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## BEHAVIOURAL STANDARDS FRAMEWORK

To help create a great place to work and a great place to be cared for, it is essential that our Trust policies, procedures and processes support our values and behaviours. This document, when used effectively, can help promote a workplace culture that values the contribution of everyone, shows support for staff as well as patients, recognises and celebrates the diversity of our staff, shows respect for everyone and ensures all our actions contribute to safe care and a safe working environment - all of which are principles of our Behavioural Standards Framework.

### Behavioural Standards Framework – Expectations ‘at a glance’

Introduce yourself with #hello my name is... 	Value the contribution of everyone	Share learning with others
Be friendly and welcoming	Team working across all areas	Recognise diversity and celebrate this
Respect shown to everyone	Seek out and act on feedback	Ensure all our actions contribute to safe care and a safe working environment
Put patients at the centre of all we do	Be open and honest	For those who supervise / manage teams: ensure consistency and fairness in your approach
Show support to both staff and patients	Communicate effectively: listen to others and seek clarity when needed	Be proud of the role you do and how this contributes to patient care

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## 1. SUMMARY

This policy sets out the induction arrangements for all new staff (contracted and bank) and agency staff to the Trust.

The Trust is fully committed to the systematic induction of all employees, i.e. Contracted staff (substantive or fixed term), bank staff, agency staff and training doctors new to the Trust, workplace or role. To ensure the effective and efficient induction of all new starters the Trust has put in place the following arrangements:

- **Corporate Induction Programme for contracted and bank staff**
  - This programme is designed to ensure all new contracted and bank staff are given the key information they require that will help them integrate into their role within the organisation quickly and effectively
- **Medical Induction Programme for training doctors**
  - This programme is designed to ensure all new training doctors are given the key medical information they require that will help them integrate into their role within the organisation quickly, effectively and safely
- **Local Workplace Induction for contracted staff**
  - The Local Workplace Induction is designed to ensure that all new contracted staff are properly orientated to the organisation and are confident and competent to undertake their role
- **Local Workplace Induction for bank staff**
  - The Local Workplace Induction is designed to ensure that all new bank staff are properly orientated to the organisation and are confident and competent to undertake their role
- **Speciality/Departmental Induction for training doctors**
  - The Speciality/Departmental Induction is designed to ensure that all new training doctors are properly orientated to their department and organisation and are confident and competent to undertake their role
- **Local Workplace Induction for agency staff**
  - The Local Workplace Induction is designed to ensure that all new agency staff are properly informed, capable and competent before they are allowed to undertake their necessary duties. This process utilizes a local workplace induction booklet

The Trust will ensure sufficient resources are allocated to the induction process in order that this can be delivered efficiently and effectively. The resources allocated include:

- Sufficient specialist trainers, managerial and support staff to ensure the timely organisation, preparation and delivery of the Corporate Induction Programme
- Adequate time for managers to prepare for and co-ordinate the Local Workplace Induction process for all new starters

Adequate time for new starters, away from their principal duties, to complete all elements of the induction process

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## 2. PURPOSE

The purpose of this staff induction policy is to ensure the effective and efficient integration of all employees (i.e. contracted and bank staff), training doctors and agency workers who are new to the Trust and/or a particular workplace or role.

## 3. SCOPE

The Trust regards as **mandatory**, the full and proper induction of all new employees:

- Contracted and Bank staff
  - Attendance at the Corporate Induction Programme and completion of the Local Workplace Induction
- Training Doctors
  - Attendance at the Medical Induction Programme for Training Doctors and completion of the Speciality/Departmental Induction
- Agency staff
  - Completion of the Local Workplace Induction for agency staff

Effective induction will ensure:

- New staff are appropriately informed and/or trained to safely and effectively undertake their duties
- New staff quickly develop a sense of familiarity, belonging and a feeling of self-worth as a valued member of the work team
- Reduce the risk of harm to employees and/or patients by ensuring new staff are adequately informed, prepared or trained for their duties

## 4. POLICY

### 4.1 Duties

#### 4.1.1 Educational Governance Group

It is the duty of the Educational Governance Group to:

- Receive, review and acknowledge receipt of Trust wide induction compliance data
- Take the necessary action to address any issues associated with a lack of assurance and/or lack of induction compliance throughout the Trust

#### 4.1.2 Divisional Management Teams

It is the duty of the Divisional Management Team (typically, via Divisional Governance Assurance Group meetings) to:

- Monitor and manage all induction compliance within the division
- Address and resolve any induction compliance (contracted & agency staff) problems within the division
- Ensure all training doctors who start "out of normal rotation" (i.e. not in February or August) are booked on and attend the Corporate Induction programme

#### 4.1.3 Learning and Organisational Development Department

It is the duty of the Learning & Organisational Development Department to:

- Organise and co-ordinate Corporate Induction, on a monthly basis, on the RLI & FGH sites
- Confirm, with the Appointing and/or Department Manager, all Corporate Induction

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bookings

- Record, within TRAC (the Trust's electronic recruitment management and corporate induction booking system) all new starters who attend or fail to attend Corporate Induction as planned
- Provide the induction compliance data for the Educational Governance Group

#### 4.1.4 Employment Services

It is the duty of Employment Services to:

- Book all new starters (contracted & bank staff), via the TRAC system, on to the Corporate Induction Programme
- Ensure that all the staffing agencies, used by the Trust, are provided with an electronic copy of the Local Workplace Induction Booklet for agency staff

#### 4.1.5 Workforce Business Partner (Workforce BP)

It is the duty of the Workforce BP to:

- Ensure the Divisional Management Team monitor and review induction compliance data on a monthly basis

#### 4.1.6 Medical Staff Coordinator (or equivalent)

It is the duty of the Medical Staffing Coordinator (or divisional equivalent) to:

- Monitor the return of completed and signed Local Workplace Induction Booklets for agency staff
- Retain, for future reference, copies of all complete Local Workplace Induction Booklets for agency staff
- Follow up all agency staff who do not complete, sign and return the Local Workplace Induction Booklet
- Inform the HB Retinue (Staffing Agency) if the Local Workplace Induction Booklet is not returned within the given timescale
- Inform the Divisional Management Team of all significant Local Induction for agency staff compliance issues

#### 4.1.7 HB Retinue

It is the duty of the HB Retinue (Staffing Agency) to:

- Ensure all agency staff receive a copy of the Local Workplace Induction Booklet prior to commencement

#### 4.1.8 Postgraduate Medical Education

It is the duty of Postgraduate Medical Education on the RLI & FGH sites to:

- Ensure that all new training doctors are booked on and complete Medical Induction for rotations starting February (at RLI) and August (at RLI & FGH)
- Organise and co-ordinate Medical Induction for each new intake/rotation of training doctors for February and August
- Follow up training doctors who do not complete Medical Induction
- Follow up any trainees who do not complete Corporate Induction having started the Trust outside of February and August
- Inform the Director of Medical Education of any significant compliance issues associated with Medical Induction

#### 4.1.9 Trust Specialty Training Lead (TSTL) or nominated deputy:

It is the duty of the Trust Specialty Training Lead/nominated deputy to:

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- Ensure that all new training doctors receive and complete Speciality/Departmental Induction within the given timescale
- Monitor the return of completed Speciality/Departmental Induction checklists
- Ensure that all completed Speciality/Departmental Induction checklists are retained for reference
- Ensure that a copy of all completed Speciality/Departmental Induction Checklists are forwarded to Postgraduate Medical Education
- Book trainees not attending the February and August Medical Induction onto the Corporate Induction Programme
- Inform the Director of Medical Education of any significant compliance issues associated with Speciality/Departmental Induction for training doctors

#### 4.1.10 Director of Medical Education

It is the duty of the Director of Medical Education to:

- Deal with all significant compliance issues associated with Medical Induction for training doctors
- Deal with all significant compliance issues associated with Speciality/Departmental Induction for training doctors

#### 4.1.11 Ward or Department Managers

It is the duty of Ward or Department Managers to:

- Ensure that all new contracted staff receive and complete Local Workplace Induction
- Ensure they cover/explain all the items contained in the Local Workplace Induction Checklist
- The Local Workplace Induction Checklist is accessible via the Trust's electronic Training Management System
  - This must be recorded as complete via the Trust's Training Management System

#### 4.1.12 All new employees (medical, non-medical and training doctors)

It is the duty of all new employees to:

- Attend and complete Corporate Induction (Contracted and Bank Staff) or Medical Induction (Training Doctors)
- Complete their Local Workplace Induction (Contracted and Bank Staff)
  - This must be recorded as complete via the Trust's Training Management System
- Complete their Speciality/Departmental Induction (Training Doctors)

