

Reporting to:	Trust Board – 31 October 2013
Title	HR Policy Update
Sponsoring Director	Victoria Maher Director of Workforce and OD
Author(s)	Bridget Chambers HR Manager
Previously considered by	TNCC; PAG; HEC;
Executive Summary	<p>HR02 – Management of Corporate & Local Induction</p> <p>The existing HR02 policy has been revised due to the expiry of the 3 year review period and changes required as a result of operating the policy. There have been no major revisions to the content. The policy complies with the revised structure of Trust policies.</p> <p>Updates have been made to reflect changes to the organisational structure within the Trust, including the introduction of Care Groups and appointment of Deputy Chief Operating Officers.</p> <p>Additional Local Induction Checklists have been included in the Appendices for Senior Managers (Band 8a and above), Non-Executive Directors and a ward based manual handling checklist.</p> <p>Arrangements for the Induction of students on placements have been made explicit.</p>
<p>Strategic Priorities</p> <p><input type="checkbox"/> Quality and Safety</p> <p><input type="checkbox"/> Healthcare Standards</p> <p><input checked="" type="checkbox"/> People and Innovation</p> <p><input type="checkbox"/> Community and Partnership</p> <p><input type="checkbox"/> Financial Strength</p>	<p>Operational Objectives</p> <p>PI1 Implement a Staff Engagement Framework that improves employment experience and reduces absence to less than 4%</p> <p>PI2 Embed Employment Basics contract, pay and policy</p>
Board Assurance Framework (BAF) Risks	<p><input type="checkbox"/> Deliver Safe Care or patients may suffer avoidable harm and poor clinical outcomes and experience</p> <p><input type="checkbox"/> Implement our falls prevention strategy to help prevent patients suffering serious injury</p> <p><input type="checkbox"/> Achieve safe and efficient Patient Flow or we will fail the national quality and performance standards</p> <p><input type="checkbox"/> Clear Clinical Service Vision or we may not deliver the best services to patients</p> <p><input checked="" type="checkbox"/> Good levels of Staff Engagement to get a culture of continuous improvement or staff morale and patient outcomes may not improve</p> <p><input type="checkbox"/> Appoint Board members in a timely way or may impact on the governance of the Trust</p> <p><input type="checkbox"/> Achieve a Financial Risk Rating of 3 to be authorised as an FT</p>

Care Quality Commission (CQC) Domains	<input type="checkbox"/> Safe <input type="checkbox"/> Effective <input type="checkbox"/> Caring <input type="checkbox"/> Responsive <input checked="" type="checkbox"/> Well led
<input type="checkbox"/> Receive <input type="checkbox"/> Review <input type="checkbox"/> Note <input type="checkbox"/> Approve	Recommendation The Board are asked to APPROVE HR02 Management of Corporate and Local Induction Policy

Management of Corporate & Local Induction

HR02

Additionally refer to:

HR01 Equality & Diversity
 HR07 Disciplinary Procedure for Doctors and
 Dentists
 HR36 Disciplinary Procedure
 RM04 Risk Management Training Policy

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Document Control Sheet

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Dissemination Method	HR pages on the intranet; Staff Quarterly Newsletter; Managers to cascade to new staff

Version History

Version	Item	Date	Author	Status	Comment
1					
2		Mar 2008	M Beales	FINAL	Updated to reflect organisational changes
3		Nov 2011	M Beales	FINAL	Mandatory training removed – now separate policy. Updated to reflect organisational changes and NHSLA requirements
3		Dec 2012	M Beales	FINAL	Appendix B Updated to reflect TSD changes
3.1		July 2013	M Beales	DRAFT	Appendix H added to include Induction of NEDs Additional Local Education checklist included for senior managers with Appendix A Integrated Education Board changed to Workforce Committee Inclusion of Clinical Placements Appendix I added to strengthen ward based Moving and Handling induction Care Group Deputy Chief Operating Officers added

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1 Introduction – Document Statement and Overview

Induction marks the beginning of the relationship between the Trust and its employees. The induction period is a crucial link between the recruitment of an individual and their planned development to help enable each staff member to fulfil their potential. It ensures that people who are new to the organisation:

- Feel welcome and valued
- Settle quickly into their new environment
- Understand what is expected of them and what they can expect from the Trust
- Understand what values the organisation is committed to and how they can contribute to meeting the needs of our patients and public
- Understand how an NHS Trust operates
- Are well trained and motivated to deliver quality services as quickly as possible

Induction is also necessary to make clear to new employees what their legal obligations are and to impart information on the legal framework in which the organisation operates, for example clinical governance, risk awareness and management, employment legislation and health and safety management, as well as behavioural issues, such as customer care and cultural awareness.

It is therefore essential that all employees complete an appropriate induction, whether staff are temporary or permanent, whatever their occupation or profession and whatever their grade. There are no exclusions to this policy.

2 Purpose of Policy

This policy addresses the issues of induction of all new staff to the organisation. It explains the procedures to be followed for the Trust's Corporate Induction Programme for all staff as well as the requirements for local (or departmental) induction for all new staff. It also describes how this policy will be monitored. This policy is designed to ensure that the Trust meets the requirements for compliance with the relevant risk management standards and current legislative requirements related to the induction of new staff.

All staff are required to comply with this policy and managers are required to ensure it is fully implemented and monitored within their areas of control.

Failure to comply with this policy will be investigated and, where appropriate, will be managed in accordance with the Trust's performance and disciplinary policies.

3 Definitions

This section lists and describes the meaning of key terms used within the context of the document.

Corporate Induction

A process through which a new employee is integrated into the Trust, learning about its corporate culture, policies, and procedures, awareness of the Trust's approach to risk management and the specific practicalities of his or her role. A flowchart of key elements of the process can be found at Appendix C.

Local Induction

A process through which a new employee receives information and training on risk identification and management in the area in which they will work. This will include both corporate procedures (such as incident reporting, fire and health and safety arrangements) as well as procedures relevant to their specific area and profession. Minimum content is specified in the Trust Local Induction Checklists. Flowcharts of key elements of the process can be found at Appendices D & E.

Permanent Staff

Staff employed on permanent contracts with no end date specified.

Temporary Staff /Fixed Term/Bank Staff/Locum Staff/Agency Staff

Staff either employed on fixed term contracts or temporary staff contracts with no end date specified or staff employed by agencies on placement with the Trust.

Volunteers

The Induction of Volunteers is conducted in accordance with the Volunteers Policy which is administered and monitored by the Volunteers Co-ordinator and is designed to meet legal requirements and good practice and risk management. Volunteers are people working in or for the Trust who receive no remuneration or financial reward. The definition of volunteering used is the definition of volunteering from the Compact on relations between government and the voluntary and community sector: "An activity that involves spending time, unpaid, doing something that aims to benefit the environment or someone (individuals or groups) other than or, in addition, to close relatives."

Student or Clinical Placements

An individual on a Higher Education course, studying for a qualification leading to professional registration who is undertaking a clinical practice placement within SaTH. This may include nursing, midwifery and AHP students etc

4 Duties

4.1 Duties within the Organisation

Workforce Committee

The Workforce Committee is responsible for ensuring that this policy and its arrangements are suitable and sufficient and are implemented and monitored effectively with corrective action taken as necessary. The Workforce Committee will be sent reports on the implementation of this policy and it is responsible for monitoring the action plans which detail the corrective actions required.

