Worcestershire Acute Hospitals Trust Induction Policy

Department/Service	Learning and Development
Accountable Director	**Chief People Officer**
Date Approved by JNCC	**27th February 2025**
First Revision Date	**27th February 2028**
Changes since previous version	

Date	Change
Feb 25	Change to format

Queries about interpretation and application of policy	wah-tr.hrenquiries@nhs.net
Target Organisation	**Worcestershire Acute Hospitals Trust**

This is a controlled document. The electronic version on the intranet is the controlled version and any printed copies are not controlled.

As a controlled document, this document should not be saved onto local or network

drives and should always be accessed from the intranet.

Contents

What this Policy Covers

Introduction

Induction is the process by which new colleagues or colleagues in significantly changed roles are given the necessary guidance, information and training to enable them to work successfully, safely and effectively. The induction process also contributes to retaining colleagues as if colleagues receive a positive introduction to working for the Trust, they are more likely to want to stay working for the organisation.

The Trust is committed to helping new colleagues adapt to their new role as quickly as possible. Induction helps to ensure colleagues understand what is expected of their role and its relationship with other people and departments, and that they can undertake their job safely.

The policy also supports the Trust's commitment to Standards for Patient Safety, and compliance with Health and Safety Legislation. The Trust recognises the important contribution that colleagues make to delivering high quality patient care. The Trust aims to ensure that good practice is implemented in respect of the induction of new colleagues to the organisation.

The purpose of this policy is to outline the framework of the Trust's induction programme. The Trust Induction programme includes a Trust Corporate Induction complemented by a Local Induction programme; both are mandatory and are fully endorsed by the Trust Board.

The purpose of this policy is to ensure new starters receive both Trust and Local Induction, which is given in a timely and systematic way, and appropriate to the individual's needs.

Application of the policy should be in accordance with the principles of the Trust's Recruitment and Selection Policy.

Scope of this document

This policy applies to all Trust colleagues who are new to the organisation including colleagues that have transferred to the trust from other NHS organisations including those colleagues that have transferred under Transfer of Undertakings Protection of Employment (TUPE), volunteers, long term work experience placements (more than 2 months) and medical colleagues and for those colleagues who transfer to a new post that has significantly changed.

Colleagues who work in the Trust via NHS Professionals (NHSP) are not required to attend Trust Corporate Induction. The NHSP Trust Local Team organise an induction which has to be completed prior to any NHSP shifts being undertaken.

This policy sets out the responsibilities of Heads of Departments and Line Managers for ensuring new colleagues are given adequate time to attend the Trust Corporate Induction and to complete a local induction programme appropriate to their needs.

Non-compliance with the policy will be reported to Directorates via the Reports Compliance Dashboard and will form part of the monthly reporting schedule to the Trust Board.

Definitions

Trust Induction is the process of introducing new colleagues to the organisation, making colleagues aware of the Trust values and expected behaviours, introducing key policies, sharing the vision and aims of the organisation and ensuring colleagues are safe to commence their role.

Local (departmental) Induction is the process of introducing new colleagues to the department that they will be working and ensuring colleagues are aware of all health and safety procedures, fire exits and local procedures.

Local Induction for temporary colleagues is the process of ensuring all temporary colleagues are introduced to their department, health and safety policies, fire exits and the organisations policies.

Permanent colleagues are those colleagues that are employed for more than 2 months.

Temporary colleagues are those colleagues that are employed via an agency or on a contract for less than 2 months.

Responsibility and Duties

Overall responsibility for this policy rests with the Trust Board. Operational responsibilities are delegated as follows:

Executive Directors
The lead Executive Director for this policy will be the Chief People Officer.

In addition, all Executive Directors will be responsible for ensuring that:

• All colleagues are informed of the terms of the policy and the procedures that apply to them.

• The policy is implemented and operated effectively within the sphere of their control.

Head of Department/ Managers Responsibilities
Managers must ensure that all new colleagues attend the Trust Corporate Induction programme on their first day of employment or if this is not possible, within the first 4 weeks of employment. The CQC Fundamental Standards state that all colleagues must attend a Trust Induction and systems are in place to guarantee they receive this training to ensure their competence. Managers should plan the colleague's start date so that it coincides with the Trust Corporate Induction.

Trust Induction Programme

It is the manager's responsibility to ensure that prior to the new colleague's start date they book a place on the Trust Corporate Induction Programme by completing and submitting the Trust Induction Booking Form via the intranet.

• The manager must ensure new colleagues complete the Trust Corporate Induction before commencing their full duties or the Trust will become liable for that colleague both professionally and financially.

• A formal offer of appointment letter should be sent by the manager to the new colleague with a date for attendance on the Trusts Corporate Induction.

• The Medical Resources Department must contact the Learning & Development Department with names of all new doctors who commence outside of the planned rotational intake. The Directorate Managers will organise dates of attendance on the Trust Corporate Induction Programme and inform the Learning and Development department of dates.

• A checklist has been designed to identify some of the minimum information needs of a new medical consultant (Appendix D).

