

THE STATE HOSPITALS BOARD FOR SCOTLAND

INDUCTION POLICY

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REVIEW SUMMARY SHEET

No changes required to policy (evidence base checked)

Changes required to policy (evidence base checked)

Summary of changes within policy:

2024 Review:

Section 2 – Aims

Page 4 - PCS(AFC)2024/1 Protected Learning Time for AFC Staff in NHS Scotland added to the list of organisation requirements/obligations.

Page 4 - Minor amendment to the bullet list explaining the purpose of induction to include reference to welcoming the employee into their new team

Section 3 – Scope

Page 5 - Amendment to wording of paragraph 2 to reinforce the importance of providing induction training to staff who change job roles in the State Hospital and staff returning to work following an extended period of absence (e.g. career breaks).

Section 4 – Core Principles

Page 5 - Wording amended to clarify timescales for completion of the induction process and to make explicit the requirement to complete an induction checklist to document/record details of what is included in the local induction.

Section 5 – Preparing For Induction

Page 6 - New section added to provide additional guidance for managers on tasks they should undertake in advance of a new employee commencing in post.

Section 6 - Components of Induction

Pages 6 & 7 - Section amended to provide greater clarity on the different components of the induction process (including the purpose of each component, what should be included and who is responsible for the delivery of each component).

Page 8 – Additional information added on the importance of ‘monitoring, check-in and review’ to make clear that this is an essential component of the induction process and to ensure that line managers give consideration to wellbeing issues and provide new employees with adequate and ongoing support throughout the induction period. Information on appointing a buddy/mentor for new employees also expanded to highlight how a buddy/mentor can be used to support new employees during the induction period.

Appendix 1 – Corporate Induction Day

Page 13 – Appendix updated to provide an overview of key topics covered within the ‘Corporate Induction Day’.

Appendix 3 – Local Induction Checklist

Page 15 - Checklist updated and reformatted to provide indicative timescales for delivery of the different elements of the local induction.

Appendix 4 – List of Statutory and Mandatory Induction Training

Page 23 - List updated to reflect the statutory and mandatory induction training that must be completed by all new employees within the first 3-months of employment and the expected timescales for completion.

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1 POLICY STATEMENT

The State Hospitals Board for Scotland recognises the importance of providing a comprehensive and effective induction for all new staff.

Starting a new job is an exciting and challenging time. In addition to the demands of taking on a new role, there is also the need to get accustomed to a new and unfamiliar work environment and get acquainted with colleagues and co-workers. There is a lot of information to take in, and a lot to learn.

Effective induction is vital for the integration of new employees, and investment in a robust period of induction is crucial to achieving a motivated, competent and engaged workforce. The induction process ensures that new staff understand their role within the organisation and receive the core information, training and support they require to perform their role in a safe and effective manner. It is also designed to ensure that standards are maintained in accordance with legislative requirements, internal policies and procedures, national guidelines and best practice standards.

When carried out effectively, the induction process can help to ensure a smooth transition into the workplace. It assists new employees to settle into their new role and become productive and efficient members of staff within a shorter period of time. It also creates a positive impression of the organisation, supports staff retention by reducing staff turnover within the first year of employment, and facilitates delivery of high-quality services and patient care.

2 AIMS

The State Hospital Induction Policy provides guidance for managers and staff on the process of induction for new employees. It aims to ensure that a structured, relevant and effective induction is provided for all new employees and that the organisation fulfils all requirements and obligations in relation to:

- The Health & Safety at Work Act 1974
- Health & Care (Staffing) (Scotland) Act 2019
- Equality Act (2010)
- NHS Scotland Staff Governance Standards
- NHS Scotland Healthcare Support Worker Mandatory Induction Standards
- NHS Scotland Personal Development Planning & Review PIN Policy
- PCS(AFC)2024/1 Protected Learning Time for AFC Staff in NHS Scotland
- Professional regulatory guidance documents (e.g. Preceptorship Framework for Newly Registered Nurses, Midwives and AHPs)

The primary purpose of the induction process is to ensure that new employees:

- 1) Are welcomed into the organisation and into their new work team.
- 2) Understand their job role and responsibilities and how the role fits within the team, department and wider organisation.
- 3) Are aware of the organisation's purpose, values and strategic objectives.
- 4) Are fully informed about all policies, procedures and safe working practices relevant to their role and the service area in which they work.
- 5) Are clear about the standards of conduct, behaviour and performance required of them.
- 6) Complete all statutory, mandatory and job-specific induction training that is required to enable safe and effective functioning within their role.

The induction period should also be used to highlight the relational nature of working within the forensic mental health care environment and what this entails, and the importance of adopting a psychologically minded and trauma informed approach to care.

3 SCOPE

This Induction Policy applies to all new staff employed within the State Hospital. This includes staff employed on permanent or temporary contracts, supplementary (i.e. bank) staff, staff seconded to the State Hospital from external organisations, and staff engaged to work within the hospital through service level agreements with external agencies (e.g. social work, pharmacy, etc).