### 4.2 Corporate Induction of Contracted and Bank Staff

#### 4.2.1 Duties

- It is the duty of **Employment Services** to ensure that all new contracted and bank staff are booked on to attend Corporate Induction
  - The "start date" for all new staff should, under normal circumstances, correspond to their planned attendance at Corporate Induction
- It is the duty of the **Learning & Organisational Development Department** to organise and co-ordinate Corporate Induction on a monthly basis at the RLI & FGH sites
- It is the duty of the **Learning & Organisational Development Department** to ensure all attendees at Corporate Induction sign the attendance sheet and also identify those individuals who "Did Not Attend"
- It is the duty of the **Learning & Organisational Development Department** to record,

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- within the TRAC system, all those who did and did not attend Corporate Induction
- It is the duty of **Employment Services** to follow up those individuals who do not attend/complete Corporate Induction (as recorded in TRAC) and rebook these individuals on to a future Corporate Induction Programme
- It is the duty of the **Divisional Management Team** to monitor and manage any significant compliance issues, within the division, associated with Corporate Induction
- It is the duty of the **Educational Governance Group** to monitor and manage any significant compliance issues, throughout the Trust, associated with Corporate Induction
- See Appendix 3 for details of the Corporate Induction process

#### 4.2.2 Content of Corporate Induction

The current programme content and timetable for Corporate Induction can be found on the Learning and Organisational Development section of the Trust Intranet:

#### 4.2.3 Process for booking all new starters on to Corporate Induction

- Employment Services will book all new contracted and bank staff onto Corporate Induction using the TRAC system (the Trust's electronic recruitment management and corporate induction booking system)
- The Learning & Organisational Development Department will use the list, within TRAC, to produce a "Attendance Register" for the Corporate Induction Programme

#### 4.2.4 Timescales for completion of Corporate Induction

- Employment Services will ensure that, once all the necessary checks and clearances are satisfactorily complete, all new contracted and bank staff are booked to attend the first available Corporate Induction Programme
  - The date upon which new staff attend Corporate Induction will, under normal circumstances, be regarded as their official "Start Date"
- In exceptional circumstances (e.g. the new contracted staff member is not fully cleared and the organisation urgently requires this person to commence work) the new starter may commence work, before the next scheduled Corporate Induction, only when:
  - The relevant Executive/Clinical Director has approved the early start date
  - A full and comprehensive risk assessment has been conducted and the necessary safeguards specified and implemented

#### 4.2.5 Recording completion of Corporate Induction

- The Learning & Organisational Development Department will:
  - Ensure all attendees at Corporate Induction sign the Corporate Induction attendance register
  - Record, within TRAC, all those who did, or did not, attend Corporate Induction

#### 4.2.6 Follow-up for those new members of staff who do not complete Corporate Induction

Employment Services will:

- Inform the relevant Department Manager if their new member of staff did not attend Corporate Induction as planned
- Where necessary, automatically rebook those who do not attend their scheduled Corporate Induction on to a future Corporate Induction programme
  - The rescheduled Corporate Induction date will, in effect, become the new "Start Date"

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#### 4.2.7 Monitoring compliance

- The Divisional Management Team will monitor and review attendance at Corporate Induction on a monthly basis
  - The Divisional Management Team will take the necessary action to address any corporate induction compliance issues within the Division
- The Learning & Organisational Development Department will produce Trust wide Corporate Induction compliance data for the Educational Governance Group
- The Educational Governance Group will:
  - Review and acknowledge receipt of Trust wide induction compliance data
  - Take the necessary action to address any issues associated with a lack of assurance and/or lack of Corporate Induction compliance throughout the Trust

#### 4.3 Medical Induction of Training Doctors

##### 4.3.1 Duties

- It is the duty of **Postgraduate Medical Education** to ensure that all new training doctors are booked on and attend Medical Induction
- It is the duty of the TSTL/nominated deputy to ensure that all new training doctors who start outside of the normal February & August rotation are booked on and attend the Corporate Induction Programme
- It is the duty of **Postgraduate Medical Education** to organise and co-ordinate Medical Induction for each new intake/rotation of training doctors starting in February and August
- It is the duty of **Postgraduate Medical Education** to follow up training doctors who do not attend Medical Induction
- It is the duty of **Postgraduate Medical Education** to inform the Director of Medical Education of any significant compliance issues associated with Medical Induction
- See Appendix 1 for details of the Medical Induction of Training Doctors process

##### 4.3.2 Minimum content of Medical Induction

The programme content and timetable for Medical Induction can be found in Appendix 2

##### 4.3.3 Process for booking all new training doctors on to Medical Induction

- The Education Centre will compile a full attendance list based on:
  - A list, provided by the "Lead Employer" and/or Health Education North West of the new training doctors who will be rotating in to this Trust
- For those training doctors, who commence "out of rotation" (training doctors normally rotate jobs in February & August), the TSTL/nominated deputy will:
  - Book the training doctor onto the next available Corporate Induction Programme

##### 4.3.4 Timescales for completion of Medical Induction

- The Medical Induction is scheduled to take place on the first Wednesday in February & August at RLI and August only at FGH. Therefore, all Training Doctors, who rotate jobs at these set times/dates, will complete Medical Induction within 1 week from commencement
- For Foundation Doctors Shadowing and Medical Induction takes place two weeks prior to commencement
- Training doctors who start "out of rotation" and who attend the Corporate Induction programme should complete this within 1 month from commencement

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#### 4.3.5 Recording completion of Medical Induction

- Postgraduate Medical Education will:
  - Ensure all attendees at Medical Induction sign the attendance register
  - Maintain a database of all the training doctors that attend Medical Induction

#### 4.3.6 Follow-up of those new training doctors who do not complete Medical Induction

- For those training doctors (Core Trainees & Specialist Trainees) who do not complete Medical Induction, Postgraduate Medical Education will:
  - Inform the TSTL/nominated deputy
- It is the duty of the TSTL/nominated deputy to:
  - Ensure that these training doctors are booked on to the next available Corporate Induction Programme
- For those training doctors (Foundation Doctors & GP Trainees) who do not complete Medical Induction, Postgraduate Medical Education will:
  - Book them on to the next available Corporate Induction Programme

#### 4.3.7 Monitoring compliance

- Postgraduate Medical Education will:
  - Maintain a database of all new training doctors
  - Record completion of Medical Induction for each new training doctor
  - Identify any significant Medical Induction compliance issues and report these to the Director of Medical Education
- The Director of Medical Education will:
  - Decide upon and initiate any necessary action to deal with all identified Medical Induction compliance issues

### 4.4 Local Induction of Contracted Staff

#### 4.4.1 Duties

- It is the duty of all **Ward or Department Managers** to ensure that all new contracted staff receive and complete Local Workplace Induction
- It is the duty of all **New Employees (Contracted Staff)** to ensure they record, via the Training Management System (TMS), completion of their Local Workplace Induction
- It is the duty of the **Divisional Management Team** to monitor and review completion of local workplace induction on a monthly basis
  - It is also the duty of the **Divisional Management Team** to take the necessary action to address any local workplace induction compliance issues within the Division
- It is the duty of the **Learning & Organisational Development Department** to produce Trust wide Local Workplace Induction compliance data for the Educational Governance Group
- It is the duty of the **Educational Governance Group** to:
  - Review and acknowledge receipt of Trust wide induction compliance data
  - Take the necessary action to address any issues associated with a lack of assurance and/or lack of Corporate Induction compliance throughout the Trust
- See Appendix 5 for details of the Local Induction of Contracted Staff process

#### 4.4.2 Minimum content of Local Induction

The current version of the Local Workplace Induction Checklist can be found on the Trust's

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Training Management System [within the “Mandatory (Core Skills) Training” section]:

- <http://tms>

#### 4.4.3 Timescales for completion of Local Induction

- The Department Manager, in conjunction with the new starter, must ensure the new starter completes their Local Induction within the first month from commencement
- Completion of Local Induction should be discussed and confirmed as part of the Trust’s ‘Probationary Period’ discussions between the new starter and their manager

#### 4.4.4 Recording completion of Local Induction

- Department Managers must ensure all new starters are set up with an IT login account and a Training Management System account so that completion of Local Workplace Induction can be recorded
- New Employees in conjunction with their manager must record, via the Training Management System, when they have fully completed their Local Workplace Induction

#### 4.4.5 Follow-up for those new members of staff who do not complete Local Workplace Induction

- The Divisional Management Team will monitor and review completion of Local Workplace Induction on a monthly basis
  - The Divisional Management Team will take the necessary action to address any corporate induction compliance issues within the Division

#### 4.4.6 Monitoring compliance

- The Divisional Management Team will monitor and review completion of Local Workplace Induction on a monthly basis
  - The Divisional Management Team will take the necessary action to address any Local Workplace Induction compliance issues within the Division
- The Learning & Organisational Development Department will produce Trust wide Local Workplace Induction compliance data for the Educational Governance Group
- The Educational Governance Group will:
  - Review and acknowledge receipt of Trust wide induction compliance data
  - Take the necessary action to address any issues associated with a lack of assurance and/or lack of Local Workplace Induction compliance throughout the Trust