• Attendance at Trust Corporate Induction will be routinely monitored. Wherever possible Trust Corporate Induction should be the first date of their employment. If this is not possible then the individual must attend Trust Corporate Induction within 4 weeks of their commencement date. The colleague's line manager must ensure that they receive an appropriate induction/orientation on their first day and their duties will be restricted until they have completed all the relevant mandatory/statutory training.

• A monthly new starter report will be monitored against an ESR report on induction attendees and non-attendees and will form part of the Mandatory Training Compliance Dashboard which will be reported monthly to the Directorates. The report will also form part of the monthly Board Report and schedule.

• Registers are populated at the start of both morning and afternoon sessions during the Trust Corporate Induction session by Learning & Development. All colleagues (apart from external colleagues or volunteers) are required to attend the whole days session to gain a full attendance record. After the Trust Corporate Induction non-attendees and their manager will be notified by email and the Learning and Development team will book the new starter onto the next available Trust Induction. The manager will be expected to report back to the Learning and Development Department confirming the reasons for the non-attendance followed by what actions have been taken and ensure the non-attendee is available to attend the next available induction session.

• Colleagues who leave the Trust and return within a 12-month period will not be required to attend a further induction course unless there is a change regarding their statutory and mandatory training requirements.

Local Induction

It is the responsibility of the manager to ensure the new starter receives a Local (Departmental) Induction.

- A generic induction checklist has been designed to identify the information that is to be passed on to the colleague (Appendix B), This information is to be used as a guide and is not an exhaustive list and may be amended to suit departmental needs and to take account of local risk assessments.

- Managers are responsible for ensuring that all types of induction programmes are planned, implemented and evaluated.

- Managers must designate a named person to facilitate and account for the delivery of the Local Induction programme for permanent and temporary colleagues. Each person that delivers a section must sign to confirm that the section has been completed.

- Managers should focus on the high-risk elements of the new colleague's role i.e. Health and Safety, specific legislation, equipment used, introduction of policies and procedures of the department/ward within which they will be working on the first day.

As it is appreciated there is a high level of information to absorb by a new colleague:

- Completion of Local Induction programmes should take no longer than six weeks from the commencement date.

- After completion of the Local Induction Programme managers must continue to check that new colleagues are clear about what is expected of them and if any further support that is identified will be provided and reviewed. This will usually be within 12 weeks depending on the role with the Trust.

- The manager should ensure that all parts of the Local Induction relevant to the individual are completed and any parts missed followed up.

- On completion of Local Induction the manager and new colleague must complete and sign the departmental Local Induction Checklist and retain a copy of this documentation in the individual's personal file. The completed Local Induction record must be sent by the Manager or nominated person to the Learning & Development department by email wah-tr.CHEC-TrainingTeam@nhs.net so this can be recorded as completed on ESR.

- Copies of formal local training records and checklists that is not recorded on ESR must be kept on the individual's personal file.

- The manager and the colleague should meet and review the induction process establishing the new colleague's views and ascertain whether they have "settled in" and discuss if appropriate any further training or development needs they feel are needed to be fully effective.

Employee Responsibilities

- To attend and participate in the Trust and Local Induction process to fully understand their role and their contribution to the Trusts objectives

- To jointly complete the Local Induction Checklist with their Head of Department/Manager.

- To identify any areas requiring further clarification or understanding.

- To evaluate the Local Induction Programme through discussions with their manager and feedback any comments.

- To contact their manager to report non-attendance to Trust induction if for exceptional circumstances i.e. sickness they are unable to attend and to make appropriate arrangements to attend at a later date.

- If a colleague fails to attend Trust Corporate Induction they will be unable to partake in any clinical duties until they have completed the mandatory training requirements for their role.

- Colleagues are actively encouraged to join a recognised Trade Union / Professional Association. There are several Trade Unions and Professional Associations represented on the Joint Negotiating and Consultative Committee. No person, either as an employee or job applicant, will be discriminated against on the grounds of Trade Union Membership.

Learning and Development Department Responsibilities

- Deliver/facilitate a Trust Corporate Induction programme on behalf of the Trust.

- Maintain attendance records on Trust Corporate Induction for permanent and temporary colleagues.

- Ensure that the session contents meet the requirements of mandatory and statutory requirements.

- Record attendances at the Trust Corporate Induction and Local Induction Checklists on ESR for the purpose of reporting on the monthly Mandatory Training Dashboard.

- Continually review and develop induction process through Trust Corporate Induction evaluation process and produce evaluation reports for speakers on Trust induction programme.

- Provide advice and support to speakers/trainers involved in the Trust Corporate Induction programme about style and delivery of presentations.

- Check that Local Inductions are taking place and ensure follow up with managers for non-compliant colleagues.

- Provide guidance and advice to managers on how to design and deliver Local Induction.

Policy Detail

Trust Induction

- All new colleagues attend a Corporate Induction Day which identifies trust structures, basic principles relating to employment and mandatory training.

- All new Healthcare Support Worker are also required in addition to the Corporate Induction Day attend a 3 day Induction programme for Healthcare Support Workers which is provided by the Trust's Practice Education Team.

- All newly qualified nurses, midwives and AHP's are also required to attend, in addition to the Corporate Induction Day, a 2 day Preceptorship Programme which is provided by the Trust's Practice Education Team.