Chief Executive

The Chief Executive is responsible for ensuring that the Workforce Committee is able to discharge its duties.

Workforce and Medical Directors

The Workforce and Medical Directors are responsible for ensuring that the organisation supports the implementation and monitoring of this policy.

Care Group Deputy Chief Operating Officers and Heads of Department

Care Group Deputy Chief Operating Officers and Heads of Department are responsible for ensuring the implementation and monitoring of this policy within the Care Group/Department that they manage. They must ensure that new staff complete Corporate and Local Induction and that completion rates are monitored within their Care Group/Department, with corrective action taken to ensure compliance as necessary.

Head of Education

The Head of Education has overall responsibility for the day to day management of induction and mandatory training as specified in this policy and ensures that the Corporate Education Department are able to discharge their duties as specified below.

Training and Presenting Staff

All staff contributing to, or presenting sessions at Corporate Induction are required to agree the contents of their session with the Head of Education (or as delegated), submit a full training plan and copy of training materials to the Head of Education in April of each year and ensure that every presentation is up to date containing concise and timely information. Presenting staff are required to ensure that they do not duplicate material already covered by other means (eg mandatory e-learning, junior doctors e-induction etc).

Because of the increasing number of subjects which need to be covered at Induction, contributors to the programmes are required to work with the Corporate Education Department to agree effective and efficient methods of delivery of the content, such as e-learning

Corporate Education Department Staff

The Corporate Education Team will arrange for suitable and sufficient opportunities for training for staff with regards to Corporate Induction programmes.

The Corporate Education Department is responsible for establishing an annual training schedule for all Corporate Induction programmes. Such a schedule will be sufficient to provide managers with options to book their staff onto their respective courses over the year. The schedule will be advertised in advance with a minimum notice of 3 months. The Corporate Education Department is responsible for arranging and co-ordinating each of the training programmes within the training schedule. Such arrangements will include administrative duties such as ensuring availability of suitable venue, availability of teaching aids, co-ordination of speaker programmes and their initial availability, etc. The Corporate Education Department will advise line managers and supervisors on reasonable adjustments on equality grounds.

The Corporate Education Department will maintain computerised records of all attendance to sessions or part days of courses.

The Corporate Education Department will ensure appropriate evaluation of Induction training and propose improvements to content and delivery to meet changing legal, organisational and participant requirements. This will include reviewing methods of delivery to take advantage of technological developments in learning and development

Medical Staffing Manager and Medical Staffing Department

The Medical Staffing Manager and Medical Staffing Department are responsible for ensuring that new Doctors are booked onto the relevant Corporate Induction programme (including Junior Doctors who are required to attend the Junior Doctor Induction Programme, and Senior Medical Staff who attend both the Corporate Induction and the follow up Medical Induction Day). The Medical Staffing Manager and Medical Staffing Department also ensure that doctors that start outside the August programme are booked onto and complete the relevant induction programmes.. The Medical Staffing Department monitor the completion of local induction by doctors and junior doctors and take corrective action where appropriate.

Medical Education Team

The Medical Education Team is responsible for organising the August Junior Doctor Induction programme with sufficient places for all those identified by the Medical Staffing Manager.

Education Supervisors

The Education Supervisors are responsible for ensuring that the Junior Doctors they supervise attend corporate induction and complete the local induction programme according to their speciality.

Managers, Line Managers and Supervisors

Managers, Line Managers and Supervisors are required to ensure compliance with the Trust Policies and Procedures. To this end, they must ensure that all staff within their departments and areas of control receive suitable and sufficient information, instruction, training and supervision.

Managers and supervisors must therefore ensure that local/departmental Induction is started on the very first shift/day that a new member of staff joins the Ward or Department. This must be recorded using the checklist at Appendix A or Appendix B (as appropriate) which is retained on staff personal files. Managers are also required to submit a record of completion of Appendix A to Corporate Education and Appendix B to Temporary Staffing Department and to check the Trust centrally held records for completeness and accuracy.

Managers and supervisors are responsible for ensuring that all new staff attend Corporate Induction Training as soon as possible and without fail within three months of the start of employment. All staff with contracts that last longer than three months are required to attend a Trust Corporate Induction day.

Line managers are responsible for ensuring that staff only undertake tasks for which they are safe and competent. Line managers are required to complete and record an individual risk assessment for new staff who start patient handling duties without having completed a Trust moving and handling programme or a competency test.

Managers and supervisors must ensure that any particular needs of their staff on equality grounds are identified and, wherever possible, support is put in place. Examples may include hearing loops, the production of induction materials in large format, the sensitive notification of speakers with regards to individual requirements in large groups settings such as hearing impairment or the requirement for frequent breaks. Line managers and supervisors must liaise with Corporate Education team who will advise.

Individuals

All Employees have a statutory duty to co-operate with their manager and to attend such courses and training as required. Staff who have booked time off to attend courses and fail to attend will be subject to disciplinary action (except, for example, when the absence is due to sickness or other authorised leave).

Staff will receive payment/paid time off for attending induction/statutory training courses.

Individual staff are responsible for ensuring that they familiarise themselves with the content of the induction material provided to them.

Part Time Staff

Part time staff are required to attend the Corporate Induction and mandatory training courses as with any other member of staff. In recognition of the personal and operational difficulties this may cause in terms of time, staff may need to attend the Trust Induction course outside their normal working hours. In this case, at the discretion of the manager, either payment at plain time rates or time off in lieu will be given.

Agency Staff and Contracts

Managers are responsible for ensuring that all agency staff or external contractors receive a local induction to their place of work. This will include the chain of command, location of key departments and local clinical and health and safety procedures. The Checklists in Appendices A or B could be adapted and used for this purpose. It is recommended that each speciality or department should have an agency staff induction pack giving these details so as to ensure a safe and effective induction for such staff.

5 A Systematic Approach to Corporate and Local Induction

5.1 Content of the Corporate and Local Induction Programmes

The Trust programme is designed to ensure that statutory and mandatory training requirements are covered in the Corporate Induction programmes. Minimum content of the Corporate Induction programme is the same for all Corporate Induction programmes and is specified at Appendix F.

The first day of the Corporate Induction programme covers a number of different areas (see appendix F) and places at this day are not limited. Practical elements of the Induction Programme are booked according to role requirements (eg CPR and Patient Moving and Handling).

Role specific requirements are identified in the Trust's Risk Management Training Policy.

Where clinical staff have evidence of sufficient, appropriate, recent manual handling training and they can pass the Trust's competency tests they will be able to attend a reduced time Safer Handling Course.

However if no such evidence or competency is available, Patient handlers are required to attend the full training programme. Clinical and non-clinical staff are also required to undertake Medical Devices and Food Hygiene Training as appropriate to their role which is organised by the individual's line manager and in accordance with the Trust Medical Devices Training Needs Analysis.

Responsibility for agreeing the contents of the Corporate Induction programme rests with the Head of Education who will seek professional advice as appropriate. Responsibility for agreeing the contents of the Medical Induction Day rests with the Medical Director who will seek professional advice as appropriate.

