

Departmental Induction Checklist

Departmental induction is an important part of your Trust Induction. Please ensure this form is fully completed and you are happy with the local induction you receive. You must return this form in person to the Academy Reception within 7 days of starting work. **ID Badges can only be collected on completion and return of this form to the Academy.**

Name………………………………………………Date of Birth.…../……/…. Job Title…………………………………………..

Department …………………………………. Directorate………………………… Floor/location/building……………………

Work Telephone number/s………………… Bleep No…………………………………

The staff intranet directory will be updated with the above information, please list any additional information:

Recent publications……………………………………… Research Interests………………………………………

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| **EMPLOYMENT DOCUMENTATION CHECKS**  ***This is not an exhaustive list and should be personalised according to the needs of the department.*** | **Tick when completed** |
| Identity Check (on ward/department) |  |
| Arrange IT access and E-mail access:  Refer to Internet, NHSnet and Email Usage Policy |  |
| **THE WARD / DEPARTMENT**  ***This is not an exhaustive list and should be personalised according to the needs of the department.*** |  |
| Orientation to the ward/department and any other areas within the department relevant to post. |  |
| Introduction pack (if provided by the department) received and discussed |  |
| Security pass, key, name badge, access codes emergency numbers etc |  |
| Uniform ,car parking, catering, and washroom facilities |  |
| Explain the function and structure of the ward/department. |  |
| Introduction to key individuals within the ward/department. |  |
| Confirm hours of work and shift patterns where applicable. |  |
| “On Call” and bleep arrangements. |  |
| “Fresh Eyes” event date …./…./….Requirement for all new staff to attend. You will have received an email from the Academy and a letter from the Director of Human Resources regarding your Fresh Eyes event. Contact the Organisational Development Manager for more information if required. |  |
| **Resuscitation procedures**: (Equipment, Procedures, Crash trolley or Grab Bag/ De Fib location) |  |
| **Safe Working** |  |
| **COSHH**  Where to find the Department COSHH Folder.  Substances Hazardous to Health in use in the Department are listed on the Department COSHH Inventory List.  A Material Safety Data Sheet providing safety information on using the Hazardous Substances available for each hazardous substance in use.  There is a written Safe System of Work (COSHH Assessment) written for all but very low risk substances. Safe Systems of Work must be understood and followed. |  |
| **Driving at Work (if applicable)**  There is a requirement to notify your Manager of any health condition, medications or anything else that could impact on safety when driving for work.  Mobile phones must not be used whilst driving for work.  All employees must have completed the Personal Details Form and that information will be made available to colleagues in their Department in an emergency. |  |
| **Fire Safety**  All employees must have read and understood the Department Fire Emergency Action Plan for their location of work.  All employees must undertake a tour of the Department and have knowledge of the emergency exits, alarms, fire call points and emergency numbers.  **No-one is permitted to work in a Department without this knowledge and information.**  Smoking is not permitted on site by staff or visitors.  The Trust **Toaster and Microwave Protocol**:-  Toasters must never be left unattended when in use. If the person watching the toast has to leave due to an operational emergency, then the toast must be raised and toaster turned off.  Microwaves should never be left unattended when in use. |  |
| **First Aid**  How to access First Aid Provision in the Department (a First Aid poster should be on display).  To declare to their Manager any health conditions that may require specialist first aid. |  |
| **Health & Safety Arrangements**  The location of the Department Health & Safety Noticeboard.  The location of any other Department Safety documentation.  Health & Safety Policies are available on the intranet (Policies and Procedures link on home page).  That health & Safety resources including risk assessment examples and key safety documents are available on the Health & Safety intranet (Trust Wide > Health & Safety on the green list OR ‘H’ from alphabet on home page and then select Health & Safety from the search list). |  |
| **Mental Health & Wellbeing**  Positive mental health is rarely a continuous state of mind. One may feel in good health generally but also suffer stress or anxiety from time to time.  There can be multiple reasons as to why a person may be experiencing difficulties with their mental health. Difficulties may arise due to work-place triggers or triggered by life events that have nothing to do with work.  Our occupational health team can play a vital role in supporting staff with their mental health needs and we have a mental health nurse advisor employed within the team. |  |
| **Incident Reporting**  All accidents, incidents and near misses must be reported on an Incident Reporting Form (IR1).  All employees know how to access the Incident Reporting System online (if access to IT arranged) AND/OR employees know where to find the IR1 paper book in the Department. |  |
| **Lone Working (if applicable)**  Read the Department Lone Worker Protocol.  Know how to raise the alarm when working alone.  Aware of the importance of ensuring a colleague knows when they are lone working |  |
| **Manual Handling and Display Screen Equipment (both acute and community)**  Have read, understood and follow Department Safe Systems of Work for specific manual handling activities and tasks,  Aware of the importance of not carrying out any manual handling activity if there is any uncertainty about safety or there remain significant risks  To inform the Manager of the Department if they have any health condition that may have an impact on their ability to carry out work activities  Individuals who use computers for 2.5 hours or more per shift are required to complete a DSE Workstation Assessment at least every 3 years (available on the Health & Safety web page > Display Screen Equipment section). |  |
| **Patient Handling (i.e assisting, supporting and moving patients)**  Have completed [practical] manual handling training in the last 3 years and understand the principles of safe handling;  Only use manual handling equipment if they are competent to use it safely;  Request suitable training and/or work with a colleague competent in safe use if they are unfamiliar with equipment;  Ensure the safe working load of equipment is not exceeded  Refer to the Patients Manual Handling Risk Assessment and Patient Mobility Care Plan to ensure they know how to work with a patient safely;  Discuss individual patient handling needs with Department colleagues to ensure they understand any recent changes to ability/mobility;  Do not carry out any manual handling activity if there is any uncertainty about safety or there remain significant risks to the patient or employee |  |