Doctors In Training, are required to complete the eLearning for Health (eLfH) Online Induction Modules and attend the Doctors Induction Programme arranged by the Medical Education Department on their first day.

All temporary colleagues must also receive a local induction i.e. NHSP colleagues, including Locum Doctors, should complete a local induction checklist with a supervisor or head of department upon commencement. (Appendix C)

A full induction checklist should be completed if the individual will be working in the ward or department more than one month.

It is recognised that individuals may have further personal development requirements that relate to issues linked to their roles and responsibilities; these should be identified at a departmental level.

Local Induction

The induction process begins during recruitment and selection (refer to Recruitment and Selection Policy) when the post holder first begins to learn about the organisation.

A Local Induction is to be designed by the head of the department/ manager and should take into account the needs of the post and individual departmental issues and should meet the minimum criteria as per the departmental induction checklist (Appendix B).

The programme should be commenced immediately at the start of employment after completion of the Trust's Induction Programme and be spread over several days or weeks after the new recruit commences in post.

The aim of a systematic induction programme is to cover all the ground in the shortest effective time bearing in mind:

- A new colleague can take in only a limited amount of information at a time.

- As the new colleague becomes more established in their post it will probably be more difficult to arrange 'time off' for induction.

- Safety must have a high priority.

- The layout of the ward/department should be covered at the earliest opportunity, ideally on the first day.

Disparities in the quality of local induction exist across the organisation. Therefore a set of checklists has been developed for all departments to follow. The checklist in Appendix B is for guidance and should act as an "aide memoir" and managers may wish to adapt the form to meet their own requirements. This should help to ensure that all new recruits receive the same minimum standard of induction.

Implementation

Plan for implementation
This policy will be implemented immediately upon approval.

Dissemination
Learning & Development Manager will oversee the effective communication of the approved policy to all relevant colleagues.

Training and awareness
The Learning & Development Manager will end out a communication via Worcestershire Source to inform colleagues there has been an update to the policy and include a link to the policy which is accessible via the HR document library on the Trust Intranet. This will also be communicated via Senior Leaders Brief.

Monitoring and compliance
The Learning & Development Manager will review the policy to reflect changes in mandatory and statutory requirements and be responsible for monitoring and reviewing the effectiveness of this policy.   The target for new starter attendance for Trust Induction is 90%. Where Departments are non-compliant this will be reported at the Mandatory Training Oversight Group and an action plan for improvement will be agreed.

Compliance for Trust Induction will be checked on a monthly basis which will show new starters attendance and non-attendance and actions agreed with managers where nonattendance has been identified Compliance for all local induction will be checked by completion of the Local Induction record sent to Learning & Development department. A reminder will be sent to the relevant managers for colleagues that a local induction has not been completed.

Policy Review

The policy will be reviewed and approved bi-annually by the JNCC and ratified by the Workforce Assurance group

References

CQC Fundamental Standards	
Procedure for management of incremental pay progression	WAHT – HR-090 (Check policy name and number)
Personal Development Review Policy (PDR)	WAHT – HR- 049 (Check policy name and number)
Health & Safety Legislation	
Standards for Patient safety	
Recruitment & Selection policy procedures	WAHT- HR-004 (Check policy name and number

Background

Equality requirements

No equality impacts identified.

Financial risk assessment

Increase in Trust insurance premiums should the policy not be adhered to.

Consultation

Key individuals involved in developing this document.

Contribution List

This key document has been circulated to the following individuals for consultation;

Designation
All Staff side reps Via JNCC
Divisional Directors of Operations
Divisional Directors of Nursing
Directorate Managers
Matrons
Heads of Service
Subject Matter Experts

This key document has been circulated to the chair(s) of the following committee's / groups for comments:

Committee
Joint Negotiating and Consultative Committee

Approval Process

The policy has been developed by the Learning and Development Department and has been subject to consultation with Trade Union representatives. This policy has been approved by JNCC.

Version Control

This section should contain a list of key amendments made to this document each time it is reviewed.

Date	Amendment
30/9/08	Appendix A detailed appendix of corporate induction programme added
30/9/08	Appendix E – updated Flowchart for induction process
5/8/09	Local induction – change to sections 4.4, 4.6, 10 and 11 in relation to recording of local induction.
4/1/12	Details of e-learning junior doctors induction added to paragraph 3.3
1/6/12	Paragraph 4.4 and 4.6 – 6 monthly audit on local induction introduced.
1/6/12	Paragraph 10 – How monitoring of temporary local induction will be achieved.
11/07/13	Paragraph 5.4 and 5.6 & 10 changes to the Local induction process
11/07/13	Appendix A –updated Induction programme
11/07/13	Appendix B & C – added local induction record
11/07/13	Appendix E- updated Flowchart for induction
01/10/13	Minor amendments made to Appendix B
31/03/16	Document extended for 12 months as per TMC paper approved on 22nd July 2015
13.02.17	Reference to NHSLA replaced by CQC fundamental standards
13.02.17	Removal of Induction course booking application
13.02.17	Realignment of responsible officers titles
04.02.25	Change to format and chage to language i.e "colleagues" and "Trust Corporate Induction"

Trust Induction Programme information
Aims of the Induction Programme:

- To welcome all newly appointed colleagues to Worcestershire Acute Hospitals NHS Trust.
- To enable you to meet colleagues from other departments within the Trust.
- To give an appreciation of the organisational structure and culture of Worcestershire Acute Hospitals NHS Trust.
- To assist you in gaining information regarding procedures and regulations which operate in Worcestershire Acute Hospitals NHS Trust. These procedures are designed to keep you, your colleagues and patients safe.
- Make you feel welcome, part of the organisation and ensure that you are aware of the Trust's objectives.
- Ensure that you know who your colleagues are and where to seek further assistance and advice when necessary.
- Ensure that you are aware of all the policies, procedures and processes that you need to know to enable you to work effectively and safely.
- Ensure that you are aware about what is expected from you at work both in terms of skills and abilities and also attitude and behaviour.
- Ensure that you are aware of the level of commitment to quality and the role that you can play in ensuring the Trust delivers the best possible "customer care."
- To advise colleagues of trade unions and where to find contact details.

Topic	Delivered by (Department)	Target Audience
Facilitators Welcome	Learning & Development Team	All colleagues
Executive Presentation & Welcome to Worcestershire Acute Hospitals NHS Trust	Managing Director / Executive Team	All colleagues
Worcestershire Acute Hospitals Charity	WAH Charity	All colleagues
Fraud Prevention	360 Counter Fraud Team	All colleagues
Freedom to Speak Up	FTSU Guardian	All colleagues
Civility & Respect	FTSU Guardian	All colleagues
Health, Wellbeing & Flexible Working	HR/Workforce Team	All colleagues
Emergency Planning, Resilience & Response	EPRR Team	All colleagues
Fire Safety	Fire Advisors	All colleagues
Health & Safety at Work	H&S Team	All colleagues
Energy Awareness	Equans / Energy Manager	All colleagues

Clinical & Quality Governance	Clinical Governance Team	All colleagues
Information Governance / Data Security	IG Team	All colleagues
Library Services	Library Team	All colleagues
ESR, Mandatory Training & Next Steps	Learning & Development Team	All colleagues

In addition to this it is mandatory for all colleagues working in the Trust to complete the statutory and mandatory training listed below to comply with NHS England Statutory & Mandatory Core Skills Framework to ensure they work within the law; comply with Trust policies and maintain professional standards.

Statutory Modules	Trust refresher periods
Fire Training	Annual
Health & Safety	3 Yearly
Manual Handling Level 2	2 Yearly
Manual Handling Level 1	3 yearly
Infection Prevention and control Level 2	Annual
Infection Prevention & Control Level 1	3 yearly
Safeguarding Children	3 Yearly
Conflict resolution	3 Yearly
Equality and Diversity	3 Yearly
Safeguarding adults	3 Yearly
Mental Capacity Act Level 2 & 3	3 Yearly
Mental Capacity Act Level 1	Once only

Appendix B

Local Induction Checklist (Permanent Colleagues)

Name
………………………………………………….………………………………………………

Post
Title……………………………………………………………………………………………
……………………….

Department
………………………………………………….…………………………………………….

Directorate
………………………………………………………………………………………………

Date of Appointment and start date if different
…………………………………………………….

Name of Line Manager
…………………………………………………….…………………………………………

This checklist is to ensure that all aspects of your induction are covered in a timely and effective manner. As each item is discussed it will be signed off by the person providing the information, and by yourself, once you feel the information has been adequately covered. If any item does not apply to your post please mark N.A. If you feel that any area has been missed, and you require further information, please bring it to the attention of your line manager.

Once the induction is complete, you and your line manager (or equivalent) should sign the checklist. The complete and signed checklist will be placed on your personal file.

The "Local Induction Record" should be forwarded to the Learning and Development Department, Charles Hastings Education Centre, WRH as evidence of completion and in accordance with Trust Induction policy. The following must be completed and signed off by Line Manager (or equivalent) prior to commencing duties:

EMPLOYMENT DOCUMENTATION CHECKS *The list below represents examples of topic to be covered in* *this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*	Signature of Line Manager	Date
References		
Proof of registration		
DBS checks (where appropriate)		

Record/Proof of Qualifications		
Arrange issue of Security Cards, IT access		
Driving Licence (where appropriate)		
Identity Check (on ward/department)		
NHS Pension scheme guide- ensure the candidate is shown where to find the guide		
New starter form completed		
Right to work in the UK check		

The following must be completed and signed off by Line Manager (or equivalent) ASAP on the <u>first day</u> <u>working</u> within the department:

THE WARD/DEPARTMENT *The list below represents examples of topic to be covered in this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*	Signature of Line Manager	Date	Signature of Employee	Date
Orientation to the ward/department and any other areas within the organisation relevant to post.				
Handbook/ Introduction pack received and discussed.				
Security Pass, Key, name badge, access codes etc				
Car parking, Catering and washroom facilities				
Explain the function and structure of the ward/department.				
Introduction to key individuals within the ward/department.				
Confirm hours of work and shift patterns where applicable.				
"On Call" and bleep arrangements.				
First Aid Arrangements: ☐ Nominated first aider				
Resuscitation procedures: ▪ Equipment ▪ Procedures ▪ crash trolley location ▪ emergency telephone numbers				