A structured induction should also be provided for: (1) staff who change job roles within the State Hospital (e.g. staff who are promoted; staff who are seconded or transfer internally to new roles); and, (2) staff returning to work after an extended period of absence (e.g. staff returning to work following a career break or external secondment; staff returning from maternity leave). For staff returning from extended absence, the induction content should be planned to meet the individual staff member's specific needs.

Junior doctors (i.e. medical staff in training), students and volunteers are not included within the scope of this policy and alternative arrangements are in place to ensure provision of induction and orientation for staff within these groups.

4 CORE PRINCIPLES

All new employees, plus staff who change job roles within the State Hospital, regardless of role, grade or profession, are required to complete an induction.

The induction process should commence on their first day within the job role.

The induction should be completed within 3 months of commencing in post (or within a maximum of 6 months for staff working part time). Thereafter, the ongoing support and development of employees should link with the Personal Development Planning & Review (PDPR) process or other role-specific staff appraisal and development scheme (e.g. medical or senior manager appraisal).

A record of what is covered within the induction must be retained. This should include a completed 'Local Induction Checklist' that is signed and dated on completion by the line manager and the new employee. The completed checklist should be retained in the employee's personnel file.

For staff who fall within the definition of 'Healthcare Support Workers', the induction process should be completed in conjunction with the NHS Scotland Healthcare Support Worker Mandatory Induction Standards Workbook.

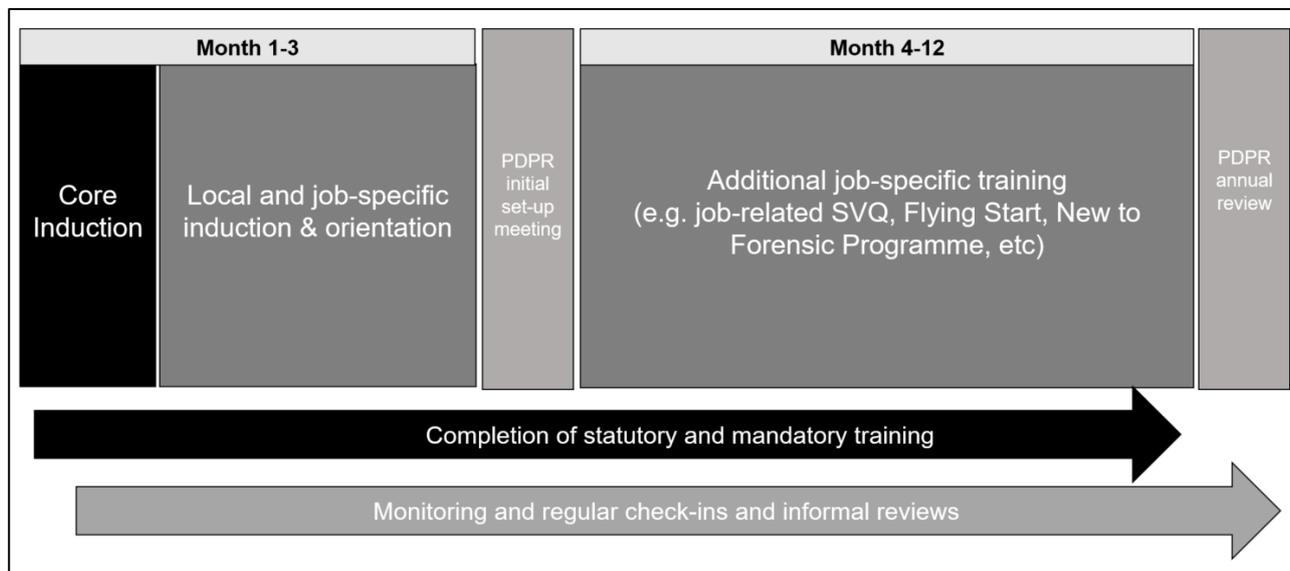
5 PREPARING FOR INDUCTION

Once a confirmed start date has been agreed with the new member of staff, the hiring / line manager should commence preparations for the staff member's orientation and induction. This should include:

- Arranging office accommodation (where applicable) and ordering any electronic or office equipment required in the role (e.g. laptop, remote access token, mobile phone, etc)
- Ensuring an IT User Application Form is completed and submitted to eHealth, and arranging access to IT systems required in the role (e.g. RiO, HEPMA, PECOS, ALLOCATE OPTIMA)
- Ordering uniforms for the staff member (if appropriate)
- Planning for delivery of the local (i.e. departmental and job-specific) induction. This should include scheduling/allocating protected time to complete all essential induction training required within the role.
- Maintaining contact with the individual in advance of their start date, and providing any information required to support them in preparing to start their new role.