| **Personal Protective Equipment (PPE)**  Know when PPE is needed and how to access it.  Advised that where PPE is provided it must be worn.  Shown how to fit PPE for comfort if appropriate. |  |
| **Security**  All employees have a responsibility to challenge individuals in staff areas who are not wearing Trust Identification.  All employees have a responsibility to be vigilant for the security of Trust building, property and people. |  |
| **Sharps**  All employees must be told what action to take on discovery of a sharp  All employees must be aware of the action to take following a sharps injury (Contamination Hotline). |  |
| **Slips, Trips and Falls**  Duty to act to prevent slips, tips and falls by identifying, removing or reporting hazards in their work area.  The importance of wearing suitable footwear at work. |  |
| **Violence at Work**  Be aware that verbal abuse, threatening behaviour and/or physical assault are not acceptable behaviours from visitors or patients and must be reported on an IR1.  What to do if they experience violence at work including how to raise the alarm:   * Security can be called at GWH on extension 4601. * The Police should be called on Community Sites (9 -999) where assistance is required.   The Trust has a Local Security Management Specialist (LSMS) who can offer support and advice to individuals and Departments following any security or personal safety incident. All such incidents must be reported on an IR1.  Importance of referring to patient records to identify where violence and aggression risks are increased.  The location of the Department ‘safe place(s)’ for employees (behind a lockable door and with a means of raising the alarm). |  |
| **Work-Related Skin Disease**  Shown where barrier cream for hands is available for use in the Department  Carry out hand checks regularly  Report any issues or concerns with skin to their Manager and/or Occupational Health |  |
| **Work Equipment**  Be made aware of any equipment in use with the potential to cause harm  Shown how to use equipment safely and know where to access Safe Systems of Work and/or the User Guide  Report any equipment considered to be faulty and remove it from use  Do not to carry out any equipment activity if there is any uncertainty about safety or if there remain significant risks to the patient or employee |  |
| **Infection control procedures**: (hand hygiene and skin care procedures, Infection control risk  assessments, Waste segregation and Disposal, monthly care bundle audits, management of MRSA/ D&V/C.diff) |  |
| **Medicines safety procedures**: (pharmacy and local protocols, prescription Administration,  standard operating procedures, Medications common to area) |  |
| **Code of Conduct for Employees in Respect of Confidentiality**: (Aware of policy, access restrictions as relevant to role, consequences of not adhering to policy) |  |
| **Location of printer(s)** & confidential waste bin(s) – for prompt collection and secure disposal |  |
| **THE WARD / DEPARTMENT**  ***This is not an exhaustive list and should be personalised according to the needs of the department.*** | **Tick when completed** |
| **Explanation of the key documents** used within the department (Care pathways, Patient records, Observation charts, Rounding Tool) |  |
| **Explanation of the key equipment used** within the department and training requirements. (Monitoring equipment, Specialist equipment, Decontamination, patient ID Band printers) |  |
| **ROLES & RESPONSIBILITIES** |  |
| You have read the Code of Conduct for Employees in Respect of Confidentiality you are aware of access restrictions (as relevant to your role) and of the consequences of not adhering to the policy. |  |
| Introduction to mentor/supervisor/preceptor (if qualified in the last 3 months) |  |
| The specific duties and responsibilities of the post. |  |
| Expectations and limitations of the post have been discussed and understood  STAR values: I understand my responsibility to behave and communicate in a professional, appropriate and respectful way at all times. |  |
| Discuss key policies relating to the department |  |
| You have received information and training relating to your department’s Major Incident Plan and your role within it (delivered by manager) |  |
| Complete an authorised signatory form in line with Trust Standing Financial Instructions if role includes budget expenditure authority and payroll sign off.  The form can be found on the Trust intranet |  |
| **SICKNESS/ABSENCE** |  |
| Explanation of the local procedures regarding sickness and absence (reporting, return to work procedures, reporting to occupational health) |  |
| ***ESSENTIALTRAINING & DEVELOPMENT PLAN***  ***I agree to undertake the training outlined below*** |  |
| Review the Training Needs Analysis on the Intranet to establish what the Mandatory Training requirements are for this role.  *All new staff with IT access must complete the “Introduction to Information Governance” training module within their first month (unless already covered by their training records transferred from another Trust*  NB If staff are transferring from another role within the Trust their requirements may be different in this new role. Please inform the Academy of the change in role to establish new requirements regarding opt-outs.  Training required (e.g. Child protection level 2, Advanced Conflict Resolution, Medical Devices training, IT training.)   1. Clinical Mandatory Training (1 year following employment) |  |
|  |  |
| Review learning from corporate & local induction – is there anything you need to clarify? |  |
| Agree an initial date for a One to One and Personal Development Plan |  |
| Plan a date for Performance Review (Appraisal) |  |
| Ensure the employee is familiar with the Probationary Review Policy and knows where to find it |  |
| **SPECIALIST WARD/DEPARTMENT INDUCTION INFORMATION** |  |
| **Departments are encouraged to devise a department or role specific induction pack for new employees. If further advice is required please contact the Academy** |  |

**Line manager to confirm that the required Induction Training Tracker modules are completed in full.**

**Name of Line Manager**……………………..….Line Manager Signature………………………………….

Employee Signature…………………………………………………… Date……………………………

**Return to Academy (retain a photocopy for your records)**

Academy use only: ESR input date……………………….. By……………………

Updated October 2016 For Review October 2017