### 4.5 Local Induction of Bank Staff

#### 4.5.1 Duties

- It is the duty of the Additional Staffing Department to ensure that all new bank staff receive and complete Local Workplace Induction
- It is the duty of all Additional Staffing Department to ensure they record, via the Training Management System (TMS), completion of their Local Workplace Induction
- It is the duty of the Additional Staffing Department to monitor and review completion of local workplace induction on a monthly basis
  - It is also the duty of the Additional Staffing Department to take the necessary action to address any local workplace induction compliance issues with bank staff
- It is the duty of the **Learning & Organisational Development Department** to produce Trust wide Local Workplace Induction compliance data for the Workforce Assurance Committee on a 2 monthly basis

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- It is the duty of the **Educational Governance Group** to:
  - Review and acknowledge receipt of Trust wide induction compliance data
  - Take the necessary action to address any issues associated with a lack of assurance and/or lack of Local Workplace Induction compliance throughout the Trust

#### 4.5.2 Timescales for completion of Local Induction

- The Additional Staffing Department, in conjunction with the new starter, must ensure the new starter completes their Local Induction within the first month from commencement

#### 4.5.3 Recording completion of Local Induction

- Additional Staffing Department must ensure all new starters are set up with an IT login account and a Training Management System account so that completion of Local Workplace Induction can be recorded
- The Additional Staffing Department must record, via the Training Management System, when the new starter has fully completed their Local Workplace Induction

#### 4.5.4 Follow-up for those bank staff who do not complete Local Workplace Induction

- The Additional Staffing Department will monitor and review completion of Local Workplace Induction on a monthly basis
  - The Additional Staffing Department will take the necessary action to address any local workplace induction compliance issues

#### 4.5.5 Monitoring compliance

- The Additional Staffing Department will monitor and review completion of Local Workplace Induction on a monthly basis
  - The Additional Staffing Department will take the necessary action to address any Local Workplace Induction compliance issues within the Division
- The Learning & Organisational Development Department will produce Trust wide Local Workplace Induction compliance data for the Workforce Assurance Committee on a monthly basis
- The Educational Governance Group will:
  - Review and acknowledge receipt of Trust wide induction compliance data
  - Take the necessary action to address any issues associated with a lack of assurance and/or lack of Local Workplace Induction compliance throughout the Trust

### 4.6 Speciality / Departmental Induction of Training Doctors

#### 4.6.1 Duties

- It is the duty of the TSTL or nominated deputy to ensure that all new training doctors receive and complete Speciality/Departmental Induction within the given timescale
- It is the duty of the TSTL or nominated deputy to monitor the return of complete induction checklists
- It is the duty of the TSTL or nominated deputy to ensure that all completed Speciality/Departmental Induction Checklists are retained for reference with copies to Postgraduate Medical Education for Health Education North West monitoring purposes
- It is the duty of the TSTL or nominated deputy to inform the Director of Medical

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Education of any significant compliance issues associated with  
Speciality/Departmental Induction

- It is the duty of the **Director of Medical Education** to deal with all significant Speciality/Departmental Induction compliance issues
- See Appendix 7 for details of the Speciality/Departmental Induction of Training Doctors process
- See Appendix 2 for details of the Speciality/Departmental Induction Register/Checklist

#### 4.6.2 Minimum content of Speciality/Departmental Induction

The Local (Specialty) Induction Checklist can be found in Appendix 2.

#### 4.6.3 Timescales for completion of Speciality/Departmental Induction

The TSTL or nominated deputy must ensure all new training doctors complete Speciality/Departmental Induction within the first week of commencement

#### 4.6.4 Recording completion of Speciality/Departmental Induction

- The TSTL/nominated deputy will:
  - Collect all completed Speciality/Departmental Induction Checklists
  - Retain for reference all completed speciality induction checklists
  - Forward a copy of the completed checklist to Postgraduate Medical Education

#### 4.6.5 Follow-up for those new members of staff who do not complete Speciality/Departmental Induction

- The TSTL/nominated deputy will:
  - Ensure that all induction checklists are returned within 1 week from commencement

#### 4.6.6 Monitoring compliance

- The TSTL/nominated deputy will:
  - Monitor the return of completed Speciality/Departmental Induction checklists for each new intake/rotation of training doctors
  - Inform the Director of Medical Education of any significant compliance issues associated with Speciality/Departmental Induction
- The Director of Medical Education will:
  - Decide upon and initiate any necessary action to deal with all identified Speciality/Departmental Induction compliance issues

### 4.7 Local Induction of Agency Staff

#### 4.7.1 Duties

- It is the duty of **HB Retinue** to ensure that all the staffing agencies used by the Trust are provided with an electronic copy of the Local Workplace Induction Booklet for agency staff
- It is the duty of the **Staffing Agency** to ensure all agency staff receive a copy of the Local Workplace Induction Booklet prior to commencement of work within the Trust
- It is the duty of the **Medical Staffing Coordinator (or equivalent)** to monitor the return of completed and signed Local Workplace Induction Booklets
- It is the duty of the **Medical Staffing Coordinator (or equivalent)** to retain, for future reference, copies of all complete Local Workplace Induction Booklets
- It is the duty of the **Medical Staffing Coordinator (or equivalent)** to inform HB

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Retinue & the member of agency staff if the Local Workplace Induction Booklet is not returned within the given timescale

- It is the duty of the **Medical Staffing Coordinator (or equivalent)** to follow up all agency staff who do not complete, sign and return the Local Workplace Induction Booklet
- It is the duty of the **Medical Staffing Coordinator (or equivalent)** to inform the Divisional Management Team of all significant Local Induction for agency staff compliance issues
- It is the duty of the **Divisional Management Team** to deal with all significant Local Induction compliance issues
- It is the duty of the **Divisional Management Team** to inform the Workforce Assurance Committee of all significant Local Induction compliance issues that cannot be resolved at divisional level
- It is the duty of the **Educational Governance Group** to deal with all significant Local Induction compliance issues that cannot be resolved at divisional level

#### 4.7.2 Minimum content of Local Induction (agency staff)

The Local Workplace Induction Booklet can be found on the Learning & Organisational Development section of the Trust Intranet:

#### 4.7.3 Timescales for completion of Local Induction (agency staff)

The Agency Worker must ensure that they sign and return the local induction booklet within 1 week from commencement

#### 4.7.4 Recording completion of Local Induction (agency staff)

- Medical Staffing Coordinator (or equivalent) will:
  - Monitor the return of local workplace induction booklets
  - Retain, for future reference, all completed local induction booklets

#### 4.7.5 Follow-up for those agency staff who do not complete Local Workplace Induction

- Medical Staffing Coordinator (or equivalent) will:
  - Inform HB Retinue if the induction booklet is not returned within 1 week from commencement
- The Staffing Agency, when informed by Medical Staffing Coordinator (or equivalent), will:
  - Follow up and remind their agency staff of the importance and need to complete and return the induction booklet

#### 4.7.6 Monitoring compliance

- Medical Staffing Coordinator (or equivalent) will:
  - Produce Quarterly Local Induction Exception Reports for Divisional Management Teams. These reports will include:
    - A list of the outstanding local induction booklets
    - Recommendations, where appropriate, for addressing compliance issues
- The Divisional Management Teams will:
  - Acknowledge and record (typically as part of their Divisional Governance Assurance Group meetings) receipt of the Quarterly Local Induction Report
  - Record the necessary action and follow up to address any compliance issues
- The Educational Governance Group will:

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- Acknowledge and record (in the notes of the committee) receipt of all local induction for agency staff compliance issues reported by the divisional management teams
- Record (in the notes of the committee) the necessary action and associated follow up to address all reported local induction for agency staff compliance issues

#### 4.8 Monitoring Compliance

Adherence to this policy will be monitored and reported as detailed in appendix 9.

#### Key Performance Indicators

1. 95% of all new starters attend Corporate Induction on their first day of commencement
2. 95% of all rotational training doctors attend and complete Medical Induction (training doctors) within 1 week from commencement
3. 95% of all training doctors who start “out of rotation” attend and complete Corporate Induction within 1 month from commencement
4. 95% of all new contracted staff completed Local Workplace Induction within the first month from commencement
5. 95% of all new bank staff completed Local Workplace Induction within the first month from commencement
6. 95% of all training doctors completed their Speciality/Departmental Induction within 1 week from commencement
7. 95% of all agency staff completed their Local Workplace Induction within 1 week from commencement

Adherence to the policy may also be periodically audited by the internal audit department as part of the review of internal controls.