5.2 Booking Process for Corporate Induction

Line managers are required to book staff onto Corporate Induction via the Training Diary Induction Booking form on the Learning Zone of the Intranet. As the Line Manager is also the recruiting manager, it is recommended that this is done prior to the employee starting with the Trust so that the dates of their Trust Induction can be notified in writing to them by their manager and built into the staff rota and induction programme. If this it is not possible to book new starters onto Corporate Induction prior to their commencing appointment, this should be booked by the line manager, and agreed with the member of staff during their first week of employment. All new starters must attend the Corporate Induction programme as soon as possible after starting work with the Trust and within 3 months of commencing employment.

5.3 Attendance at Corporate Induction Programme - All Staff (excluding Junior Doctors see Section 5.4 below)

The Trust aims for all new employees to have attended the first day of Corporate Induction training within a month of their start date (such days have an unlimited number of places so there is no reason why this cannot happen) and for the whole Corporate Induction Programme to be fully completed within 3 months of commencing employment. It is acceptable for new appointees to attend an induction course prior to their starting date with the Trust if this is mutually convenient and will be deemed to be members of staff for the purposes of health and safety and employer liability insurance whilst attending induction prior to their formal start date. No new member of staff can undertake duties unless they have been trained and are deemed competent to carry out their duties.

All new staff will attend the first available Corporate Induction course after commencing employment with the Trust and will have a place booked for them by their line manager when they are recruited.

Senior Medical Staff are required to attend a follow up Medical Induction day that has been developed to address their specific needs. The programme is held regularly throughout the year and is booked via the Learning Zone on the Intranet. Medical Staffing Department is responsible for ensuring that new Senior Medical Staff are booked onto the Medical Induction day Non-attendance is recorded by the Corporate Education Department on ESR/OLM and monitored by the Medical Staffing Department.

The minimum content of the Trust's Corporate Induction and Medical Induction programmes is included at Appendix F

5.4 Junior Medical Staff

The Induction course for Junior Medical staff is managed by the Medical Education team and is designed to ensure that all statutory and mandatory training requirements are covered. Information is also provided on Trust policies and protocols.

All Junior Medical staff commencing employment with the Trust in August will undertake a comprehensive induction programme, which includes e-learning and face to face elements.

Junior Medical staff who commence in post other than in August will be required to complete a suitable local induction, to complete the mandatory West Midlands Deanery junior doctor e-learning induction and to complete the junior doctor induction CD. The mandatory junior doctor e-learning induction and the junior doctor induction CD together cover the minimum induction content as specified in Appendix F.

They do not attend the Corporate Induction Day which would duplicate this minimum content. Practical training will be undertaken within the Trust's Medical Statutory Safety Update programme. The Medical Staffing Manager will be responsible for booking these new starters onto the relevant programme.

All senior doctors are able to access an on-line induction programme on the hospital intranet or via CD. This contains information additional to their induction course. It is also required that each doctor will participate in a local induction within his/her own specific department, organised by the Educational Lead for that area.

5.5 Recording of attendance for Junior Doctors

The Medical Staffing Manager is responsible for ensuring that all doctors attend the mandatory Induction or the appropriate Statutory Training programme. The Medical Staffing department will complete an Induction Checklist for every doctor on arrival to provide documentary evidence of sessions undertaken. This will be retained on the doctor's personal file.

The Medical Staffing Manager is responsible for ensuring that medical non-attendees of Induction/Statutory Training sessions are reported to their Education Supervisor and the Care Group Operating Officer.

5.6 Locum Doctors

The Medical Staffing Department will ensure that **all** short term (of less than 3 months duration) locum medical staff will be issued with a locum induction pack which will include information on the speciality they are working in, chain of command, location of key departments, the Trust communication system, patient handover procedure as well as all corporate issues covered in the general induction programme.

5.7 Temporary Staff

The Temporary Staffing department book new temporary staff (excl Medical Staff) onto the Trust Corporate Induction programmes in the same way as for any other member of staff. Attendance and non-attendance is recorded by the Corporate Education Team on ESR/OLM in the same way as any other member of staff. The Temporary Staffing Department are responsible for monitoring the non-attendance of temporary staff on Corporate Induction. Temporary staff that are non-compliant after 3 months are prevented from working in the Trust until they become compliant.

5.8 Departmental/Local Induction Programme

To complement the Corporate Induction programme, departmental/local induction should include provision of adequate and appropriate information to the new employee, relevant to their own department and role. Local induction programmes are designed by department/ward/line managers or equivalent others to take account of the needs of the occupational group and individual department/ward issues.

The Trust has developed Departmental/Local Induction Checklists (Appendices A & B) to help managers and employees with the integration process.

Appendix A is the local induction form for all staff including doctors

Appendix B is the local induction form for temporary staff

This includes information on areas such as working arrangements, departmental health and safety arrangements, security, local fire prevention and action in the event of a fire, etc.

Prior to employment, preparations for the arrival of the new employee should be made as far in advance as possible (e.g. uniforms, desk, telephone, equipment, computer and e-mails, IT systems log-ins and access, locker, room keys etc.) This will enable the new employee to work effectively more quickly and ensure that they feel valued.

The line manager should arrange for either themselves or another senior member of staff within the department to meet with the new starter at the beginning of their first period of duty. In addition the line

manager should arrange to spend time with the new starter as soon as is practical after the start of employment.

A member of staff should show the new employee around the department and introduce them to colleagues and other key staff in the organisation if the manager or nominated deputy is unable to do so. They should be available to act as an advisor over the first few weeks to answer any questions that arise.

N.B. Where staff work across different sites, the local induction programme must ensure that all site-specific procedures are covered. It is not necessary for such staff to attend corporate induction at each site. Staff are expected to familiarise themselves with the emergency procedures at each location where they work.

5.9 Recording Completion of Corporate and Local Induction

Staff from the Corporate Education Team administer and host Corporate Induction Days and are required to ensure that each attending member of staff signs an attendance sheet. This is then recorded on the Employee Staff Record system ESR/OLM by administration staff from the Corporate Education Team, for monitoring and reporting purposes.

The employee and line manager are jointly to ensure completion of the appropriate local induction checklist, the final page of which is signed and submitted to the Corporate Education team. This submission may be an electronic scan of the fully completed and fully signed final sheet. This completion is then recorded on the ESR/OLM for monitoring and reporting purposes. The line manager (or Temporary Staffing Department for temporary staff/Medical Department for doctors) are required to keep a copy of the fully completed checklist on the staff member's personal file for reference and for audit purposes.

The Corporate Education team will carry out quarterly monitoring of Induction completion against new starter lists provided by the ESR team.

5.10 Non-attendance at Corporate and Local Induction

The Corporate Education team will review the attendance sheets from Corporate Induction. Non-attendance at Corporate Induction will be notified to the line manager by e-mail by the Corporate Education team as soon as possible and normally within 2 days.

Wherever possible this 'Did Not Attend' data will be recorded on ESR/OLM and reported on a quarterly basis via the staff compliance reports (available to all managers on a shared drive). This information will be included in the quarterly HR performance reports to the Care Group Operating Officers.

Failure to complete Corporate and/or Local Induction will be reported on a quarterly basis and staff identified as non-compliant after 3 months will be unable to attend any other non-statutory training until all the required elements of induction have been completed. Repeated non-compliance will be escalated by the Workforce Committee to the Hospital Executive Committee for remedial action.