6 COMPONENTS OF INDUCTION

Within the State Hospital, the induction process should include all of the components indicated in the diagram below.



Component 1 – Core induction

The purpose of the core induction is to welcome new employees to the State Hospital and provide the key information that is essential for all new staff regardless of grade, profession or job role. Delivery of the core induction is co-ordinated centrally by the Workforce Directorate and includes the following elements:

- Security and key induction – including relational, procedural and physical aspects of security
- eHealth induction – including IT user and Office 365/email account set-up
- Learning Centre induction - including LearnPro account activation and commencement of the 'Core Induction Online Learning Programme (including completion of the 'Core Information' module as part of the Learning Centre induction and information about the other learning modules that must be completed as part of the core induction)
- Wellbeing Centre induction – including information on staff wellbeing services and resources, and signposting to sources of support
- Prevention and Management of Violence & Aggression training – i.e. Personal Safety (Breakaway) training, plus PMVA Level 2 training if required within the role
- Corporate Induction Day – a 1-day event that aims to familiarise staff with the organisation's purpose, values and key objectives, raise awareness of what we require and expect from staff, and highlight the importance of their individual contribution to the organisation and the delivery of safe, effective and high quality services and care. An overview of the topics covered within the Corporate Induction Day is included in Appendix 1.

Component 2 – Local (i.e. departmental/job-specific) induction

The purpose of the local induction is to assist new employees (including existing staff moving to new roles in the hospital) to integrate within their new work environment and to provide the information, instruction and training that is required for the individual's job role and specific work area. The local induction should ensure that new employees have the core knowledge and skills they need to perform their role. It is also important in helping to foster good working practices and relationships, and for clarifying performance standards and what is expected of the new employee.

Local induction is the responsibility of the line manager, and the local induction should be planned in advance. In planning an effective local induction, the line manager should consider what needs to be included and who will be responsible for each element. An overview of essential elements

that must be included in the local induction is provided in Appendix 2. A simple timetable can also be used to plan key events, meetings, training, etc for the new employee's first few days/weeks in post.

Although the line manager is responsible for the local induction, they can delegate responsibility for delivering elements of the induction to other members of the team - and team members can play a key role in supporting the induction process. Nominated team members, for example, can support delivery of 'on the job' training and provide day-to-day guidance on local procedures and work practices. If delegating induction tasks however, the line manager must ensure that those responsible understand what is required and take responsibility for delivering the required elements fully and effectively.

A 'Local Induction Checklist' must be used by the line manager to ensure that the local induction is delivered and recorded in a systematic way and includes all elements that are relevant to the individual, their role and work environment.

A 'Local Induction Checklist' template is included in Appendix 3. The line manager should consider what elements are required and add any additional components that need to be covered within the local induction. This includes any specific job-related training or information that is required within the role (including any role-specific mandatory training).

The completed Local Induction Checklist should be emailed to the Learning Centre Manager who will record completion and arrange for retention of the completed induction checklist in the employee's personnel file.

Component 3 – Completion of core statutory and mandatory training

As part of the induction process, all new employees are required to complete a range of core statutory and mandatory induction training:

- Statutory training is training that the organisation is legally required to provide as defined in law or where a statutory body has instructed the organisation to provide training on the basis of legislation (e.g. fire safety training).
- Mandatory training refers to training requirements that have been determined by the organisation and is primarily concerned with minimising risk and ensuring the Board meets internal or external standards. Mandatory training requirements are often underpinned by government mandates and national or local policies, or based on guidelines and recognised best practice to which the organisation should adhere (e.g. hand hygiene training).

Statutory and mandatory induction training in the State Hospital includes training that must be completed by all staff (e.g. personal safety awareness training), plus training that targets specific disciplines or staff groups (e.g. adult support and protection training for clinical staff). The training is delivered using a combination of online learning modules hosted on the LearnPro eLearning platform and attendance at off-job training courses.

The online learning modules and face-to-face training courses that require to be completed by new employees are automatically assigned to the employee's LearnPro account, based on their specific job role in the organisation. A list of core induction training that must be completed by all new employees is included in Appendix 4. The core statutory and mandatory induction training should be completed within 3 months of commencing employment. Other mandatory induction training required within the specific job role should be completed within the first year in post

Core induction training requirements will be communicated to new employees as part of the Learning Centre Induction, and the Learning Centre will book new employees on the face-to-face training courses they are required to attend. The line manager however, is responsible for ensuring that staff complete all required statutory and mandatory induction training within the required timeframe. The 'Scorecard' function within LearnPro should be used by the line manager and the new employee to track progress and monitor completion of this training.

Component 4 – Monitoring, check-in and review

Wellbeing support is important for all staff, but particularly important for new employees, and regular check-in meetings and informal reviews are a crucial part of the induction process. They provide an opportunity for the line manager and new employee to monitor and review progress, and to discuss and address any challenges or concerns at an early stage. They should also be used to check that the new employee fully understands their new role, to encourage and motivate the new employee by discussing achievements and setting goals for next steps, and to provide additional support where needed.