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<b>5. ATTACHMENTS</b>	
<b>Number</b>	<b>Title</b>
1	Doctors' Induction Programme
2	Department Induction Register for Trainee Doctors
3	Flowchart - Corporate Induction (Contracted Staff)
4	Flowchart – Medical Induction (Training Doctors)
5	Flowchart – Local Induction (Contracted Staff)
6	Flowchart – Local Induction (Bank Staff)
7	Flowchart – Specialty/Departmental Induction (Training Doctors)
8	Flowchart – Local Induction (Temporary/Agency Staff)
9	Monitoring Compliance
10	Equality and Diversity Impact Assessment Tool

<b>6. OTHER RELEVANT / ASSOCIATED DOCUMENTS</b>	
<b>Unique Identifier</b>	<b>Title and web links from the document library</b>

<b>7. SUPPORTING REFERENCES / EVIDENCE BASED DOCUMENTS</b>	
<b>References in full</b>	
<b>Number</b>	<b>References</b>
1	
2	
3	

<b>8. DEFINITIONS / GLOSSARY OF TERMS</b>	
<b>Abbreviation or Term</b>	<b>Definition</b>
TSTL	Trust Specialty Training Lead
TRAC	
GP	General Practitioner
TMS	Training Management System
L&OD	Learning and Organisational Development

<b>9. CONSULTATION WITH STAFF AND PATIENTS</b>	
Enter the names and job titles of staff and stakeholders that have contributed to the document	
<b>Name</b>	<b>Job Title</b>
Carl Hunter	Learning & Development Specialist
Kate Casey	Head of Learning and Organisational Development
Gertie NicPhilib	Deputy Director of Workforce
John Barstow	Workforce Business Partner - Employment Services
Julie Mallinder	Manager – Additional Staffing Department
Mary Shimwell	Professional Lead - Additional Staffing Department
Shahedal Bari	Director of Medical Education
Leanne Benson	Medical Education Manager
Lesley Woodhouse	Medical Education Manager

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<b>10. DISTRIBUTION PLAN</b>	
Dissemination lead:	Carl Hunter, Learning & Development Specialist
Previous document already being used?	Yes
If yes, in what format and where?	Available on the Intranet
Proposed action to retrieve out-of-date copies of the document:	Replace document on the Trust Intranet – Policy Library
<b>To be disseminated to:</b>	
Document Library	
Proposed actions to communicate the document contents to staff:	New documents uploaded to the Document Library

<b>11. TRAINING</b>		
Is training required to be given due to the introduction of this procedural document? No		
<b>Action by</b>	<b>Action required</b>	<b>Implementation Date</b>

<b>12. AMENDMENT HISTORY</b>				
Version No.	Date of Issue	Page/Selection Changed	Description of Change	Review Date
5	August 2012	All	Complete revision to ensure compliance with the <ul style="list-style-type: none"> <li>Trust policy for the development and management of procedural documents</li> <li>2012/13 NHSLA standards</li> </ul>	July 2014
5.1	July 2013	Section 8	Revised to reflect HB Retinue as the Trusts' primary Temporary Staffing Agency	July 2014
6	October 2014	All	Complete revision to ensure compliance with the revised arrangements for Corporate and Local Workplace Induction	November 2016
6.1		Front Cover	Review dated extended Form No. 100/2016	01/12/2016
6.2		Front Cover	Review dated extended Form No. 113/2016	01/06/2017
7	June 2017		Revised to reflect: <ul style="list-style-type: none"> <li>The role of the Trust Speciality Training Lead (TSTL)</li> <li>Local Workplace Induction arrangements</li> </ul>	June 2018

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<b>12. AMENDMENT HISTORY</b>				
<b>Version No.</b>	<b>Date of Issue</b>	<b>Page/Selection Changed</b>	<b>Description of Change</b>	<b>Review Date</b>
			for bank staff	
7.1	04/10/2017	Page 4	BSF page added	01/10/2018
7.2	04/06/2018	Front Cover	Title changed: 2016 – 2018 removed. Review date extended to a 3 year review.	01/06/2020

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## Appendix 1:

### Doctors' Induction Programme Wednesday, 3 August 2016 Education Centre, Royal Lancaster Infirmary

Time	Subject	Name	Room
08.00-08.15	Registration	Centre Staff	Reception
08.15	Welcome	Dr Marwan Bukhari, Associate Director of Medical Education	Lecture Theatre
08.30	Trust Visions and Values	Dr Shahedal Bari, Deputy Medical Director	Lecture Theatre
08.45	Radiology Referrals	Dr Sameer Shamshuddin	Lecture Theatre
09.00	Death Certification	Dr Don McGowan	Lecture Theatre
09.15	Consent	Dr Mahesh Kumar	Lecture Theatre
<b>You will be directed to each station by a member of staff</b>			
09.30	<ul style="list-style-type: none"> <li>• Infection Control</li> <li>• Prescribing</li> <li>• ANTT, Forms and Bottles</li> <li>• BLS</li> <li>• Employment Checks</li> <li>• SMART card</li> <li>• ID Badges</li> <li>• Transfusion</li> <li>• USB Collection</li> <li>• Resus Course Checks</li> </ul>	<ul style="list-style-type: none"> <li>• Dr Telford &amp; Bryan Rackstraw</li> <li>• Pharmacy Team</li> <li>• Clinical Skills Team</li> <li>• Resuscitation Team</li> <li>• Johanne Herman</li> <li>• Health Informatics Team</li> <li>• Employment Services</li> <li>• Jill Livingstone</li> <li>• Medical Education Team</li> <li>• Leanne McManoman</li> </ul>	<ul style="list-style-type: none"> <li>• Clinical Skills Lab</li> <li>• Seminar Room 6</li> <li>• Clinical Skills Lab</li> <li>• Lecture Theatre</li> <li>• Seminar Room 1</li> <li>• Seminar Room 2</li> <li>• Dental Skills Lab</li> <li>• Clinical Skills Lab</li> <li>• Seminar Room 3</li> <li>• Seminar Room 1</li> </ul>
<b>Lunch time market stall</b> - Lunch will be provided You will have an opportunity to meet representatives from:			
12.15	<ul style="list-style-type: none"> <li>• Bereavement office</li> <li>• Car Parking</li> <li>• Clinical Audit</li> <li>• Complaints/PALS</li> <li>• GSF/Macmillan</li> <li>• Hospital at Night</li> <li>• Library Registration</li> <li>• Organ Donation</li> <li>• Research and Development</li> <li>• Undergraduate Opportunities</li> <li>• BMA</li> <li>• Foresters</li> <li>• Wesleyan</li> <li>• Medical Education and Medical Leadership Programmes</li> <li>• CETAD</li> <li>• Better Care Together</li> </ul>	<p>Lindsay Pinch Gavin Darby Joanne Smith Steve Greaves &amp; Steph Ayres Gerrard Kenyon/Elaine Hemingway</p> <p>Fiona Bowery Library Team Sarah Ralley Dr J Pearson Undergraduate Team</p> <p>Debbie Simpson &amp; Nicky Bassnett</p> <p>Better Care Together team</p>	Seminar Room 5
13.15	Go to Lorenzo training/ Departmental Induction	Details in your induction folder	

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Appendix 2:

### Department Induction Register for Trainee Doctors

Date:

Venue:

Department:

As an organisation we have a responsibility to ensure that all Trainee Doctors receive a Departmental Induction to ensure that they are provided with the necessary support and training to enable them to start work safely and effectively.

You are signing this register to confirm that the Departmental Induction checklist has covered all the required aspects and that you understand the induction information. The checklist will be signed by the Clinical Induction Lead and the Administrative Induction Lead. A copy of the register and checklist will be sent to the Education Centre as evidence of compliance. If you feel that any area has been missed, and you require further information, please bring it to the attention of your Clinical Induction Lead.

Name	Signature

Please retain for Department records and forward a copy to the relevant Education Centre

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## Department Induction for Trainee Doctors

The following must be completed and signed off by the appropriate lead. Those areas marked with an \* must be completed on day one and the outstanding areas covered within the first week of appointment.