Fire safety procedures and assembly points:
   • fire exits
   • equipment
   • alarms
   • emergency telephone numbers
   • evacuation procedures				

Moving & handling procedures:
   • equipment
   • procedures
   • lifting and handling regulations
   • Nominated Manual Handling instructor				

Medicines Management procedures: Refer to
MM Induction checklist
   • pharmacy and local protocols
   • prescription stationary
   • administration procedures
   • Medicines policy & standard operating procedures
   • Medications common to area				

Incident reporting procedures:
   • Access to Datix incident reporting system
   • completing the forms
   • RIDDOR requirements				

Incident reporting procedures:
   • Access to Datix incident reporting system
   • completing the forms
   • RIDDOR requirements				

Infection control procedures:
   • hand hygiene procedures
   • Infection status of clinical setting				

Health and safety procedures:
   • Missing in-patient guidelines
   • Safekeeping of patients property & valuables
   • Waste disposal- Safe Operating Procedures				

THE WARD/DEPARTMENT *The list below represents examples of topic to be covered in* *this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*	Signature of Line Manager	Date	Signature of Employee	Date

Explanation of the key documents used within the ward/department ▪ Care pathways ▪ Patient records ▪ Observation charts				
Explanation of the key equipment used within the ward/department and training requirements. ▪ Monitoring equipment ▪ Specialist equipment ▪ Decontamination ▪ Competence on equipment checked.				
ROLES & RESPONSIBILITIES *The list below represents examples of topic to be covered in* *this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*				
Introduction to mentor/supervisor.				
The specific duties and responsibilities of the post.				
Expectations and limitations of the post.				
KEY POLICIES AND PROCEDURES *The list below represents examples of topic to be covered in* *this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*				
Resuscitation policy				
Fire safety policy				
Manual Handling policy				
Performance Development review policy (PDR)				
Procedure for managing Incremental pay progression.				
Medicines management policy				
Incident reporting policy				
Infection control policy				
Health and safety policy				
SICKNESS/ABSENCE *The list below represents examples of topic to be covered in* *this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*				

Explanation of the local procedures regarding sickness and absence
 	
   ▪ reporting
   ▪ return to work procedures
   ▪ reporting to occupational health				

HR Policies & Procedures
  • Flexible working
  • Leave & pay policy
  • Family leave policy
  • Disciplinary
  • Grievance
  • Dignity at work				

COMMUNICATION *The list below represents examples of topic to be covered in this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*	Signature of Line Manager	Date	Signature of Employee	Date
Use of the trust intranet/ email system				
How to use the telecommunications system				
Location and use of general trust policies & documents.				
SUPERVISION *The list below represents examples of topic to be covered in this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*				
Explanation regarding the length of supervised practice				
Explanation of the organisation's appraisal and review system (PDR)				
Plan a date (within 1 month) to review induction document				
HOLIDAYS *The list below represents examples of topic to be covered in this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*				
Explain annual leave entitlement				

Explain process for booking annual leave				
Explain process for booking annual leave				

Statutory & Mandatory Training requirements *Some of the mandatory training is specific to particular colleagues and may be determined by trust policy and legal requirements. Please check TNA -WHAT-HR-039*		Date of completion	Signature
IT Clinical System Training e.g. Oasis, Bluespier, ICE requesting, ADT whiteboard etc.(see IT training) *No access to clinical systems will be given until IT training is completed.*			
Fire	All colleagues		
Infection control	All colleagues		
Manual Handling	All colleagues		
Health & safety	All colleagues		
Information Governance	All colleagues		
Equality & diversity	All colleagues		
Safeguarding Children must complete most appropriate level for role.	All colleagues		
Safeguarding Adults	All colleagues		
Resuscitation	Clinical colleagues		
Conflict resolution	All colleagues		
Blood transfusion	Clinical colleagues		

Medical Devices	Clinical colleagues				
Violence & aggression	All front line colleagues who may be at risk of physical assault				
Clinical health record keeping	For those who write in patient notes				
Medicines management post induction study day	Clinical colleagues				
The care certificate	All care support workers				
SUPERVISION/KSF/REVIEWS *The list below represents examples of topic to be covered in this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*		**Signature of Line Manager**	**Date**	**Signature of Employee**	**Date**
Plan date for appraisal (PDR)					
Review learning from corporate & local induction					
Agree a personal development plan					
Check that corporate induction has been completed.					
SPECIAL RESPONSIBILITIES *The list and should be personalised according to the roles and responsibilities of the individual.*					
Eg: explanation of the role of the lead consultant for risk management.					
SPECIALIST WARD/DEPARTMENT INDUCTION INFORMATION *This section should be personalised according to the requirements of the specialist area.*					

Please ensure a copy of this checklist is placed on colleague's personal file.

The Local Induction Record MUST be completed and returned to Learning & Development department within six weeks of commencement date.

Local Induction Record

	Employee Details
Name	
Designation	
Date Commenced Employment:	
Date of Trust corporate induction:	
Date Departmental Induction completed:	

I confirm I have received and I am satisfied with my local induction and orientation and this record is an accurate reflection of what was covered.
Signed: …………………………………………………..
Date: ………………………………………………………

Manager:	
Name:	
Designation:	
Department:	

I confirm that a full local induction has been undertaken in respect of the above member of colleagues and a copy placed in their personal file.	
Signed: ………………………………………….. Date: ……………………………………………..	