A buddy/mentor can also be assigned to the new employee to help support them during the 'settling in' period. The buddy/mentor can help the new employee by:

- Introducing themselves to the new member of the team on their first day as someone who can help them find their way around the department
- Being available, where possible, to spend break and lunch times with the new employee in their first few days
- Encouraging the new team member to ask them questions on anything they are unsure about
- Assisting with 'on the job' training and providing guidance and day-to-day support
- Signposting the new team member to other sources of information and support

In addition to the above, clinical staff should be assigned a clinical/professional supervisor, and attendance at reflective practice sessions should be facilitated and encouraged.

Providing regular and ongoing support to new employees is key to ensuring they are happy, confident and settled in their new role and can increase motivation and job satisfaction which, in the longer term, will help them become more productive and effective in their work and more likely to stay in their role.

7 FIRST DAY OF EMPLOYMENT

Preparations should be made by the line manager to meet and welcome the new employee when they arrive on their first day.

The line manager should also consider what essential information the new employee needs to be given on their first day at work. This should include a combination of information to help the employee feel comfortable in their new environment plus essential health, safety and security information and requirements. It is also important to introduce the new employee to their new colleagues at the earliest opportunity.

A 'welcome and introduction' talk by the line manager, or other senior member of the team, should be provided on the first day. This should include an overview of the team/department's function and provision of the induction information required on Day 1 by the new employee.

This initial 'welcome and introduction' talk should be conducted by someone who is well prepared and has sufficient time available to undertake this task. Care should be taken however, to avoid information overload on the new employee's first day.

8 HEALTHCARE SUPPORT WORKER (HCSW) MANDATORY INDUCTION STANDARDS

In addition to completing the State Hospital induction process, all new staff employed within roles that meet the criteria of 'Healthcare Support Worker' (HCSW) are also required to complete the NHS Scotland HCSW Mandatory Induction Standards Workbook. This does not apply to registered healthcare professionals, however, does include all staff employed in any of the following roles:

- Work in a clinical role (either direct or indirect), under supervision of a healthcare professional.
- Work in a direct service provision role with access to patients and members of the public.

- Work in a role that involves dealing with personal identifiable patient data.
- Work in a role that has responsibility for maintaining premises or equipment used by patients.
- Work in a role that involves the preparation/delivery of goods or services directly for/to service users.

The HCSW Mandatory Induction Standards Workbook must be completed within the first 3 months of employment (or within 6 months for part-time employees) and should be undertaken in conjunction with the local induction.

The line manager is responsible for ensuring that the HCSW Mandatory Induction Standards Workbook is completed by the new employee within the required timeframe. The completed workbook must be returned to the Learning Centre. Completion will be recorded on the eESS system and the completed workbook will be returned to the employee.

Depending on the specific role of an individual there may be other workbooks and/or induction standards to attain within set timeframes (e.g. Domestic Services Workbook). It is the responsibility of the line manager and new employee to ensure that any relevant work is completed within the required timeframes.

9 PERSONAL DEVELOPMENT PLANNING & REVIEW (PDPR)

A Personal Development Planning & Review (PDPR) initial set-up meeting should be conducted with all new employees towards the end of their 3-month induction period. This can form part of the sign-off of the induction checklist.

The PDPR initial set-up meeting provides an opportunity for the line manager and new employee to reflect on the induction period and to check that each element of the induction has been satisfactorily completed. The line manager and employee should also:

- Document any elements of induction that have not been completed and agree (1) what actions are required to address this and (2) the timescale for their completion.
- Discuss the Knowledge and Skills Framework (KSF) outline for the post and clarify the performance requirements and expectations for their first year.
- Agree work objectives for the year.
- Identify training and development needs and agree a Personal Development Plan (PDP) for the year.
- Ensure appropriate supervision and support arrangements have been put in place, and agree arrangements for ongoing supervision and work/performance reviews.

For new clinical staff who have no prior experience within forensic mental health, completion of the New to Forensic programme should be included as a key learning objective within the Year 1 PDP.

A summary of the PDPR initial set-up meeting, plus details of agreed work objectives and the PDP, must be documented in the Turas Appraisal electronic recording system. For staff outwith Agenda for Change terms and conditions, the line managers should ensure that new employees are made aware of the appropriate appraisal system and PDP arrangements.

10 PRECEPTORSHIP FOR NEWLY QUALIFIED NURSES AND AHPS

In accordance with the Preceptorship Framework for Newly Registered Nurses, Midwives and AHPs (Department of Health, 2010), all newly qualified nurses, occupational therapists and other allied health professionals must undergo a period of preceptorship during the first twelve months in their first post-qualifying appointment.

Preceptorship is a period of additional support, training and competence assessment that is designed to consolidate pre-registration training and to assimilate the newly qualified member of staff into the expectations and demands of being a registered healthcare professional.

