | | |
| **Trade** |  |  |  |
| **Supervisory** |  |  |
| **Management** |  |  |
| **Professional** |  |  |
|  | | | |
| **Do you feel that your capacity to take on more contractual work will be hindered by a lack of skilled operatives?** | | | |
| Please tick accordingly | | | |
| **Yes** |  |  | |
| **No** |  |
|  | | | |
| Please tick accordingly |  |  | |
| **If yes in which areas?** |  |
| **Trade** |  |
| **Supervisory** |  |
| **Management** |  |

|  |  |
| --- | --- |
| **Professional** |  |

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| **Future Sector Funding** |
| **Where do you feel future funding should be concentrated to provide you with the skilled workforce you require?** |

Please tick as appropriate

|  |  |
| --- | --- |
| **Apprenticeships** |  |
| **Upskilling Adults from outside of the industry** |  |
| **Upskilling Operatives within the industry** |  |
| **Technical Skills Training** |  |
| **NVQ Qualifications** |  |
| **Supervisory Skills Training** |  |
| **Management Skills Training** |  |
| **Business Skills Training** |  |

**Section 4 - Review of Sector Based Skills, Qualifications & Training Undertaken in 2016**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Grant Levy Funding** | | | | |
| **In 2016 what percentage of CITB Achievement Grants Funding did your company claim?** | | | | |
| Please tick as appropriate |  |  |  |  |
| **0%** |  | **51-75%** |  |  |
| **1-25%** |  | **76-99%** |  |  |
| **26-50%** |  | **100%** |  |  |
|  | | | | |
| **CITB Training Group Grant Awards** | | | | |
| **In 2016 did your company claim a grant award for the cost of training from National or Regional CITB Training Groups?** | | | | |
| Please tick as appropriate | | | | |
| **Yes** |  | **No** |  |  |
|  | | | | |
| **2016 Training Review** | | | | |
| **Please indicate numerically the division of training undertaken per category** | | | | |
| Please insert as appropriate |  |  |  |  |
| **Mandatory Training to meet contractual needs** |  | **Specialist Training to meet company needs** |  |  |
| **Educational Qualifications NVQ L2 (Craft)** |  | **Educational Qualifications NVQ L4 (HND)** |  |  |
| **Educational Qualifications NVQ L3 Craft)** |  | **Educational Qualifications L5 (Undergraduate)** |  |  |
| **Educational Qualifications L5 (Postgraduate)** |  |  |  |  |
|  | | | | |
| **How many employees in total undertook training in 2016?** | | | | |
| Insert actual or estimated response below |  |  |  |  |
|  |  |  |  |  |
|  | | | | |
| **How many training days were carried out in 2016?** | | | | |
| Insert actual or estimated response below | | | | |
|  |  |  |  |  |

# THANK YOU FOR PARTICIPATING IN THE FIS 2017 TRAINING NEEDS ANALYSIS

**Your FIS representative will discuss our data protection policies and all matters of confidentaility**

FIS Representative working with FIS members must confirm the following:

* I agree to allow Finishes and Interiors Sector to share the data from this business review document with FIS partners and business support agencies to facilitate referrals, monitor and evaluate training and to support business growth.
* Any information supplied or gathered from you will be made anonymous should it be used externally.
* At no time will your information be passed to organisations for any commercial purpose.