Please return a copy of this record within six weeks of the first day of employment to Learning & Development department, Charles Hasting Education centre.
mailto:wah-tr.CHEC-TrainingTeam@nhs.net

Appendix C

Local Induction Checklist (Temporary Staff) Inc. Locum Consultants

Name of Agency / Temporary Worker…………………………...…………………

Post Title…………………………………………………………………................

Department…………………………………………………………………………

Directorate…………………………………………………………………………

Date of Appointment and start date if different………………………………..…

Name of Line Manager…………………………………………………………

This checklist is to ensure that all aspects of your induction are covered in a timely and effective manner. As each item is discussed it will be signed off by the person providing the information, and by yourself, once you feel the information has been adequately covered. If any item does not apply to your post please mark N.A. If you feel that any area has been missed, and you require further information, please bring it to the attention of the person completing the induction with you.

Once the induction is complete, you should both sign the checklist. The completed and signed checklist will be kept by the Human Resources Department and a copy will be forwarded to you for your own records.

The "Local Induction Record" should be forwarded to Learning & Development as evidence of completion and in accordance with trust Induction Policy.
The following must be completed and signed off by Line Manager (or equivalent) prior to commencing duties:

EMPLOYMENT DOCUMENTATION CHECKS *The list below represents examples of topic to be covered in* *this section. It is not exhaustive list and* *should be personalised according to the* *requirements of the organisation.*	Signature of Line Manager	Date	Comments
Confirm the following have been received and reviewed centrally: References Proof of registration DBS checks (where appropriate) Record/Proof of Qualifications			
Confirm an emergency contact telephone number			

Identity Check (on ward/department)			

THE WARD/DEPARTMENT *The list below represents examples of topic to be covered in this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.*	Signature of Line Manager	Date	Signature of Employee
Orientation to the ward/department and any areas within the organisation relevant to post.			
Security Pass, Key, name badge, access codes etc			
Car parking, Catering and washroom facilities			
The specific duties and responsibilities of the post.			
Confirm hours of work and shift patterns where applicable.			
"On Call" and bleep arrangements.			
Resuscitation procedures: ▪ Equipment ▪ Procedures ▪ crash trolley location ▪ emergency telephone numbers			
Fire safety procedures and assembly points: ▪ fire exits ▪ equipment ▪ alarms ▪ emergency telephone numbers ▪ evacuation procedures			
Moving & handling procedures: ▪ equipment ▪ procedures ▪ lifting and handling regulations ☐ Manual Handling instructor			
Medicines safety procedures: ▪ pharmacy and local protocols ▪ prescription ▪ administration ▪ standard operating procedures ▪ Medications common to area			
Incident reporting procedures: ▪ location of Incident forms completing the forms ▪ reporting arrangements			

Infection control procedures: - hand hygiene procedures - Infection status of clinical setting			
Health and safety procedures: - security - waste disposal - VDU regulations			
Any additional local information essential to the ward/department			

NB if the individual will be working within the ward/department greater than one month the full induction checklist should be completed.

Local Induction Record

	Employee Details
Name	
Designation	
Date Commenced Employment:	
Date of Trust corporate induction:	
Date Departmental Induction completed:	

I confirm I have received and I am satisfied with my local induction and orientation and this record is an accurate reflection of what was covered.
Signed: ……………………………………………………..
Date: …………………………………………………….

Manager:	
Name:	
Designation:	
Department:	

I confirm that a full local induction has been undertaken in respect of the above member of colleagues and a copy placed in their personal file.
Signed: ……………………………………………..
Date: …………………………………………….

Please return a copy of this record within four weeks of the first day of employment to Learning & Development department, Charles Hasting Education Centre WRH.
mailto:wah-tr.CHEC-TrainingTeam@nhs.net

Appendix D

LOCAL INDUCTION CHECKLIST (MEDICAL CONSULTANT APPOINTMENTS)

Sections 1 and 2 to be completed by Medical Resourcing prior to commencement date. Once completed the Induction Checklist will be forwarded to Clinical Director/Clinical Lead and Directorate Manager of specialty for completion of Section 3. This checklist should be assessed within 4 weeks of commencement date to review progress by the Directorate and must be completed within 12 weeks of commencement date.

Please return to Medical HR Administrator upon completion. Upon receipt this will be placed in the Consultant's personal file and a copy forwarded to Learning and Development as evidence of completion and in accordance with the Trust Induction Policy.

1. POST HOLDER DETAILS	
Name	
Post title	
Department	
Directorate	
Date of appointment and start date if different	
Name of Clinical Director/Clinical Lead	
Name of Directorate Manager	
2. PRIOR TO COMMENCEMENT DATE	

	Date	
Personal file checklist completed, including pre-employment checks	**Medical HR Administrator signature**	

Date of Trust Corporate Induction	

3. ONCE CONSULTANT HAS COMMENCED IN POST
The list below represents examples of topic to be covered in this section. It is not exhaustive list and should be personalised according to the requirements of the organisation.