For new employees within the State Hospital the preceptorship period will overlap with, but be distinct from, the induction process. As part of the preceptorship period all newly qualified nurses and AHPs are required to complete the NHS Scotland 'Flying Start' programme.

The line manager is responsible for ensuring that a Preceptor is appointed for all newly qualified nurses, occupational therapists and other allied health professionals and for ensuring that the Flying Start programme is completed by all newly qualified nurses, occupational therapists and other allied health professionals within their first 12-months in post.

11 ROLES AND RESPONSIBILITIES

Chief Executive will:

Have overall strategic responsibility for ensuring that the State Hospital has an Induction Policy in place that complies with all legal and statutory requirements and good practice guidance.

Directors and Senior Managers will:

- Make arrangements for the effective implementation and monitoring of the Induction Policy within their area of responsibility.
- Take action to address any factors adversely affecting provision or completion of core or local induction.

Lead Nurse / Departmental Manager will:

- Have operational responsibility for the implementation of the Induction Policy within their specific areas of management accountability.
- Ensure, through the line management structure, that all managers and staff comply with the policy and take prompt action to address areas of non-compliance.

Line Managers will:

- Plan the local induction and oversee the induction process to ensure that all new employees within their ward/ department receive a formal induction in line with the requirements set out within this policy.
- Identify any job-specific training or information that is required in addition to the core induction content and add this to the local induction checklist.
- Ensure that they, or an appropriate member of nominated staff, are available to deliver the local induction and that adequate time and resources are allocated to support staff through the induction process.
- Ensure provision of protected learning time for the new employee to undertake all statutory, mandatory and job-specific induction training.
- Ensure that the induction process is completed within the specified timeframe and take prompt action, where required, to address any non-compliance.
- Ensure that a Local Induction Checklist is completed and that completed checklists (plus the HCSW Mandatory Induction Standards Workbook where applicable) are forwarded to the Learning Centre for recording on eESS and filing in the employee's personnel file.
- Allocate a 'buddy/mentor' to support the new member of staff and, where applicable, assign a 'preceptor' to support newly registered nursing and AHP staff to complete Flying Start.

Human Resources Department will:

- Ensure that systems are in place to promptly notify the Learning Centre of the appointment and start date of new employees, including details of their job role, workplace location and line manager.
- Confirm whether Healthcare Support Worker status applies to the new employee.

- Arrange dates/times for new employees to attend core induction sessions and produce a core induction timetable for each new employee

OD & Learning Department will:

- Create a learnPro account and assign all care and role-mandatory training modules and courses, and book new employees on statutory and mandatory induction training courses.
- Co-ordinate and oversee delivery of the Corporate Induction Day event.
- Record completion of the Induction Checklist on the eESS system.
- Monitor compliance with this policy and advise departmental and line managers in relation to any compliance issues that arise and any remedial action required.
- Provide performance statistics on induction completions/compliance to the Workforce, Wellbeing & OD Group and other management groups or committees as required.
- Regularly review induction arrangements and core induction content to ensure relevance and quality is maintained.

Staff will:

- Actively participate in the induction process, including following required instructions, undertaking required reading of essential information, and completing statutory and mandatory induction training within the required timescales.
- Seek advice and ask for support (from colleagues and/or line manager) if unsure of any aspects of the job role.
- Not undertake any activities which they have not been trained to do or do not yet feel competent to carry out safely without supervision. Where an individual does not feel that they are competent to carry out tasks without supervision they should inform their line manager as soon as possible.
- Regularly monitor and self-appraise own progress throughout the induction period and raise any training and development needs at an early stage and during their KSF PDPR meeting.
- Participate, where applicable, in completing the HCSW Mandatory Induction Standards Workbook or other job-specific workbooks or induction standards (e.g. Flying Start programme; SVQs, etc)

12 COMMUNICATION, IMPLEMENTATION, MONITORING AND REVIEW OF POLICY

This policy will be communicated to all stakeholders within the State Hospital via the intranet and through the staff bulletin.

The Workforce Governance Group will be responsible for the Implementation, monitoring and review of this policy and its deployment across the Board to ensure it is being implemented fairly, consistently and effectively in line with the policy's stated core principles. Policy application and compliance will also be reported to the Organisational Management Team on a bi-annual basis.

Any deviation from policy should be notified directly to the policy Lead Author. The Lead Author will be responsible for notifying the Advisory Group of the occurrence.

The policy will be reviewed in partnership every three years.

13 EQUALITY AND DIVERSITY

The State Hospitals Board (the Board) is committed to valuing and supporting equality and diversity, ensuring patients, carers, volunteers and staff are treated with dignity and respect. Policy development incorporates consideration of the needs of all Protected Characteristic groups in relation to inclusivity, accessibility, equity of impact and attention to practice which may unintentionally cause prejudice and / or discrimination.