This process applies to all permanent staff including Medical Staff. Temporary staff are monitored in accordance with 5.7 above.

Where individuals repeatedly fail to attend any of the required elements of either Corporate or Local induction as requested by their line manager, action may be taken under HR36 Disciplinary Procedure or HR07 Disciplinary Procedure for Doctors and Dentists, as appropriate.

6 Equality Impact Assessment

An Equality Impact Assessment has been carried out on this policy which has been found not to discriminate against any groups of staff or potential members of staff.

7 Process for Monitoring Compliance

Element to be monitored	Lead	Tool	Frequency	Reporting arrangements	Acting on recommendations and Lead(s)	Change in practice and lessons to be shared
Duties	To be addressed through the monitoring below					
Minimum content of corporate and local induction programmes for permanent and temporary staff	Head of Education	Review of programme minimum content requirements at Workforce Committee meeting and minutes of same	Annual	Six-monthly report to Workforce Committee	The Head of Education will review the policy with stakeholders and changes required and shortfalls will be reported to the Workforce Committee on a 6-monthly basis and an action plan maintained and monitored. Learning points will be identified at the Workforce Committee and disseminated by the Head of Education as appropriate.	Required changes to practice will be identified and actioned within a specific time frame. A lead member of the team will be identified to take each change forward where appropriate. Lessons will be shared with all the relevant stakeholders.
The processes for ensuring that all new permanent staff are booked onto and complete corporate induction	Head of Education	Review of quarterly reports on induction completion sent to HoE from Corporate Education Team	Quarterly	Six-monthly report to Workforce Committee		
The process for ensuring that all new permanent, and temporary staff complete local induction	Head of Education	Review of quarterly reports on local induction completion by Corporate Education Team	Quarterly	Six-monthly report to Workforce Committee		
The process for ensuring that all staff that fail to complete corporate and/or local induction are followed up	Head of Education	Review of quarterly reports on local induction and corporate Induction completion by Corporate Education Team.	Quarterly	Six-monthly report to Workforce Committee		
The policy appendices accurately reflect the process employed and that they are kept up to date as appropriate	Head of Education	Review of policy and appendices at Workforce Committee	Annual	Six-monthly report to Workforce Committee		

8 Training

There is no mandatory training associated with this policy. If staff have queries about its operation, they should contact their line manager in the first instance.

9 Review process

This policy will be reviewed in 3 years unless there are significant changes at either at national policy level, or locally. In order that this document remains current, any of the appendices to the policy can be amended and approved during the lifetime of the document without the document strategy having to return to the ratifying committee.

10 Standards/Key Performance Indicators

The Trust's Key Performance Indicator for this is for 90% of all new staff to have completed both their Corporate and Local Induction within 3 months of commencing employment with the Trust and 75% of all staff being compliant with their mandatory training requirements. This will be reported on a six monthly basis to the Workforce Committee.

11 References

- Department of Health. (2004). *Introduction to Today's NHS: NHS Corporate Induction Programme*. London: Department of Health.

- NHS Employers and Department of Health. (2004). Guidelines for NHS Employers: Induction Programmes for Consultants and GPs Recruited From Abroad. London: Department of Health.
- NHS Employers. (2008). Staff Induction Packs.
- NHS Executive. (1997). Code of Practice in the Appointment and Employment of HCHS Locum Doctors. London: Department of Health.

12 Associated Documentation

- TSD01 Operational Guidance for Temporary (Bank) Staff
- The Trust's Learning Directory (training prospectus) is published for all staff to access on the Learning Zone of the Intranet and paper copies of staff training requirements (including Corporate and Local Induction) are provided for each Ward and Department by the Corporate Education Department.

NEW EMPLOYEE LOCAL INDUCTION CHECKLIST

Department.....

Name of Employee.....

Job Title.....

Start Date.....

INDUCTION PROGRAMME FOR NEW EMPLOYEES

Heads of Departments/Ward Managers and other designated officers must use this checklist for the induction of new employees. **This must be completed within the first month of employment.**

- Health and Safety issues and all items marked ‘*’ must be covered on the employee’s first day.
- The new member of staff should be asked to tick each box and initial when they have been adequately informed to their satisfaction about each subject.
- When all items have been completed, the employee should sign and date the form and return it to their immediate line manager for signing and placing on the employees file.
- A copy of the tear off slip must be completed and returned to Corporate Education , House 4, PRH or scanned and e-mailed to Development&Training@sath.nhs.uk

Not all the following subjects are applicable to all departments. If this is the case record ‘not applicable’ (n/a). All starred items must be covered on the employee’s first day.

ITEMS TO COVER WITH EACH NEW EMPLOYEE

<i>*starred items must be completed on the first day</i>		Completed	
		Initials	Date
<i>The Department/Ward</i>			
1*	Department/Ward function		
2*	Introduction to colleagues		
3*	New entrant's own job, and copy of job description		
4*	Supervision & mentorship incl. minimum period of supervised practice		
5*	General layout		
6*	Telephone system, bleeps and emergency numbers		
7*	Internal/external postal systems		
8*	Reporting structures		
9*	Booked onto the Corporate Induction Course (via Corporate Education Dept) within 3 months		
10	Ward Patient Handling Induction Checklist completed (Appendix I) Patient Handling Induction Screening Form completed if relevant and returned to M&H (PRH) – see Intranet for form. No Manual Handling may be carried out by staff not recently trained without a Risk Assessment completed.		
<i>Conditions of Employment</i>			
11*	Hours of work, including duty rotas, shift systems, on-call, breaks, flexible working etc		
12*	Working time recording		
13*	Unsocial hours payments		
14	NHS Pension scheme and eligibility		
15*	Reporting in when sick, including when on leave		
16*	Arrangements for requesting leave		
17*	Uniforms, protective clothing, replacement and laundry arrangements		
18	Car leasing arrangements (if relevant)		
19	Accommodation arrangements (if relevant)		
20*	Proof of identity – passport, original birth certificate or photo driving licence		
21*	Proof of qualifications (originals)		
22*	Proof of professional registration		
23*	CRB disclosure has been received and is satisfactory/risk assessment procedures		
24	Principal Statement or Contract of Employment issued		
25*	Declaration of Confidentiality		
<i>Health and Safety, Security, Fire</i>			
26*	Health and safety information relevant to the department		
27*	Fire instructions and procedures		
28*	Emergency evacuation procedures		
29*	Location and use of fire fighting equipment		
30*	Accident and incident reporting (Datix)		
31*	Occupational Health		
32*	Security of personal effects		
33*	Security of department and buildings		
34*	Arrangement for keys		
35*	Staff photo ID badges		