GENERAL AND MANDATORY INDUCTION REQUIREMENTS	TO BE COMPLETED BY	CD/CL/DM SIGNATURE	DATE	CONSULTANT SIGNATURE	DATE
Corporate induction attended	**Day 1-2**				
Orientation to the ward/department and any other areas within the organisation relevant to post.	**Day 1-2**				
Security Pass, Key, name badge, access codes etc.	**Day 1**				
Meet Communications Team for a photo for the Consultant Profile on the intranet	**Week 1**				
Car parking, Catering and washroom facilities	**Day 1**				
Introduction to key individuals within the ward/department: Divisional Medical Director, Divisional Nursing Director, Divisional Director of Operations, Directorate Manager, Consultant Colleagues, Specialty Nurses	**Week 2**				
Arrange a meeting with Executive Directors/ Director of Pharmacy.	**Week 4**				
Arrange meeting with Radiology Clinical Director/ site lead	**Week 2**				
Arrange a meeting with Medical Education Manager	**Week 4**				
Go through provisional Job Plan and set a review date	**Week 1**				
"On Call" and bleep arrangements.	**Day 1-2**				
First Aid Arrangements: ☐ Nominated First Aider	**Day 1-2**				

Fire safety procedures and assembly points: ☐ fire exits ▪ equipment ▪ alarms ▪ emergency telephone numbers ▪ evacuation procedures	**Day 1-2**				
Moving & handling procedures: ▪ equipment ▪ procedures ▪ lifting and handling regulations ▪ Named Manual Handling Instructor	**Day 1-2**				

Moving & handling procedures: ▪ equipment ▪ procedures ▪ lifting and handling regulations ▪ Named Manual Handling Instructor	**Day 1-2**				
Medicines Management procedures. ▪ pharmacy and local protocols ▪ prescription ▪ administration Procedures ▪ Medicines policy & standard operating procedures	**Day 1-2**				
Incident reporting procedures: ▪ Access to Datix incident reporting system ▪ completing the forms ▪ reporting arrangements	**Day 1-2**				
Infection control procedures: ▪ hand hygiene procedures ▪ Infection status of clinical setting	**Day 1-2**				

Health and safety procedures: ▪ Missing in-patient guidelines ▪ Safekeeping of patients property & valuables ▪ Waste disposal – Safe operating procedures	**Day 1-2**				
Explanation of the key documents used within the ward/department ▪ Care pathways ▪ Patient records ▪ Observation charts	**Week 1**				
Explanation of the key equipment used within the ward/department and training requirements. ▪ Monitoring equipment ▪ Specialist equipment ▪ Decontamination ▪ Competence on equipment checked	**Week 1**				

LOCATION AND USE OF KEY TRUST POLICIES	TO BE COMPLETED BY	CD/CL/DM SIGNATURE	DATE	CONSULTANT SIGNATURE	DATE
Resuscitation policy	**Week 1**				
Fire safety policy	**Week 1**				
Manual Handling policy	**Week 1**				
Medicines management policy	**Week 1**				
Incident reporting policy	**Week 1**				
Infection control policy	**Week 1**				
Health and safety policy	**Week 1**				
Flexible working policy	**Week 1**				
Dignity at Work policy	**Week 1**				
Leave and pay policy	**Week 1**				
Family leave policy	**Week 1**				
Disciplinary policy	**Week 1**				
Grievance policy	**Week 1**				

Sickness absence, health and wellbeing policy	**Week 1**				
SICKNESS/ABSENCE	**TO BE COMPLETED BY**	**CD/CL/DM SIGNATURE**	**DATE**	**CONSULTANT SIGNATURE**	**DATE**
Explanation of the local procedures regarding sickness and absence ▪ reporting ▪ return to work procedures ▪ reporting to occupational health	**Week 1**				
Explain process for booking annual leave.	**Week 1**				
SUPERVISION	**TO BE COMPLETED BY**	**CD/CL/DM SIGNATURE**	**DATE**	**CONSULTANT SIGNATURE**	**DATE**
Explanation of the organisation's appraisal and review system	**Week 2**				
Introduction to mentor	**Week 1**				
Plan date for appraisal	**Week 12**				
TRAINING	**TO BE COMPLETED BY**	**CD/CL/DM SIGNATURE**	**DATE**	**CONSULTANT SIGNATURE**	**DATE**
IT Clinical System Training e.g. Oasis, Bluespier, ICE requesting, ADT	**Day 1-2**				

whiteboard etc.(see IT training)					

Booked onto required mandatory / desirable training: • Corporate Induction • Moving and Handling Training • Safeguarding Children at the correct level • Safeguarding Adults • Slips, Trips and Falls Training • Violence and Aggression Training • Medicines Management Training • Blood Transfusion Process Training • Resuscitation Training • Infection Prevention and Control Training including inoculation incident & hand hygiene. • Investigation of Incidents, Complaints and Claims Training • Medical Devices training	**Week 12**				32
SPECIAL RESPONSIBILITIES *The list should be personalised according to the roles and responsibilities of the individual.*	**TO BE COMPLETED BY**	**CD/CL/DM SIGNATURE**	**DATE**	**CONSULTANT SIGNATURE**	**DATE**

SPECIALIST WARD/DEPARTMENT INDUCTION INFORMATION *This section should be personalised according to the requirements of the specialist area.*	TO BE COMPLETED BY	CD/CL/DM SIGNATURE	DATE	CONSULTANT SIGNATURE	DATE
I confirm I have received and I am satisfied with my local induction and orientation and this record is an accurate reflection of what was covered.					
Signed (Consultant)					
Date					

Please now forward the checklist by email to Medical HR Administrator, Kings Court, no later than **12 weeks from date of commencement**. A copy will be placed on the Consultant's personal file and a copy sent to Learning and Development.