Key:

Covered by the Postgraduate Medical Education Department at the Medical Induction Programme
To be delivered by the Department Admin Lead
To be delivered by the Clinical Induction Lead/Nominated Lead

THE WARD/DEPARTMENT	
<i>The list below represents examples of topics to be covered. It is not an exhaustive list and should be personalised according to the requirements of the department. Subjects that are not applicable should be marked 'N/A'. *Please sign each subject matter once it has been delivered*</i>	
Subject:	Signed by:
*Orientation to the ward/department and any other areas within the organisation relevant to post	
*Orientation of the hospital	
*Medical Induction pack and USB stick received	<b>PGME provide a Medical Induction USB stick/Pack. A pack will be left with the department for trainees starting outside of August/February.</b>
*Department Introduction pack received and discussed	
*Security pass, keys, access codes, if applicable	
Car Parking Permits	<b>To be organised by the Department for trainees starting outside of February/August.</b>
Catering and washroom facilities if applicable	
Explain the function and structure of the ward/department	
*Allocation of Educational /Clinical Supervisor	
*Introduction to key individuals within the ward/department	

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<p>*Explanation of</p> <ul style="list-style-type: none"> <li>the job role</li> <li>the job description (mapped to curriculum)</li> <li>duties</li> </ul>	
<p>*Confirm hours of work and shift patterns/banding, breaks where applicable</p>	
<p>*On call and bleep, rota and on-call swap arrangements</p>	
<p>*Leave procedure (including annual/study/interview)</p>	
<p>*Sickness procedures and notification process</p>	
<p>*Monitoring and EWTD</p>	
<p>*Process to follow after an inoculation injury</p>	
<p>*Resuscitation training - evidence/experience</p>	<p><b>Departments are responsible for ensuring all new starters undertake BLS training for trainees starting outside of February/August.</b></p> <p><b>The Local Resus Officer will provide BLS training at Medical Induction in February and August.</b></p> <p><b>Trainees are asked to provide the PGME Department with proof of BLS, ILS ALS etc. Details of training will be forwarded to relevant departments for action.</b></p> <p><b>Departments are responsible for ensuring all staff have the relevant requirements.</b></p>
<p>*Resuscitation procedures:</p> <ul style="list-style-type: none"> <li>equipment</li> <li>procedures</li> <li>crash trolley location</li> <li>emergency telephone numbers</li> <li>the Resus Policy</li> </ul>	
<p>*Generic Fire safety procedures (FT3):</p> <ul style="list-style-type: none"> <li>fire exits</li> <li>equipment</li> <li>alarms</li> <li>emergency telephone numbers</li> <li>evacuation procedures</li> <li>the Fire Safety Policy</li> </ul>	<p><b>Covered by the Junior Doctors' Mandatory Training Passport. Completion of training will be monitored by PGME.</b></p>
<p>*Department fire safety procedures (FT1):</p> <ul style="list-style-type: none"> <li>fire exits/doors</li> <li>equipment</li> <li>evacuation procedures</li> <li>Assembly Point</li> <li>Fire safety rules</li> <li>Fire call points</li> </ul>	
<p>Moving &amp; handling procedures:</p> <ul style="list-style-type: none"> <li>equipment</li> <li>procedures</li> <li>lifting and handling regulations</li> <li>the Moving and Handling Policy</li> </ul>	<p><b>The following modules must be booked via TMS as they need to be physically done/undertaken by local moving and handling key trainer: C-F: Sitting, Standing and Walking; Bed Mobility and Lateral Transfer</b></p>

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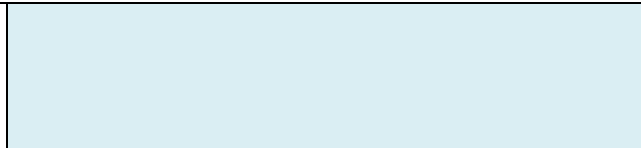
	<b>General information is covered by the Junior Doctors' Mandatory Training Passport.</b>
<p>*Medicines safety procedures:</p> <ul style="list-style-type: none"> <li>• pharmacy and local protocols</li> <li>• prescription</li> <li>• administration</li> <li>• standard operating procedures</li> <li>• medications common to area</li> <li>• the Medicine Management Policy</li> </ul>	
<p>*Incident reporting procedures:</p> <ul style="list-style-type: none"> <li>• Intranet reporting arrangements</li> <li>• The Incident Reporting Policy</li> </ul>	
<p>Infection control procedures:</p> <ul style="list-style-type: none"> <li>• hand hygiene procedures</li> <li>• infection status of clinical setting</li> <li>• the Infection Control Policy</li> </ul>	<p><b>ANTT assessment will need to be undertaken by an assessor in your department</b></p> <p><b>Subject covered in the Trainee Doctors' Mandatory Training Passport.</b></p>
<p>*Explanation of key documents(crucial policies and procedures) used within the ward/department</p> <ul style="list-style-type: none"> <li>• care pathways</li> <li>• patient records</li> <li>• observation charts</li> <li>• handover</li> <li>• mortality</li> <li>• death certification</li> <li>• clinical procedures</li> <li>• consent</li> <li>• discharge</li> <li>• VTE prophylaxis</li> </ul>	
<p>Explanation of key equipment used within the ward/department and training requirements</p> <ul style="list-style-type: none"> <li>• monitoring equipment</li> <li>• specialist equipment</li> <li>• decontamination</li> <li>• online monitoring on TMS</li> </ul>	<p><b>The department will need to ensure that trainees have passwords and have undertaken training for the ABG kit.</b></p>
<p>*Explanation of</p> <ul style="list-style-type: none"> <li>• handover arrangements</li> <li>• who to contact if there are any issues with education and service balance</li> <li>• pharmacy/GMC stamp – does the trainee have one?</li> </ul>	<p><b>The department will need to ensure that the trainee has a Pharmacy/GMC stamp.</b></p>
<p>*Health and safety procedures:</p> <ul style="list-style-type: none"> <li>• security</li> <li>• COSHH</li> <li>• sharps and non-safe sharps risk assessments</li> <li>• waste disposal</li> <li>• VDU regulations</li> <li>• The Health and Safety Policy</li> </ul>	

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Explanation of teaching opportunities within the department

- multidisciplinary meetings
- clinics
- theatres



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**\*IMPORTANT\* IDENTIFICATION BADGE, IT LOG-IN AND SMART CARD:**

Please arrange for trainees starting the Trust outside of February and August to have an identification badge, IT Log-in and Smart Card (this is arranged by the PGME Department for trainees starting in August and February).

**\*IMPORTANT\* TRUST CORPORATE INDUCTION PROGRAMME:**

It is mandatory for all trainees to attend a Trust/Medical Induction Programme and the Trust is monitored by HENW/GMC for compliance. Therefore please book trainees, starting outside of February and August, onto the Trust Corporate Induction Programme and confirm dates:

Name(s):

Date(s) Booked:

Please complete details as evidence of departmental induction

Name of Clinical Induction Lead.....

Signature.....

Designation/Title.....

Administrative Induction Lead.....

Signature.....

Designation/Title.....

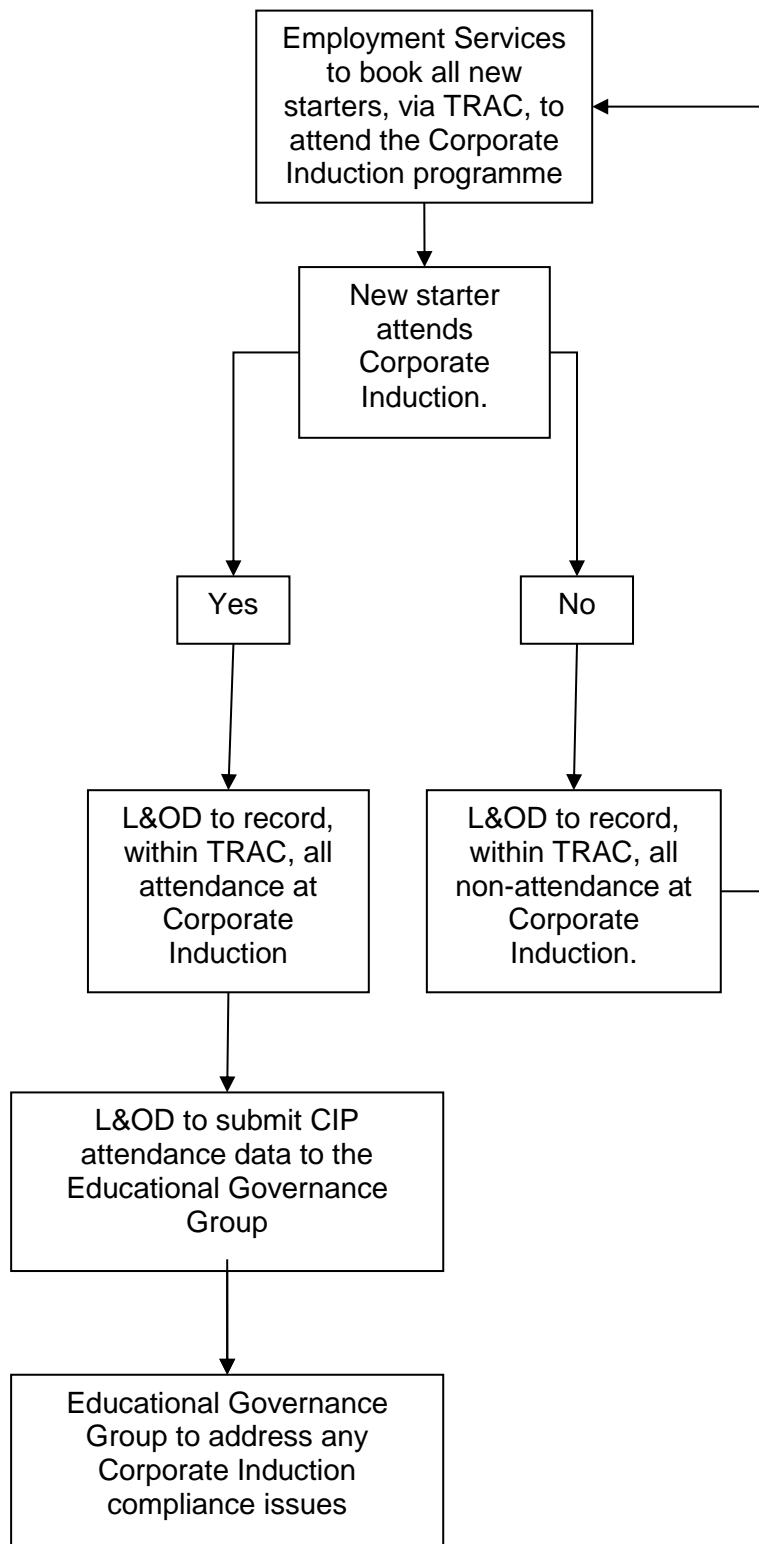
Department.....