36*	Car Park Permit arranged		
37	Information Systems security (if appropriate)		
Conduct			
38*	Personal presentation/Uniform Policy		
39	Disciplinary, Grievance, Capability procedures		
40*	Courtesy to patients, the public and to other staff members		
41*	Rules on smoking, alcohol and drugs		
42	Private use of Trust and mobile phones		
Facilities			
43*	Cloakroom, lockers, toilets & washing facilities		
44*	Location of drinking water		
45*	Staff cafeteria and eating arrangements		
Staff Development			
46	NHS Knowledge and Skills Framework Outline for post		
47	Study leave arrangements		
48	Working with objectives and Performance Management Policy		
49	Performance review/ appraisal procedures		
50	Personal Development Plan (PDP)		
Employee involvement and communication			
51	Trade union/professional organisation representation		
52	Foundation Trust Membership and Governors		
53	Information sources e.g. Team Brief, notice boards, Intranet, e-mail etc		
54	Good Corporate Citizen and Sustainability – how do we contribute		
55*	Complaints procedure		
56	Departmental meetings, feedback		
57	Where to get help and advice		
Items specific to the department			
58*	Pay information, completion of ESR (Starter form & bank details)		
59	ESR (change of circumstances) – if required		
60	Income Tax form, P45 or P46 (collected and sent to payroll)		
61	Notice of termination of employment		
62*	Safeguarding Children and Adults		
63*	Waste disposal (including clinical waste)		
64*	Control of infection/Hand Hygiene		
65	Local arrangements for decontamination of equipment		
66*	Patient related duties		
67*	Manual handling/Slips Trips and Falls		
68*	Incident reporting		
69*	Clinical Risk		
70*	Departmental and role specific Risk Assessments		
71*	Data Protection, Information Governance & Freedom of Information*		
72	Medication and patient group directives (where appropriate)		
73	Consent/Delegated Consent		
74	Blood Transfusion Procedures		
Other relevant issues specific to the department			

Management of Corporate and Local Induction

Risk Management Training & Development Required for Post

Tick Date Booked or N/A

- 1. Manual Handling incl Slips Trips and Falls
- 2. CPR (level according to role) Adult Paediatric Newborn
- 3. Fire Safety Training
- 4. Conflict Resolution Training
- 5. Risk Management Training – specify.....
- 6. Recruitment and Selection Training
- 7. Equality and Diversity Awareness Training/e-learning
- 9. Health Record Keeping
- 10. Infection Control & Hand Hygiene Training
- 11. Food Safety Training
- 12. Infusion Devices Training (clinical areas)
- 13. Safeguarding Children Training levels 1,2, or 3
- 14. Safeguarding Adults Training
- 15. Other specialist medical devices equipment training
- 16. Inoculation Incidents
- 17. Information Governance
- 18. Other – specify.....

I confirm that I have been informed about and understand all of the above items relevant to my employment with Shrewsbury and Telford Hospital NHS Trust.

Name of employee (print).....

Signature of employee..... **Date**.....

I confirm that the above induction programme has been completed for the above employee and the form will be placed in the employee’s personal file in accordance with the requirements of the Induction Procedures and in line with the Data Protection Act 1998

Name of Manager(print).....

Signature of Manager..... **Date**.....

Please copy section below and return to Corporate Education, House 4 PRH upon completion

Checklist completed within one month of start date

Name of staff			
Signature		Date	
Department			
Job title			
Start date		ESR No	
Dates Corporate Induction Day 1 completed and/or remaining booked			
Date Local Induction Checklist completed			
Date Additional Checklist for Snr Mgrs Completed			
I confirm the Local Induction Checklist(s) have been completed and put onto staff file.			
Name of manager			
Signature		Date	

Additional Checklist for Senior Managers (Bands 8a and Above)

Meetings arranged as appropriate to role, but should include:

<u>Meetings/Visits</u>	Scheduled	Completed
Departmental Heads	_____	_____
Appropriate Operational/Business Managers	_____	_____
Appropriate Care Group Managers/Clinical Directors	_____	_____
Introduction to Executive Team	_____	_____
Finance Link/Team	_____	_____
HR Link/Team	_____	_____
Head of Assurance (Risk Management & Policies)	_____	_____
Site Visits – PRH & RSH	_____	_____

<u>Policies/Guidelines</u>		Initial
Trust Values – discussion with Mgr	Read and Understood	_____
NHS Code of Business Conduct	Read and understood	_____
HR Policies	Awareness of key policies and how to access them	_____
Information Governance Policy	Read and understood	_____
Financial Standing Instructions	Read and understood	_____
Health and Safety Policies	Awareness of key policies and how to access them	_____
Incident Reporting and Datix	Read and understood	_____
<u>Other Relevant Policies/Procedures</u>		
_____	Read and understood	_____
_____	Read and understood	_____

I confirm that I have been notified of the Trust Policies and Procedures specified above

Employee: _____

Date: _____

Position: _____

Line Manager: _____

Date: _____

This form is to be completed by the individual and line manager and retained on the staff file.

Temporary/Agency Staff Local Induction

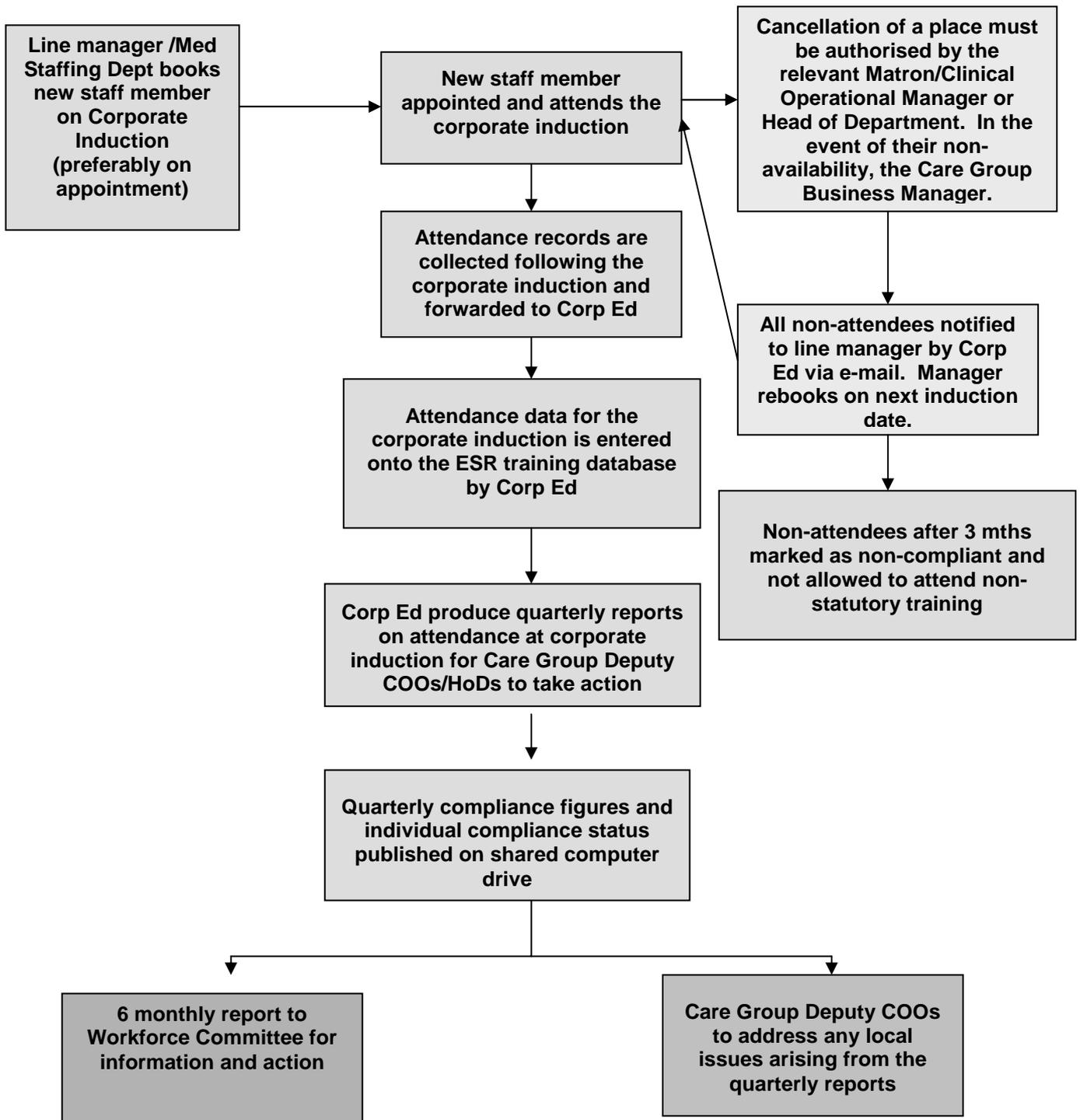
The qualified nurse handing over must ensure that this checklist is completed and kept on the Ward
(Audits will be carried out to ensure compliance)