The Board recognises the need to ensure all stakeholders are supported to understand information about how services are delivered. Based on what is proportionate and reasonable, we can provide information/documents in alternative formats and are happy to discuss individual needs in this respect. If information is required in an alternative format, please contact the Person-Centred Improvement Lead on 01555 842072.

Line Managers are responsible for ensuring that staff can undertake their role, adhering to policies and procedures. Specialist advice is available to managers to ensure that reasonable adjustments are in place to enable staff to understand and comply with policies and procedures. The EQIA considers the Protected Characteristic groups and highlights any potential inequalities in relation to the content of this policy.

14 STAKEHOLDER ENGAGEMENT

Key Stakeholders	Consulted (Y/N)
Patients	N
Staff	Y
Carers	N
Volunteers	N

APPENDIX 1: CORPORATE INDUCTION DAY OVERVIEW

CORPORATE INDUCTION DAY OVERVIEW

The corporate induction day includes input on the following topics:

- The State Hospital – Overview, Origin and Archive Information
- Organisational Vision, Aims and Strategic Objectives
- Values, Behaviours and Staff Experience
- Complaints and Feedback
- Conditioning and Complacency and Keeping Safe
- Occupational Health Services and Support
- Staff Care and Wellbeing Services and Support
- Information Governance
- Partnership Working
- 'Speaking Up' and Whistleblowing
- Equality, Diversity and Inclusions
- Learning and Development Resources, Opportunities and Support
- Skye Centre Orientation

APPENDIX 2: LOCAL INDUCTION ESSENTIAL CONTENTS

LOCAL INDUCTION ESSENTIAL CONTENTS

The local induction should, as a minimum, include the following:

- Orientation to the ward/department and to staff facilities (e.g. toilets, coffee room, lockers etc).
- Introduction to the work team and other key staff. For clinical staff, this should include introductions to other members of the multidisciplinary team.
- Clarification of the job role and responsibilities and the standards of conduct, behaviour and performance required within the role.
- Health, safety and security information and local procedures – this is a legal requirement and should include:
 - Fire safety instructions and evacuation procedures.
 - Health and safety information relevant to the department.
 - Procedures for reporting accidents, incidents, errors and near misses.
 - First aid arrangements.
 - Infection control requirements.
 - Safe handling and disposal of waste.
 - Medical emergency procedures.
 - Action to be taken in the event of a major incident.
- Information governance requirements - including information and instructions relating to confidentiality, IT security, data protection and record keeping.
- Communication arrangements – including telephone and mail system, departmental meetings, information sources (e.g. staff noticeboards and bulletins), and procedures for responding to feedback and complaints.
- Essential HR procedures – including absence reporting and certification procedures; procedures for requesting annual or special leave; procedures for raising issues or concerns.
- Discussion about the KSF outline and the Personal Development Planning & Review (PDPR) process, plus completion of a PDPR initial set-up meeting at the end of the first 3-months in post.

Note – The local induction for staff within clinical roles must also include information and instruction on professional and therapeutic boundaries, and relational and trauma informed care.



**THE STATE HOSPITAL
LOCAL INDUCTION CHECKLIST**

Name:

Job Role:

Ward/Dept:

Start Date:

Line Manager:

Introduction

Within The State Hospital, effective induction is recognised as essential for all new staff. It is central to ensuring that staff settle quickly into their new role, feel part of their team and the organisation, and are equipped to work safely and effectively in all aspects of their job.

This document supports the induction process by providing a checklist of the key information and instruction that should be provided as part of the local induction for new staff. It aims to ensure that all relevant information, instruction and training is provided to new staff when they commence in your department.

The State Hospital is committed to ensuring that staff are adequately prepared for commencing their role within the organisation and adopts a tailored approach to delivery of the induction content to accommodate any additional support needs associated with a disability (e.g. visual or auditory impairments, dyslexia or other learning difficulties, etc) and / or barriers to understanding e.g. language.

Consideration should be given to scheduling the timing of induction sessions in relation to the needs of employees for whom the organisation has committed to protecting time for religious/faith related practice at specific times e.g. Juma Prayers. A flexible approach to scheduling of induction should also be taken to accommodate any additional staff needs.

Guidance on completing the induction checklist

The induction checklist is designed to provide a record of the information, instruction and training provided to new staff members.

Indicated timescales are provided for delivery of different elements of the local induction however, with the exception of Day 1 (where all items must be covered on the new employee's first day of employment) the order of delivery can be flexible to meet local requirements and priorities.

As each item is discussed, or when training has been completed, the relevant section on the checklist should be signed and dated by the employee. For tasks that involve the application of practical skills, the relevant section on the checklist should only be signed-off once the new staff member is deemed competent in carrying out the task. If any item on the checklist does not apply to the new employee's role, please mark N/A.

Any additional job-specific information, instruction or training required by the new employee that is not featured within the checklist should be added by the line manager.

