Sandwell and West Birmingham Hospitals **NHS**

NHS Trust

Report Title	Local Induction - transforming the local onboarding experience				
Sponsoring Executive	Raffaela Goodby, Director of People and OD				
Report Author	Bethan Downing, Deputy Director of People and OD				
Meeting	Public Trust Board	Date	7 th November 2019		

1. Suggested discussion points [two or three issues you consider the L,D & E committee should focus on]

The Trust has already made significant improvements to the Corporate Induction programme to ensure the programme is engaging and informative, enabling new employees to start in their local areas of work with everything they need from a corporate and systems perspective. The quality of local induction remains variable with over 800 managers performing local induction for our new employees. To ensure that the variability is reduced and that the quality is sustainable improved the following actions are now required:

- Re-confirm to all managers the importance of a good local induction describing what good looks like.
- Introducing a "4pm Feedback Session' on corporate induction including how to escalate and fix things
- All new employees to be asked for feedback at 100 days from starting at SWBH, part of the feedback will focus on local induction
- Every quarter we will audit a sample of local inductions and include local induction into the Trust's internal audit programme
- CLE to take ownership for their group's onboarding experience and be a role model for welcoming new people to the SWB family.

2. Alignment to 2020 Vision [indicate with an 'X' which Plan this paper supports]					
Safety Plan		Public Health Plan		People Plan & Education Plan	X
Quality Plan	X	Research and Development		Estates Plan	
Financial Plan		Digital Plan		Other [specify in the paper]	

3. Previous consideration [where has this paper been previously discussed?]

Education Learning and Development Committee, October 19

4. Recommendation(s)

The board are asked to:

- **a.** ACCEPT the recommendations for improving local induction
- **b.** AGREE the focus on local leaders taking responsibility for the onboarding experience

5. Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]						
Trust Risk Register	Risk 114					
Board Assurance Framework	BAF 11, BAF 12					
Equality Impact Assessment	Is this required?	Υ		N	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Υ		N	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to Public Trust Board: 7th November 2019

Local Induction

1. Background

- 1.1 Induction is an important part of a new employee's journey with SWBH. It is one of the first impressions a new person has of the organisation and we know that the first year in employment can be the most challenging for any employee and where many employees leave. Corporate Induction is predominantly carried out on the first day at the Trust for all new employees. The programme has recently changed to incorporate Unity Training for clinical colleagues on day 2. All colleagues are issued with their uniform, logins, pass, fobs and other key items on corporate induction and feedback is very positive.
- 1.2 Mandatory Training remains part of induction, however there is an increase in transfer of mandatory training from previous NHS Trusts and therefore some new employees arrive with their training complete and are not required to re-complete mandatory training and therefore their induction may be shorter than the full 2 days. To ensure that all new employees and their Managers are consistently clear on the training required during induction, an individualised plan is provided to each employee on day one. Doctors in training have a slightly different induction which is inclusive of Unity training, however due to organisation requirements of doctors to be on rotas from Day 2, they are requested to complete all mandatory training within the first 4 weeks of employment.
- Local Induction: Feedback from our new starters has indicated that local induction is variable in quality. There is a SWBH Local Induction Checklist (Annex 1) to guide Managers through the requirements for local induction, however there are over 800 Managers at SWBH responsible for delivering local induction and there remains an inconsistency in the delivery and quality of local induction. This affects how a new colleague feels about the organisation and SWB as an employer, so improvements need to be made to ensure a consistent offer is made. This paper describes a set of actions to improve the quality of local induction and the onboarding process for our new employees.

2. Changes to Local induction

2.1 What does good look like?

During November the clinical leadership executive have been tasked to agree the key priorities for local induction to inform "what does a good local induction looks like?" Following this, a suite of communications will be developed for line managers, simply describing what they can do to welcome and induct their new people, to encourage them to stay with the Trust. This will also highlight how they will be audited and monitored.

2.2 End of Day 1 Corporate Induction

The People team are introducing a short session at the end of "Day 1" of Corporate Induction. The purpose is to engage new employees to review and check their learning and progress from Day 1. It will gain feedback on the induction programme so far and will also inform new employees what to expect from their local induction and where to escalate if those expectations are not met.

The People team plan to trial 'welcome packs' on the first day and to include new branding as part of the recruitment brand refresh in November / December. The executive are invited to share their experiences of the corporate welcome and offer ideas for ensuring the welcome experience is warm, friendly and exciting.