I confirm that a full local induction has been undertaken in respect of the above named Consultant.	
Signed (Clinical Director/Clinical Lead/Directorate Manager)	
Date	

Appendix E

Flowchart for Trust Induction

```
Manager makes        →    Offer job/applicant    →    Manager to
appointment to            acceptance                  complete
vacant post                                           appointment
```

Manager to book new colleague onto Trust Induction by completing and submitting the Trust Induction Booking Form via this staff intranet page; https://nhs.sharepoint.com/sites/RWP_Learning_and_Development_Hub/SitePages/Trust-Induction.aspx

→

New colleague sent joining instructions and MS Teams link 1 week prior by Learning & Development Team

```
New colleague appointed & attends Trust    →    Registers populated at the start of    →    Attendance date for Trust Induction is
Induction                                       both morning and afternoon                  recorded onto ESR by Learning &
                                                ssessions                                   Development
```

a. Any non-attendees will be notified by email directly alongside their line manager being copied in by the Learning and Development team the following day.

a. Line Managers will be expected to report back to the Learning and Development Department confirming the reasons for the non-attendance followed by what actions have been taken and ensure non-attendee have been rebooked onto the next available induction session.

Flowchart for Local Induction (permanent colleagues)

```
┌─────────────────────┐
│   Staff member      │
│    appointed        │
└─────────────────────┘
          │
          ▼
┌─────────────────────┐      ┌──────────────────────────┐
│   Attend Trust      │─────▶│   Given local induction  │
│    Induction        │      │  checklist to complete   │
└─────────────────────┘      │   and undertake local    │
                             │       induction          │
                             └──────────────────────────┘
                                        │
                                        ▼
                             ┌──────────────────────────┐
                             │ Local induction checklist │
                             │ completed with line       │
                             │ manager                   │
                             │ (day1, week1, month1)     │
                             └──────────────────────────┘
                                        │
                                        ▼
                             ┌──────────────────────────┐
                             │  Manager & new staff      │
                             │  member sign form to      │
                             │  confirm local induction  │
                             │  has been completed       │
                             │  within six weeks of      │
                             │  commencement date.       │
                             └──────────────────────────┘
                                        │
                                        ▼
                             ┌──────────────────────────┐      ┌──────────────────────────┐
                             │  Completed checklist      │─────▶│  Anyone failing to        │
                             │  placed on employee's     │      │  complete the local       │
                             │  personal file. Local     │      │  induction checklist      │
                             │  Induction Record sent    │      │  (without valid           │
                             │  to L&D and recorded on   │      │  reasons) will be         │
                             │  ESR.                     │      │  reported to the          │
                             └──────────────────────────┘      │  Directorate              │
                                        │                       │  Manager for further      │
                                        ▼                       │  action                   │
                             ┌──────────────────────────┐      └──────────────────────────┘
                             │  Learning & Development   │
                             │  to check after six weeks │
                             │  that Local induction     │
                             │  record is returned and   │
                             │  recorded.                │
                             └──────────────────────────┘
                                        │
                                        ▼
                             ┌──────────────────────────┐      ┌──────────────────────────┐
                             │  Audit Results to         │─────▶│  To directorates          │
                             │  Workforce Assurance      │      │  for follow up            │
                             │  Group for information    │      │  and action               │
                             │  and action               │      └──────────────────────────┘
                             └──────────────────────────┘
```

Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	**Does the Policy/guidance affect one group less or more favourably than another on the basis of:**		
	☐ Race	No	
	☐ Ethnic origins (including gypsies and travellers)	No	
	☐ Nationality	No	
	☐ Gender	No	
	☐ Culture	No	
	☐ Religion or belief	No	
	☐ Sexual orientation including lesbian, gay and bisexual people	No	
	☐ Age	No	
2.	**Is there any evidence that some groups are affected differently?**	No	
3.	**If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?**	N/A	
4.	**Is the impact of the Policy/guidance likely to be negative?**	No	
5.	**If so can the impact be avoided?**		
6.	**What alternatives are there to achieving the Policy/guidance without the impact?**	N/A	
7.	**Can we reduce the impact by taking different action?**	N/A	

If you have identified a potential discriminatory impact of this key document, please refer it to Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Human Resources.

Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	No
2.	Does the implementation of this document require additional revenue	No
3.	Does the implementation of this document require additional manpower	No
4.	Does the implementation of this document release any manpower costs through a change in practice	No
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments:	

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval

Implementation Plan

This policy will be available on the Trust Intranet.

A policy briefing will be developed for Divisional Management Boards, Directorate Meetings and Worcestershire weekly.