Returning the completed induction checklist

It is anticipated that it will take approximately 3 months to complete the full induction checklist.

Once complete, the induction checklist should be returned to the Learning Centre Manager, Harris Building. Completion of the induction process will be recorded on eESS and the completed checklist will be retained in the employee's personnel file.

Further help and guidance relating to the induction process, or completion of the induction checklist, can be obtained from the Learning Centre Manager or any member of the OD and Learning Team.

LOCAL INDUCTION – DAY 1

Introductions & Orientation	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Introduction to line manager and immediate team members 			
<ul style="list-style-type: none"> Orientation to the ward/hub/dept, including staff facilities (i.e. toilets, restrooms, lockers, canteen, etc) 			
<ul style="list-style-type: none"> Key duties/responsibilities of the new employee's role (refer to KSF outline and job description) 			
Health, Safety & Security	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> General procedures and responsibilities for maintaining safety and security within the ward/hub/dept 			
<ul style="list-style-type: none"> Procedures for raising the alarm in the event of discovering a fire 			
<ul style="list-style-type: none"> Location of fire panels, ward/hub "break glass" fire alarm points, firefighting equipment, and details of different alarm sounds 			
<ul style="list-style-type: none"> Fire evacuation procedures, including horizontal evacuation procedures, location of fire exit routes, and external evacuation point 			
<ul style="list-style-type: none"> Procedures for reporting accidents, incidents, near misses or safety concerns 			
<ul style="list-style-type: none"> First aid arrangements and procedures in event of injury to self or others 			
<ul style="list-style-type: none"> Introduction to patients and overview of key care needs and risks (if role involves direct patient contact) 			
Role & Team/Department Overview	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Uniform/dress code, and standards for personal hygiene and appearance 			
<ul style="list-style-type: none"> Shift allocations/duty roster and procedures for requesting leave, including annual leave and special leave 			
<ul style="list-style-type: none"> General standards of behaviour (including staff governance standards and organisational values and behaviours) 			
<ul style="list-style-type: none"> Absence reporting and certification procedures, including procedures for communicable diseases (e.g. sickness and diarrhoea) 			
<ul style="list-style-type: none"> Maintaining confidentiality and information security (including use of social media and statements to the press) 			

LOCAL INDUCTION – WEEK 1

Health & Safety	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Awareness of hazards/risks/specific safety issues and associated safe working practices, safety rules and local control measures 			
<ul style="list-style-type: none"> Infection control procedures, including hand hygiene and communicable diseases (e.g. vomiting & diarrhoea) 			
<ul style="list-style-type: none"> Medical emergency procedures, including location of resuscitation equipment 			
Security (General)	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Overview of ward/dept/hub security procedures (e.g. searching, security checks, controlled access/egress, restricted patient movement, etc) 			
<ul style="list-style-type: none"> Procedures for reporting security breaches (e.g. discovery of prohibited items; data security breaches, etc) or other security concerns 			
<ul style="list-style-type: none"> Site orientation tour 			
Security (Clinical)	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> PAA responder role and procedures for responding to incidents in own area and in other wards/departments 			
<ul style="list-style-type: none"> Patient observation procedures, including observation levels and responsibilities, and reporting on behaviour, mental state, etc 			
<ul style="list-style-type: none"> Tools and equipment, including cutlery/tool checks and procedures for responding to missing or broken cutlery/tools/equipment 			
Communications	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Hospital telephone system and phone directory 			
<ul style="list-style-type: none"> Ward/hub/dept meetings and hand-over arrangements 			
<ul style="list-style-type: none"> Information sources (e.g. team meetings, notice boards, staff bulletins, Vision magazine, intranet, HR Connect) 			
Conduct/Behaviour/Responsibilities	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Private use of telephone and email 			
<ul style="list-style-type: none"> Therapeutic/professional boundaries (clinical staff) 			
<ul style="list-style-type: none"> Mandatory Healthcare Support Worker Induction Standards (where applicable) 			