2.3 100 Day Feedback

All new employees are asked for feedback following their first 100 days in the new role. Part of the feedback will focus on how the local induction was carried out, to ensure the quality of local onboarding is good and the feedback will provide any themes requiring further intervention. These themes will be presented to the People and OD Committee and through group reviews.

2.4 Audit

A spot check audit will take place each quarter with a sample of local inductions, ensuring they are quality checked by a detailed review of the documentation, a questionnaire of new employees and local managers. The local induction audit should also be considered for the Trust's internal audit programme in the future.

3. Recommendations

3.1 The Trust Board is asked to:

- a. Accept the interventions to improve the quality of local induction
- b. AGREE the focus on local leaders taking responsibility for the onboarding experience

Bethan Downing
Deputy Director, People and OD

29th October 2019

Annex 1: Local Induction Checklist

		Annex
Local Induction & Onboarding Checklist	WE'LL BRIDGE	
Name:	YOUR	in a state of
Job Title:		
Department:		4 /1
Group:		to life
Onboarding Prior to Employment Start Date	Name of person	
(Delete if not applicable to staff group or role)	responsible	Date of Completion
Confirm start date to recruitment 4 weeks prior to start (or by exception if less than 4		
weeks) Invite individual into the workplace to meet the team, tour the area, assign and meet		
their buddy		
Ensure individual has contacted Occupational Health re: their immunisation status (clinical staff only)		
Ensure desk/workspace/computer, phone access; bleep; locker has been organised -		
ready for start date Arrange specialist training for first week		
Keep in touch e.g inviting to link on twitter or department 'what's app' group, phone call,		
email - at least once prior to starting		
Introduce to workplace buddy Does the employee require specialtist equipment? If yes please ensure this is ordered		
ready for start date		
Local Induction - First Day in Department	Name of person responsible	Date of Completion
Complete the "new starter personal information form" on connect (this sends		
bank/pension details to payroll). Form can be found on: https://connect2.swbh.nhs.uk/esr/esr-electronic-forms/		
Explain the function & structure of the department. Carry out a tour & orientation of the		
working environment/areas relevant to the post and introduce colleagues and other individuals key to the role.		
Confirm hours of work, shift patterns, break periods.		
Confirm Hospital @ Night arrangements if applicable		
Provide door codes etc, and process for issuing of and signing for keys, departmental security arrangements, security of personal items, lone working procedures, changing		
facilities, washroom, catering facilities.		
Explain emergency contact numbers, local procedures for emergencies including fire evacuation, fire exits (see below also), cardiac arrest, first aid procedures.		
Liaise with fire trainers to book staff member onto workplace fire training		
Explain on call and bleep arrangements where appropriate		
Explain resuscitation procedures where applicable (equipment, emergency phone numbers - 2222, procedures)		
Explain infection control procedures for the work area (including hand hygiene &		
inoculation incident procedures) Discuss Deprivation of Liberty (DOLS) including information about when to apply for a		
Deprivation of Liberty Safeguard.		
Disposal & storage of waste Explain procedures for: sickness absence, annual leave, bank holidays, overtime,	_	
TOIL, expenses,		
Explain where to find policies on Connect and highlight any specific to the area		
Explain Trust, directorate and departmental communication systems and protocols, mail collection/delivery, e-mail, Intranet, Internet access		
Medicine safety procedures & Medication familiarisation for the work area and patient group directives where applicable.		
Location of relevant medical equipment & manuals, including assessment of		
competency to operate, monitoring, decontamination, and safety checks.		
Explain business continuity plans for area Complete/update Medical Devices competency record & submit copy to ESR.		
Complete H&S local induction checklist (H&S file) including incident reporting		
procedures and completion of forms. Complete Local Fire Safety Induction (Fire Safety Manual). Induction to local moving & handling equipment used.		
Ensure any specialist training is booked e.g.: fire scene manager, fire safety warden		
Notify finance if they are a budget holder		
Provide name and contact details for their local Unity Super User Arrange local induction on Unity in their work area		
Arrange training required to use any bespoke local/department specific IT systems		
required for role Specialist area induction (as required) e.g.:Clinical guidelines used in the department		
Advise on any minimum period of supervised practice, expectations and limitations of		
the role Does the employee have a disability for which reasonable adjustments need to be		
made? If yes, complete the Reasonable Adjustments checklist *At this point please send a copy of this form and Medical Devices competency form to ticket and when the ticket has been submitted go back into the ticket (under My		
Onboarding within the first Three months	Name of person	Date of completion
Sign contract of employment	responsible	
Agree a Personal Development Plan & set an initial Aspiring to Excellence Personal		
Development Review date within 3 months.		
Make plans for attendance at QIHD		