WARD	DATE	Please tick
Bank/Agency Nurse – Identity badge name photo and NMC number (where applicable) checked		
Ward lay out, nurse in charge for advice		
PSAG Board, hand over including explanation of nursing paperwork e.g. Care Plans and Risk Assessments.		
Medication: location of pharmacy, ward top up ,controlled drugs, drug rounds inc. specific /unusual medication, role and administration of I.V.s (where applicable)		
Telephone system internal and external usage, useful nos.		
Emergency numbers – 2222, 3333		
Bleep system normal and emergency		
Fire policy and location of alarms, doors, extinguishers, evacuation and alarm sounds		
Location of arrest trolley and emergency bells		
Patient Safety Brief incorporating Falls Risk, Infection Control, and vulnerable patients.		
Use of Dynomaps and clinical equipment to be used		
Discharge Information relating to; Medication, Warfarin and Diabetic Patients (adapt this field for specialist area)		
Staff Member name		
Staff Member Signature		
Agency Nurse Only Statement (*please circle your answer)	I confirm that I am fully up to date with training as required by my employing Agency including Patient Moving and Handling, and Infection Prevention and Control. YES / NO*	
Bank/Agency Nurse Name		
Bank/Agency Nurse Signature		

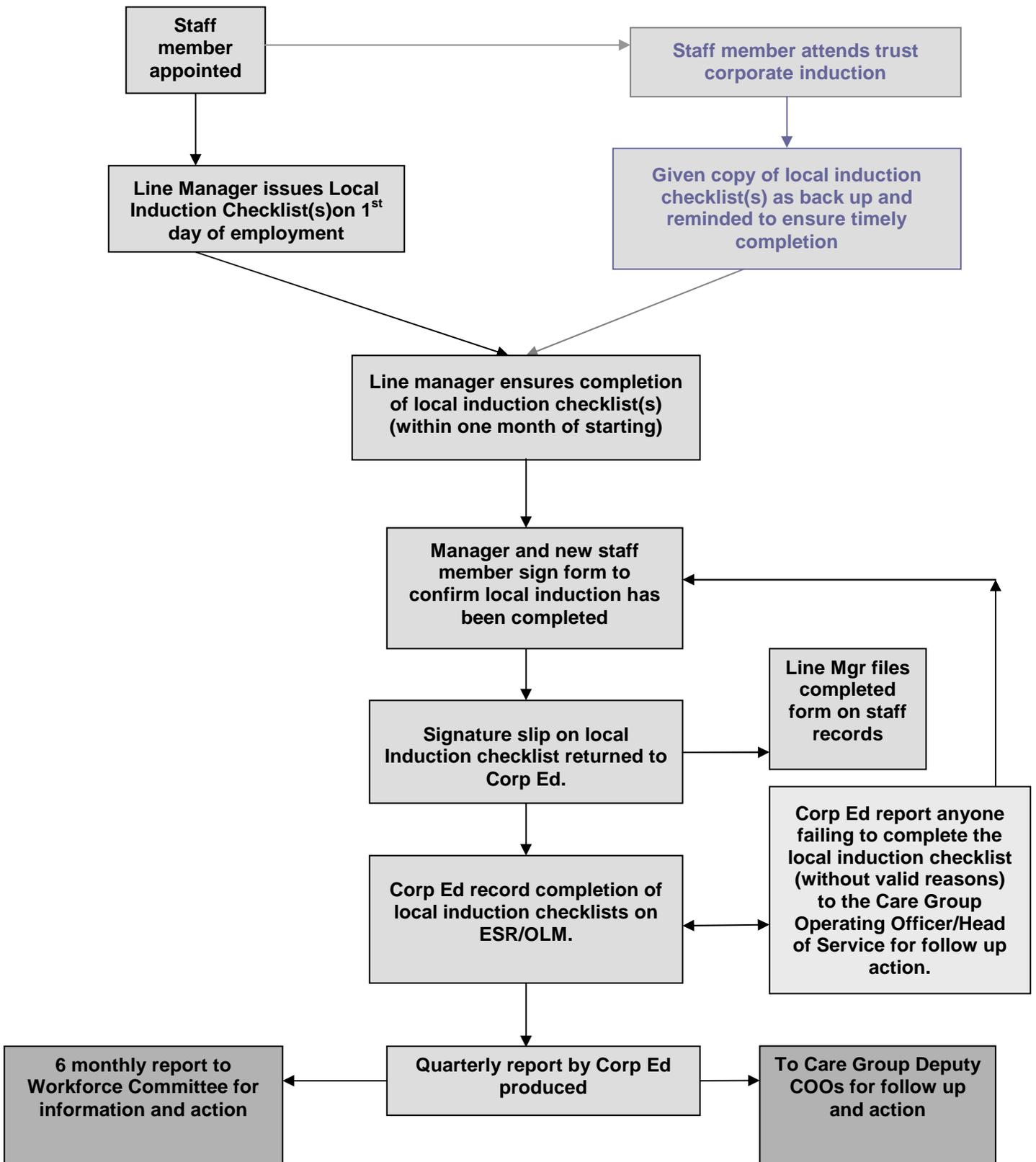
*** NB This form should only be completed prior to the first shift by a bank/agency member of staff being undertaken in any area.**

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Appendix C - Flowchart for Corporate Induction