LOCAL INDUCTION – MONTH 1

Department Information	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Explanation of hub/dept management and team structures and reporting lines 			
<ul style="list-style-type: none"> Introduction to other members of hub/dept/clinical team 			
<ul style="list-style-type: none"> Overview of the key roles/functions of different members of the hub/dept/clinical team 			
<ul style="list-style-type: none"> Supervision arrangements (including clinical supervision policy and procedures where applicable) 			
Health & Safety	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Food hygiene, including procedures for safe handling and storage of food and use of PPE 			
<ul style="list-style-type: none"> Safe handling and disposal of waste, including clinical waste, confidential waste, spillages and bodily fluids 			
Security (General)	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Search policy 			
<ul style="list-style-type: none"> Visitor authorisation policy and procedures (i.e. official visitors and patient visitors) 			
<ul style="list-style-type: none"> Major incident procedures (e.g. action to take in event of hostage, patient unaccounted for, escape, riot, etc) 			
Security (Clinical)	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Searching procedures (1) patient rub-down searches 			
<ul style="list-style-type: none"> Searching procedures (2) room and locker searches 			
<ul style="list-style-type: none"> Searching procedures (3) ward/hub/dept area searches 			
<ul style="list-style-type: none"> Internal escorting procedures, including single and group escorts, use of radios, and PMTS 			
<ul style="list-style-type: none"> Patient mail procedures, including incoming and outgoing mail and application of restrictions 			
<ul style="list-style-type: none"> Patient telephone procedures, including application of restrictions 			
Communications	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> IT and information security policies and procedures, including information sharing protocols and procedures for disposal of confidential waste 			
<ul style="list-style-type: none"> 'Customer care' standards, including requirement to treat patients, visitors and colleagues with courtesy, dignity and respect 			

LOCAL INDUCTION – MONTH 2

Communications	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Technology and electronic devices policy 			
<ul style="list-style-type: none"> Complaints and feedback policy and procedures 			
<ul style="list-style-type: none"> Procedures for raising concerns (including whistleblowing) 			
NHS Scotland Workforce Policies	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> HR Connect Overview 			
<ul style="list-style-type: none"> NHSScotland Attendance Policy 			
<ul style="list-style-type: none"> NHSScotland Grievance Policy 			
<ul style="list-style-type: none"> NHSScotland Bullying and Harassment Policy 			
<ul style="list-style-type: none"> NHSScotland Capability Policy 			
<ul style="list-style-type: none"> NHSScotland Conduct Policy 			
<ul style="list-style-type: none"> NHSScotland Flexible Working Policy 			
<ul style="list-style-type: none"> NHSScotland Special Leave Policy 			
<ul style="list-style-type: none"> NHSScotland Whistleblowing Policy 			
<ul style="list-style-type: none"> NHSScotland Parental Leave Policy 			
Safeguarding Responsibilities	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Child and adult support and protection policies. 			
<ul style="list-style-type: none"> Procedures for reporting concerns about children or adults at possible risk of abuse 			
Security (Clinical)	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> Patient property policy, including patient photograph policy and procedure 			
<ul style="list-style-type: none"> Patient visiting procedures, including child visits, restricted visits, dealing with food/gifts brought in by visitors, supervising visits 			
<ul style="list-style-type: none"> Relational security within a high secure setting and its' role in keeping everyone safe 			

LOCAL INDUCTION – MONTH 3

TSH Workforce Policies	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> ▪ Adverse weather policy and procedures 			
<ul style="list-style-type: none"> ▪ Drug and alcohol misuse policy 			
<ul style="list-style-type: none"> ▪ Further/higher education study leave policy 			
<ul style="list-style-type: none"> ▪ No smoking policy 			
<ul style="list-style-type: none"> ▪ Standards of dress and uniform policy 			
<ul style="list-style-type: none"> ▪ Time in lieu protocol 			
Public Protection	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> ▪ Acceptance of gifts 			
<ul style="list-style-type: none"> ▪ Fraud policy and procedure for raising concerns regarding theft, fraud or other financial irregularities. 			
<ul style="list-style-type: none"> ▪ PREVENT policy and associated alert, referral and escalation procedures 			
Performance Appraisal	Delivered By	Employee Signature	Date
<ul style="list-style-type: none"> ▪ KSF performance development planning and review (PDPR) policy and local appraisal arrangements (or alternative appraisal system where relevant) 			
<ul style="list-style-type: none"> ▪ Turas appraisal recording system 			

APPENDIX 4: CORE STATUTORY & MANDATORY INDUCTION TRAINING

CORE STATUTORY & MANDATORY INDUCTION TRAINING (To be complete by all new employees)
<i>To be completed within the first two days of employment</i>
Security and Key Induction Training
Core Induction Information Module
<i>To be completed during week 1 of employment</i>
Fire Safety Awareness Module
Information Governance Essentials Module
Personal Safety in the Workplace (PMVA) Module
<i>To be completed within 1 month of commencing employment</i>
Cyber Security Module
Hand Hygiene Module
Health & Safety Essentials Module
Information Governance: Confidentiality Module
Manual Handling Essentials Module
Personal Safety (Breakaway) Training Course
Why Infection Prevention and Control Matters Module
<i>To be completed within 2 months of commencing employment</i>
Breaking the Chain of Infection Module
Information Governance: Data Protection Module
Respiratory and Cough Hygiene Module
Safeguarding From Harm Module
Understanding Equality, Diversity & Rights Module

<i>To be completed within 3 months of commencing</i>
Complaints & Feedback Module
Information Governance: Records Management Module
NHS Scotland Counter-Fraud Services Module
Practical Manual Handling Training Course
Preventing Bullying and Harassment Module
Whistleblowing Standards Overview Module
Corporate Induction Day

APPROVED