**Health Improvement Training Request Form**

Health Improvement Training can be found and booked in the Public Health Zone on Turas Learn. Most people who are interested in attending health improvement training will be able to apply for these courses at a time and date most suitable to themselves.

However, there are occasions when teams or services want to make specific requests for more bespoke training, or something tailored to their own needs where the current training offer does not quite meet their need.

On occasions such as these, requests for specific training or delivered to a specific team should be logged through completion of our Health Improvement Team – Bespoke Training Request Form attached below or on the NHS Highland website training link: <https://www.nhshighland.scot.nhs.uk/YourHealth/Pages/HealthImprovementTraining.aspx>

This form should be completed and returned to the following email: nhsh.healthimprovementtraining@nhs.scot

The request will then be considered by the relevant trainer/s and a response provided.

Please note that due to limited capacity, we may not be able to provide for the specific request that you are making but will do our utmost to suggest alternatives where applicable.

**Health Improvement Team - Bespoke Training Request Form**

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| **Requestors details** |
| **Name** |   |
| **Email** |  |
| **Department**  |  |
| **Date of request**  |  |

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| **Training request details** |
| **Please provide a brief description of your service:** |
| **Please provide a detailed description of your training request, and how the training will support your service:** |
| **Please provide details on why the training request requires to be bespoke to your service:** |
| **Please give us an idea of the timescale for training delivery:** |
| **Please provide details on numbers to be trained:** |
| **Please provide any additional information which will help inform the training request:** |

**Internal information**

|  |  |
| --- | --- |
| **Date request received:** |  |
| **Lead for request:** |  |
| **Request reviewed by:** |  |
| **Request agreed or rejected (and reason if rejected)** |  |
| **Decision communicated to requestor** |  |
| **Any additional information** |  |

Please return completed forms to:

 nhsh.healthimprovementtraining@nhs.scot