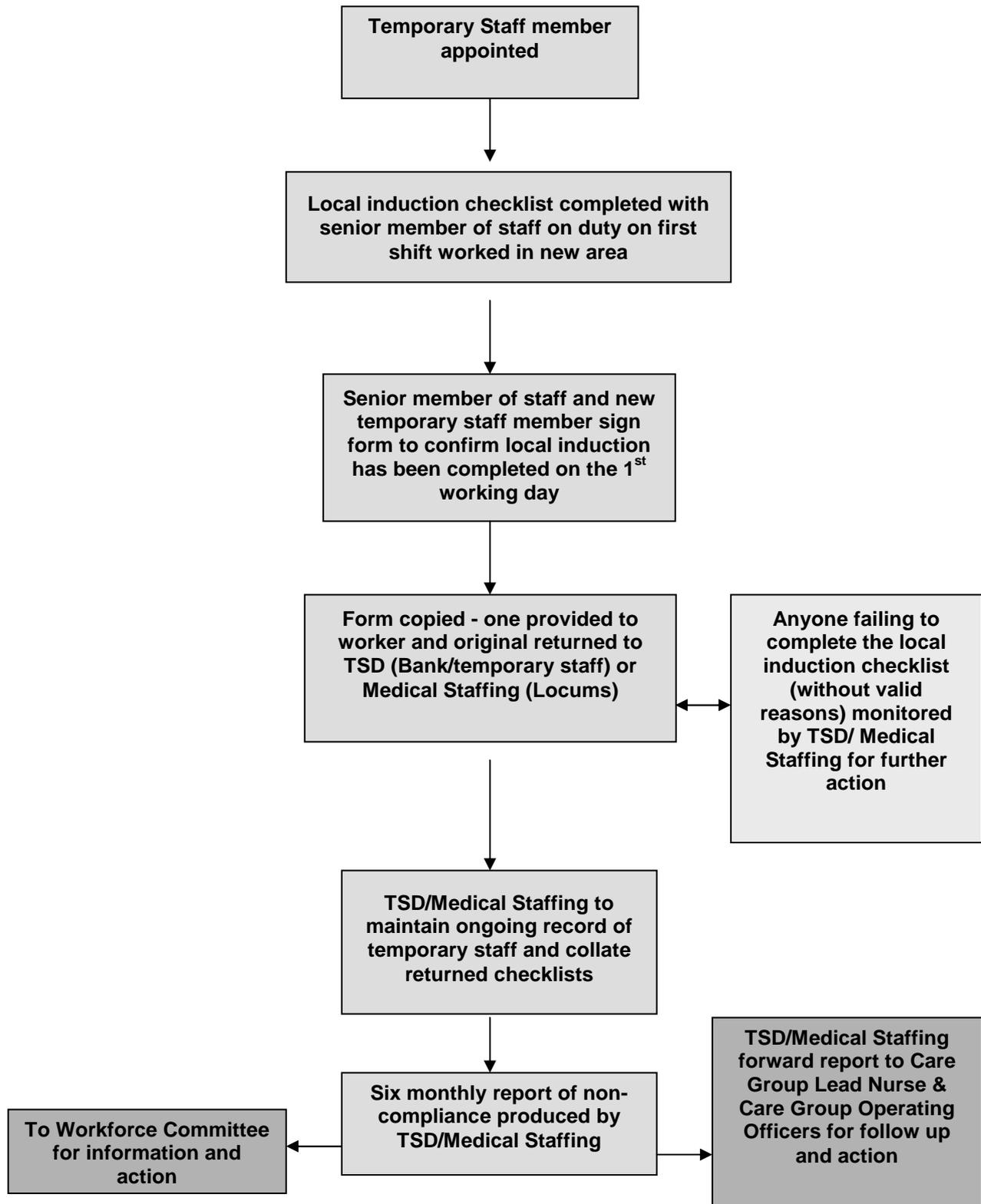


Appendix D - Flowchart for Local Induction (Permanent Staff)



Appendix E

Flowchart for Local Induction (Temporary Staff, including Locum Medical Staff)



Appendix F

Minimum Content of the Corporate Induction Programme – April 2011 onwards

	Subject	Staff Groups*
Day 1	Welcome to Trust	All Staff
Day 1	Infection Control (incl Hand Hygiene)	All Staff
Day 1	Clinical Governance & Risk Management	All Staff
Day 1	Health & Safety/Risk Awareness (incl Incident Reporting)	All Staff
Day 1	Fire Safety	All Staff
Day 1	Equality & Diversity/Bullying and Harassment	All Staff
Day 1	Information Governance	All Staff
Day 1	Safeguarding Children and Young People	All Staff
Day 1	Fraud and Security Awareness	All Staff
Day 2 or Day 3 & 4	Moving & Handling (incl Slips Trips and Falls)	Non Patient Handling or Patient Handling according to role
Day 5	Resuscitation	According to role requirements
Day 5	Food Safety	For Identified Food Handlers
Day 5	Medical Devices	For Clinical Staff according to role requirements

* The minimum content is the same for all staff groups

Medical Induction Day (MID)

MID	Moving and Handling incl Slips Trips and Falls)	Non Patient Handling or Patient Handling According to role
MID	Resuscitation	According to role requirements
MID	Medicines Management	All Medical Staff
MID	Drugs and Therapeutics	All Medical Staff
MID	Infection Control for Medical Staff	All Medical Staff

Appendix G - Exceptions and Special Arrangements

Junior Doctors on Training Rotations

See section 5.4 above

Bank Nursing Staff

All bank staff are required to complete Corporate Induction and statutory & mandatory training relevant to the job role (unless they can provide evidence that the statutory & mandatory training has been provided by another NHS organisation and is still current) prior to starting their first bank assignment. The Temporary Staffing Department is responsible for arranging and monitoring this. If any member of bank staff is booked to work a bank shift before induction training is completed the line manager takes responsibility for risk assessment and supervision.

Temporary Staff

Temporary staff, including staff on fixed term contracts and employed medical locums, should attend Corporate Induction if their engagement is expected to last for more than three months. They should receive statutory & mandatory training relevant to the job role (unless they can provide evidence that this training has been provided by another NHS organisation and is still current). Line managers are responsible for identifying which elements of local induction are required to enable them to work safely and effectively.

Any department or specialty which regularly uses temporary/locum clinical staff at short notice or for short periods of time must have appropriate induction arrangements to ensure patient safety, including an information pack which the locum must read before any work is undertaken. The temporary / locum member of staff must sign for the pack when given on arrival and records of this are to be kept by the team managers.

Non-Executive Directors

All Non-Executive Directors are supported to fully understand and fulfil their roles in a tailored Induction Process which is outline in Appendix H below

Staff who are not SaTH employees:

Agency workers

Agency workers will not usually attend Corporate Induction unless their engagement is expected to last for more than three months. Line managers will be responsible for identifying which elements of local induction are required to enable them to work safely and effectively. As a minimum for nursing staff, the Local Induction Checklist (Appendix B)should be completed.

The responsibility for providing statutory and mandatory training for agency workers rests with the employing agency, However, the person booking the worker from the agency must ensure, at the point of booking that the person has relevant and documented experience for the job role.

Self employed workers

Self employed workers will not usually attend Corporate Induction unless their engagement is expected to last for more than three months. Line managers will be responsible for identifying which elements of local induction are required to enable them to work safely and effectively. Line managers should ask self employed workers to provide evidence that they have received the statutory and mandatory training relevant to their job role. If they are unable to do so they should be required to attend the training provided by the Trust.

Workers employed by other Trusts/organisations (including Contractors)

Workers employed by other organisations will not usually attend Corporate Induction. Managers responsible for the Trust service in which they are working must identify any elements of local induction required to enable them to work safely and effectively.

The responsibility for providing statutory and mandatory training rests with the employer.