Directorate.....

Date of Induction.....

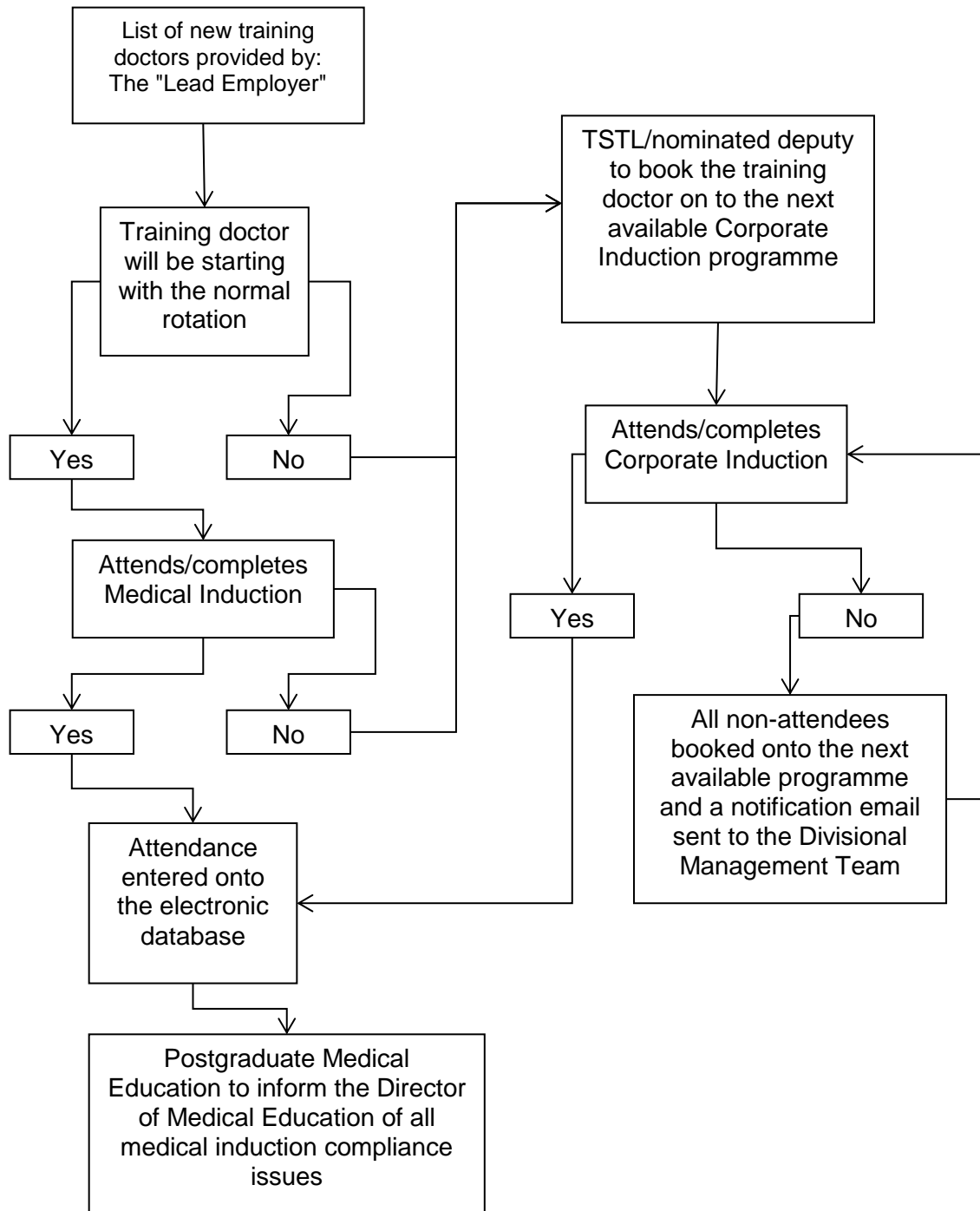
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### Appendix 3: Flowchart - Corporate Induction (Contracted and Bank Staff)



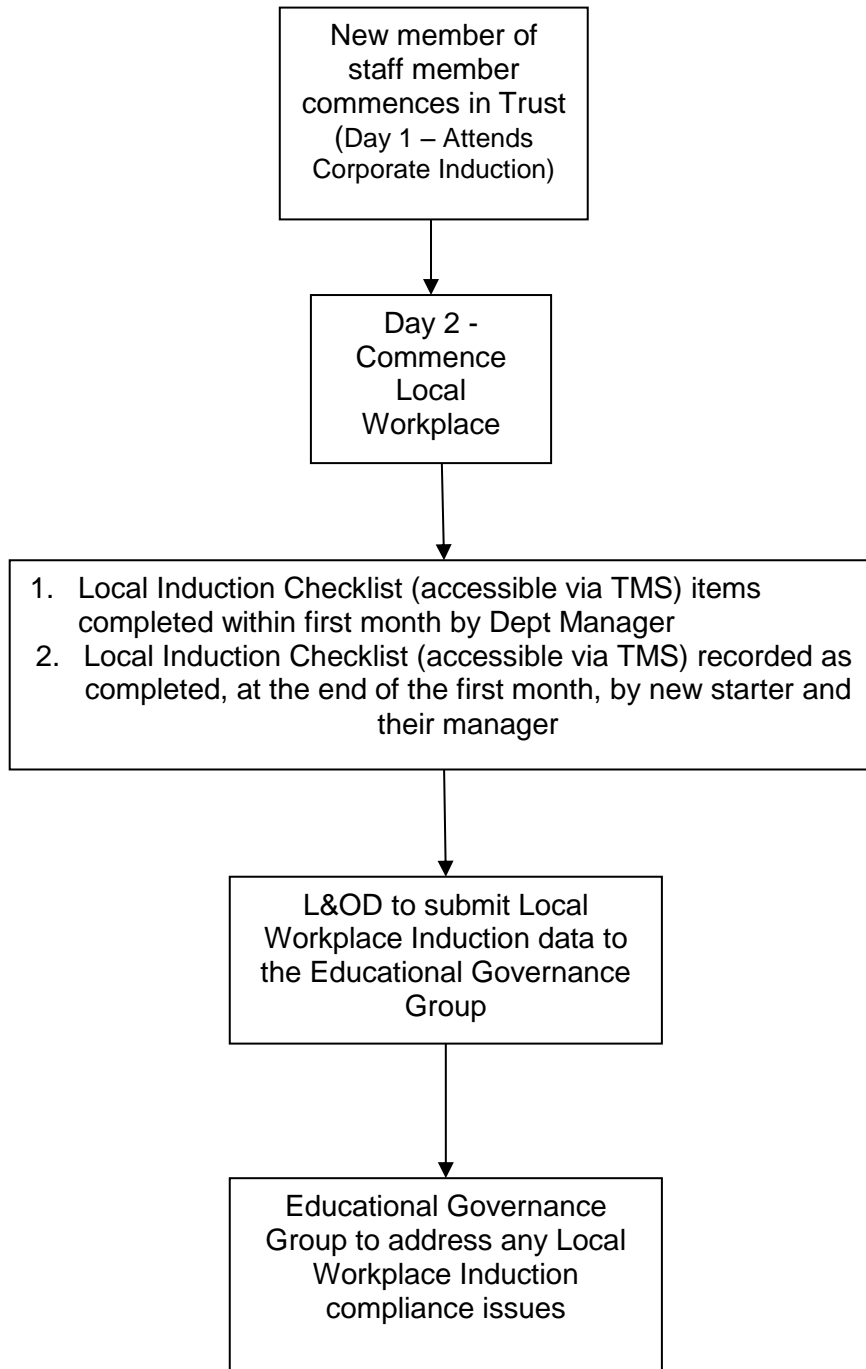
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## Appendix 4: Flowchart – Medical Induction (Training Doctors)



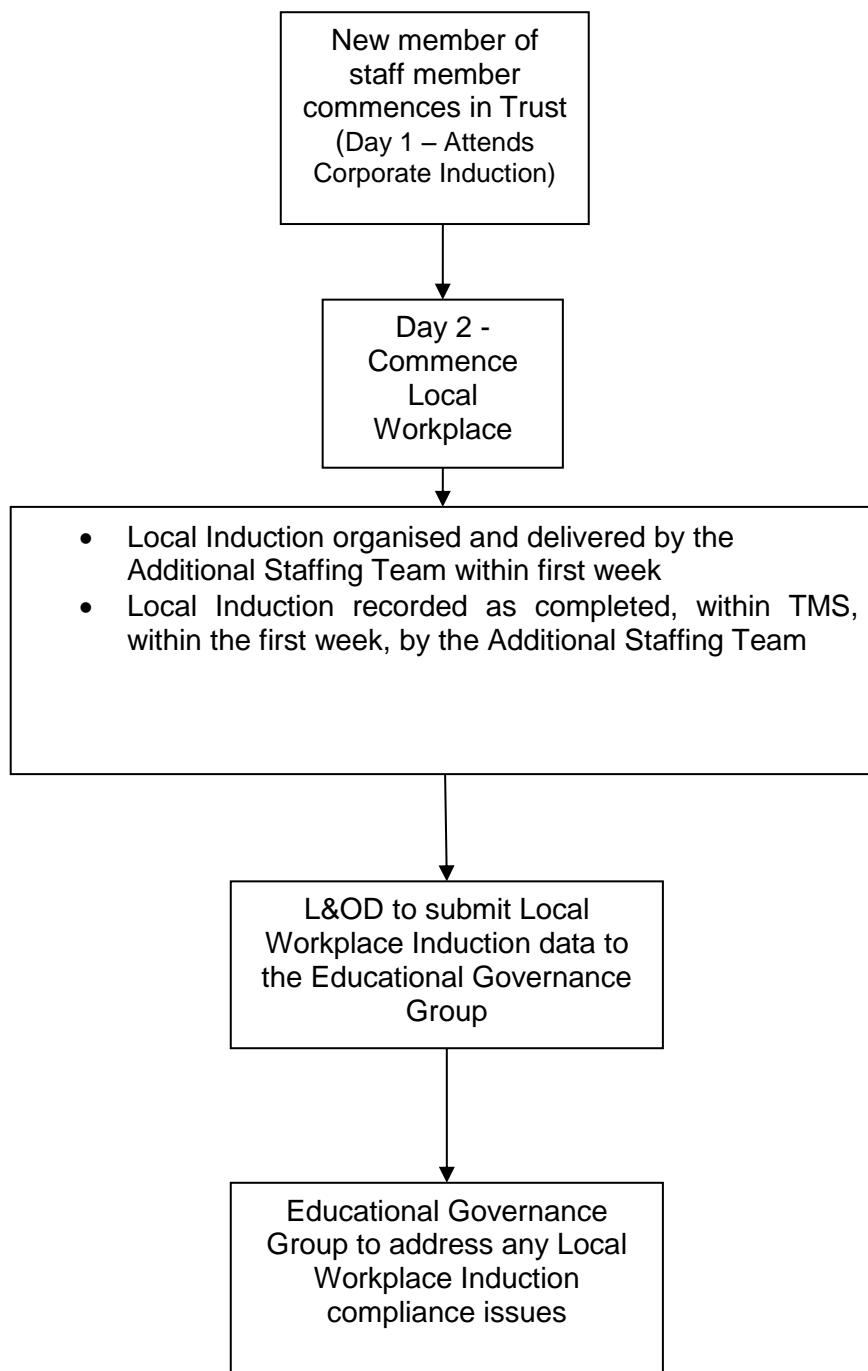
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## Appendix 5: Flowchart – Local Induction (Contracted Staff)



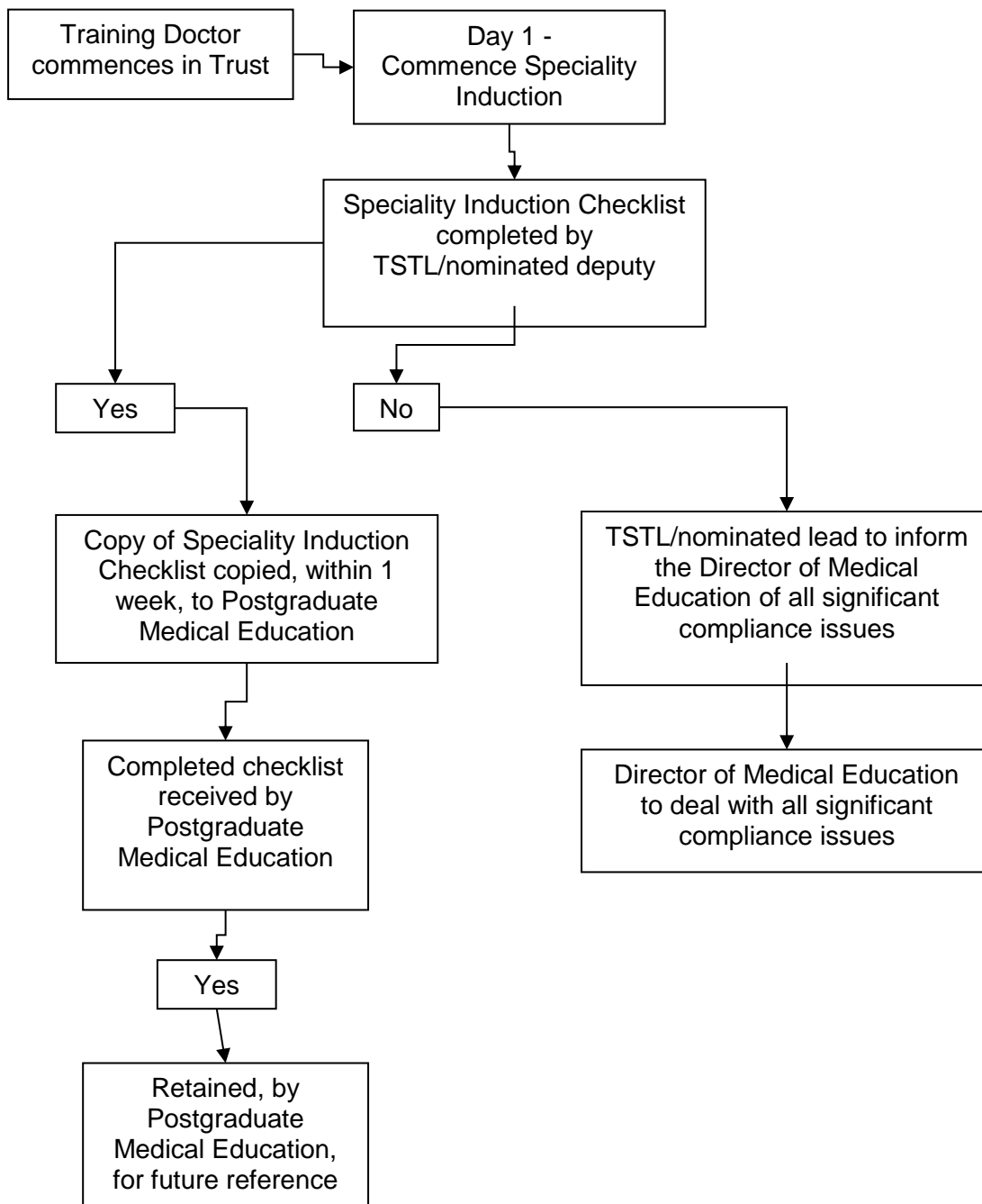
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## Appendix 6: Flowchart – Local Induction (Bank Staff)