Volunteers

All new volunteers are expected to attend a volunteer induction programme within 3 months of starting voluntary work. The volunteer's manager identifies the specific induction programme and supervision. Should the volunteer not complete the programme, they will not be invited to help until they have completed the volunteer specific induction.

People on Work Placement

Managers who agree to provide work placements are responsible for risk assessment and identifying the induction needs of those on the placement, which will depend upon the nature of the placement, the work being undertaken and the previous experience/training of the worker.

Clinical Placement Students

Students on placement for less than 3 months will not be required to attend Corporate Induction, but will be required to complete a local induction process as agreed and recorded by the Placement Manager.

The Placement Manager may be a Ward or Department Manager who is responsible for that area. If the Local Induction process is carried out by another member of staff (eg a Mentor), the record of that Local Induction will be kept by the Ward or Department Manager or assigned Placement Manager.

Appendix H

Process for the Induction of Executive (ED) and Non-Executive Directors (NED)

Objectives – by the end of the Induction programme, newly appointed NEDs will:

- have an understanding of the nature of the Trust, its business and the environment in which it operates
- clearly understand what it means to live the Trust values
- be able to build effective working relationships with key stakeholders
- understand the Trust’s main partnerships and relationships eg CCG, LHE, LAT, NDTA, NCB, CQC etc

The Induction of NEDs will be a balance of information and meetings/visits. These will be organised by the CEO’s office.

Information Pack give to NED containing:

- | | | | |
|---------------------------------------|--------------------------|----------------------------|--------------------------|
| Trust Annual Plan | <input type="checkbox"/> | Trust Constitution | <input type="checkbox"/> |
| Trust IBP | <input type="checkbox"/> | Board Procedures | <input type="checkbox"/> |
| Clinical Services Strategy (or draft) | <input type="checkbox"/> | Matters Reserved for Board | <input type="checkbox"/> |
| List of Services & Who’s Who | <input type="checkbox"/> | Key Performance Indicators | <input type="checkbox"/> |
| Trust Values | <input type="checkbox"/> | Risk Management Strategy | <input type="checkbox"/> |
| Significant Contracts | <input type="checkbox"/> | Trust Major Risks | <input type="checkbox"/> |
| Trust Principal Assets & Liabilities | <input type="checkbox"/> | Major Competitors | <input type="checkbox"/> |

Date Given..... By Whom.....

Meetings/Visits

Scheduled

Completed

Role & Responsibilities – Trust Chairman	_____	_____
The Team – Chairman, NEDs and Execs	_____	_____
Key Issues – CEO	_____	_____
Fire Safety Briefing	_____	_____
Infection Control Briefing	_____	_____
Information Governance Briefing	_____	_____
Safeguarding Briefing – Deputy Chief Nurse	_____	_____
Site Visits – Deputy Chief Nurse/Lead Nurse	_____	_____
Understanding the Business– Workforce Director <i>(to include Workforce, Ts & Cs, Values, Staff Consultation Procedures)</i>	_____	_____
Understanding the Business – Medical Director	_____	_____
Understanding the Business – Finance Director	_____	_____
Understanding the Business – Director of Bus. & Enterprise	_____	_____
Understanding the Business – Chief Nurse, Director of Q&S	_____	_____
Understanding the Business – Director of Risk & Assurance	_____	_____
Understanding the Business – Communications Director	_____	_____

I confirm that I have received the information pack and completed the scheduled visits as specified above.

Name Date.....
To be retained on Personal File by PA to Chairman

Appendix I

Ward Induction Patient Handling Checklist
Ward/ Department.....

Ward Department		
Individual has an awareness of:	Y/N	Comments
Trust Moving & Handling Policy		
Their responsibilities (Policy)		
Local moving & handling procedures		
Generic patient handling risk assessments		
Generic load handling risk assessments		
Patient assessment and safer handling strategy documentation		
Datix reporting		
Link worker and M&H contact numbers		
Safe storage use and maintenance of equipment		List
Hoists		
Slings		
Slide sheets		
Beds		
Trolleys		
Bariatric patients equipment		
Emergency handling equipment		
Awareness of safe handling systems		
Emergency evacuation		
Fallen person		
Pushing beds		
Managing bariatric patients		
Other:		
Trust moving & handling training requirements		
Trust patient handling induction course (before commencing handling tasks)		
Requirement for Patient Handling Statutory Safety Updates– annually		
Request local training for new equipment? – YES/NO		
Risk Assessment completed on Individual Member of Staff Prior to Training? Retained on staff file.		Yes/ Not Applicable

Name of Manager Signature

Name of Employee Signature

Date

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New Document Consultation Checklist - HR02 – Management of Corporate and Local Induction

Name of Document

Use this form to record the consultation and to ensure your consultation has been adequate for purpose. This list is provided as a prompt. It may not be appropriate to involve all of the below in a consultation – a decision on who should be consulted should form part of the policy development.

This form should be used for all new Trust wide guidance and any which will result in significant changes.

Completed forms should be submitted to the Chief Compliance Officer for evidence of compliance with the policy

Name – examples (complete with details)	Date Sent	Date reply received	Modification suggested? Y / N	Modification Made Y/N	2nd draft sent?
<i>Chief Executive</i>					
<i>Medical Director</i>	14/08/13				
<i>Chief Operating Officer</i>	14/08/13				
<i>Director of Quality and Safety</i>	14/08/13				
<i>Director of Compliance & Risk Management</i>	14/08/13				
<i>Finance Director</i>	14/08/13				
<i>Counter Fraud Services</i>	14/08/13				
<i>Director of Strategy</i>	14/08/13				
<i>Director of Communications</i>	14/08/13				
<i>Workforce Director</i>	03/13		Y	Y	14/08/13
<i>Deputy Director of Nursing</i>	14/08/13				
<i>Centre Chiefs</i>	14/08/13				
<i>Business Managers</i>	14/08/13				
<i>Clinical Directors</i>	14/08/13				
<i>Head of Pharmacy</i>	14/08/13				
<i>Statutory Trainers</i>	03/13		Y	Y	14/08/13
<i>Litigation Manager</i>					
<i>Medical staff</i>					
<i>Senior nurses</i>	14/08/13				
<i>Chief Compliance Officer</i>	14/08/13				
<i>Patient Groups</i>					
<i>Staff side representatives</i>	07/08/13		Y	Y	14/08/13
<i>Affected staff</i>					
As per the TNCC circulation List – all managers and staff side representatives, HR team and relevant managers have been asked to comment on the document	14/08/13				
Dissemination Method	Will be notified to staff and managers in a newsletter and line managers advised of changes.				

Please write an executive summary paragraph of the key points of this policy and any changes that have been made since the previous version.

This paragraph will be used for submission to HEC, PAG, Trust Board and for information to go in the Staff Quarterly Update.

The existing HR 02 policy has been revised due to the expiry of the 3 year review period and changes required as a result of operating the policy

There have been no major revisions to the content.

The policy complies with the revised structure of Trust policies.

Updates have been made to reflect changes to the organisational structure within the Trust, including the introduction of Care Groups and appointment of Deputy Chief Operating Officers.

Additional Local Induction Checklists have been included in the Appendices for Senior Managers (Band 8a and above), Non-Executive Directors and a ward based manual handling checklist.

Arrangements for the Induction of students on placements have been made explicit.