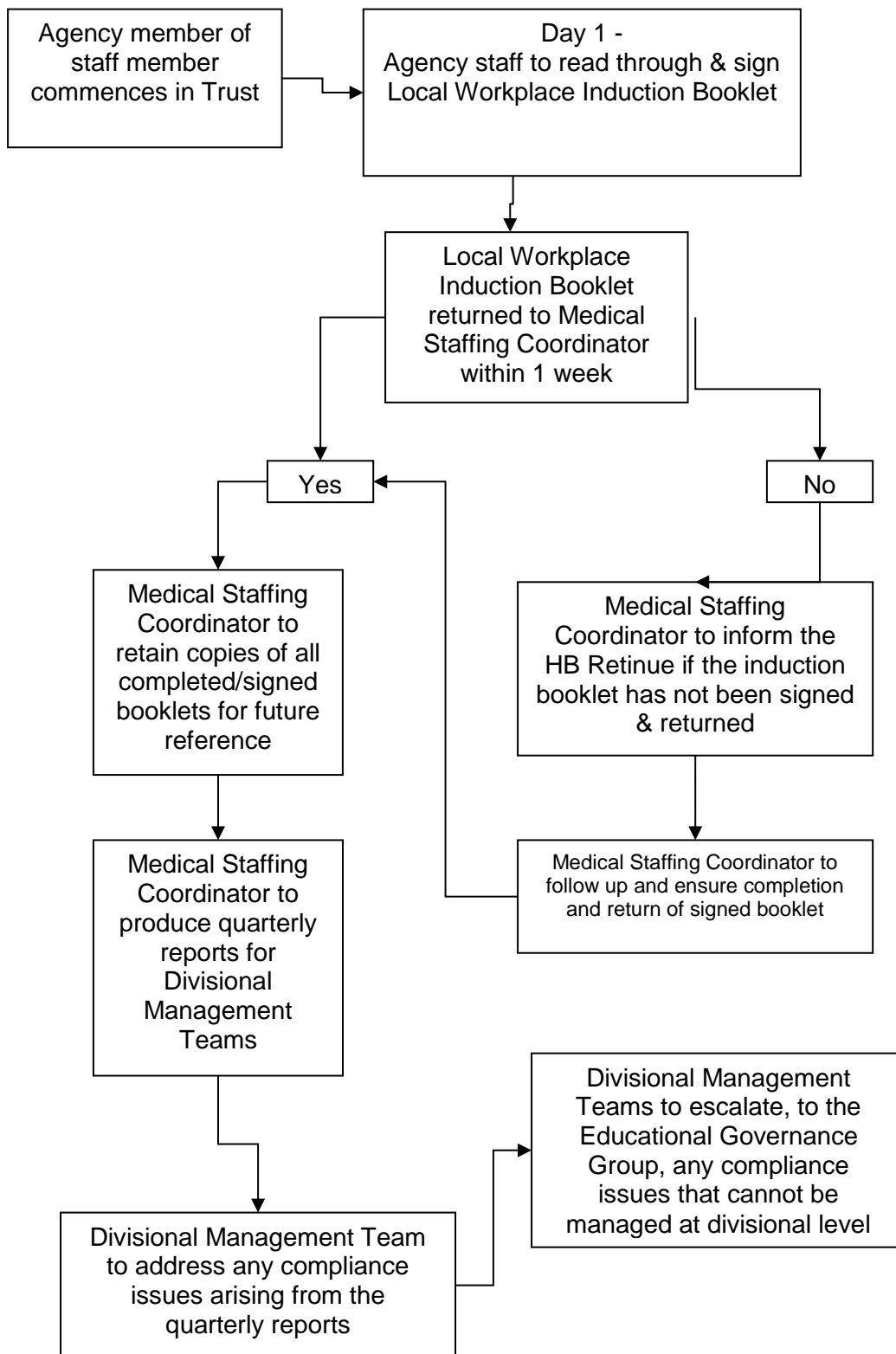
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## Appendix 7: Flowchart – Specialty/Departmental Induction (Training Doctors)



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## Appendix 8: Flowchart – Local Induction (Temporary / Agency Staff)



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## Appendix 9: Monitoring Compliance

Requirement	Method	Frequency	Lead	Monitoring Group	Action plan lead	Committee/group overseeing Action Plan
<b>Recording completion</b> of Corporate Induction	1. Retention of attendance sheets 2. Updating of the TRAC system 3. Updating of the TMS	Monthly	L&OD Department	Divisional Management Team	Divisional General Manager	Educational Governance Group
<b>Follow up of those who do not attend/complete</b> Corporate Induction	1. Updating of the TRAC system 2. DNA's booked to attend the following Corporate Induction	Monthly	1. L&OD Department 2. Employment Services	Divisional Management Team	Divisional General Manager	Educational Governance Group
<b>Recording completion</b> of Medical Induction (training doctors)	Maintenance of database/spread sheet	On-going	Postgraduate Medical Education	Postgraduate Medical Education Group	Director of Medical Education	Postgraduate Medical Education Group
<b>Follow up of those who do not attend/complete</b> Medical Induction (training doctors)	1. Divisional Management Team (DMT) informed 2. Booked to attend the next Corporate Induction Programme	On-going	TSTL/nominated deputy	Postgraduate Medical Education Group	Director of Medical Education	Postgraduate Medical Education Group
<b>Recording completion</b> of Local Induction	Completion of on-line checklist (accessible via TMS)	Monthly	1. Department Manager 2. New Employee	Divisional Management Team	Divisional General Manager	Educational Governance Group
<b>Follow up of those that do not complete</b> Local Induction	1. TMS Compliance Report	Monthly	Workforce Team	Divisional Management Team	Divisional General Manager	Educational Governance Group
<b>Recording completion</b> of Speciality Induction (training doctors)	1. Completed checklists stored in departments 2. Copies sent to Postgraduate Medical Education	On-going	TSTL/nominated deputy	Postgraduate Medical Education Group	Director of Medical Education	Postgraduate Medical Education Group
<b>Follow up of those that do not complete</b> Speciality Induction (training doctors)	Email to Clinical Speciality lead if the checklist is not copied to Postgraduate Medical Education	On-going	Postgraduate Medical Education	Postgraduate Medical Education Group	Director of Medical Education	Postgraduate Medical Education Group
<b>Recording completion</b> of Local Induction (Agency staff)	Completed checklists retained by Medical Staffing Coordinators (or equivalent)	On-going	Medical Staffing Coordinators (or equivalent)	Divisional Management Team	Divisional General Manager	Divisional Management Team
<b>Follow up of those that do not complete</b> Local Induction (Agency staff)	1. Email and/or phone call to HB Retinue 2. Exception Report to Divisional Management Team (DMT)	On-going Quarterly	Medical Staffing Coordinators (or equivalent)	Divisional Management Team	Divisional General Manager	Divisional Management Team
<b>Key Performance Indicators</b>	TMS Compliance Reports to the Workforce Assurance Committee	2 Monthly	L&D Department	Educational Governance Group	Director of Workforce	Educational Governance Group



### Equality Impact Assessment Form

Department/Function	Learning & Organisational Development			
Lead Assessor	Carl Hunter			
What is being assessed?	Staff Induction 2016-18			
Date of assessment	12 <sup>th</sup> June 2017			
What groups have you consulted with? Include details of involvement in the Equality Impact Assessment process.	Equality of Access to Health Group	<input type="checkbox"/>	Staff Side Colleagues	<input checked="" type="checkbox"/>
	Service Users	<input type="checkbox"/>	Staff Inclusion Network/s	<input type="checkbox"/>
	Personal Fair Diverse Champions	<input checked="" type="checkbox"/>	Other (Inc. external orgs)	<input checked="" type="checkbox"/>
	Please give details: This policy has been considered and reviewed by PFD Champions and staff side colleagues at the Joint Working Group.			

1) What is the impact on the following equality groups?		
Positive:	Negative:	Neutral:
<ul style="list-style-type: none"> <li>➤ Advance Equality of opportunity</li> <li>➤ Foster good relations between different groups</li> <li>➤ Address explicit needs of Equality target groups</li> </ul>	<ul style="list-style-type: none"> <li>➤ Unlawful discrimination, harassment and victimisation</li> <li>➤ Failure to address explicit needs of Equality target groups</li> </ul>	<ul style="list-style-type: none"> <li>➤ It is quite acceptable for the assessment to come out as Neutral Impact.</li> <li>➤ Be sure you can justify this decision with clear reasons and evidence if you are challenged</li> </ul>
Equality Groups	Impact (Positive / Negative / Neutral)	Comments
Race (All ethnic groups)	Neutral	<ul style="list-style-type: none"> <li>➤ Provide brief description of the positive / negative impact identified benefits to the equality group.</li> <li>➤ Is any impact identified intended or legal?</li> </ul>
Disability (Including physical and mental impairments)	Neutral	
Sex	Neutral	
Gender reassignment	Neutral	
Religion or Belief	Neutral	
Sexual orientation	Neutral	
Age	Neutral	
Marriage and Civil Partnership	Neutral	
Pregnancy and maternity	Neutral	
Other (e.g. caring, human rights)	Neutral	

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Next Review Date: 01/06/2020	
<i>Do you have the up to date version? See the intranet for the latest version</i>	

2) In what ways does any impact identified contribute to or hinder promoting equality and diversity across the organisation?	
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<p>3) If your assessment identifies a negative impact on Equality Groups you must develop an action plan <b>to avoid discrimination and ensure opportunities for promoting equality diversity and inclusion are maximised.</b></p> <ul style="list-style-type: none"> <li>➤ This should include where it has been identified that further work will be undertaken to further explore the impact on equality groups</li> <li>➤ This should be reviewed annually.</li> </ul>
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Action Plan Summary
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Action	Lead	Timescale

*This form will be automatically submitted for review for Policies and Procedures once approved by Policy Group. For all other assessments, please return an electronic copy to [EIA.forms@mbht.nhs.uk](mailto:EIA.forms@mbht.nhs.uk) once completed.*

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