**I1**

**INDUCTION**

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Date: 06.06.23

# Document version control

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# Document change history

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**POLICY**

To ensure every member of staff receives a full induction and the employee handbook.

**PROCEDURE**

1. The Corporate Induction Programme must be completed. If a section is not applicable to the new member of staff then N/A must be placed in the appropriate box.
2. Ensure all new starters receive a Cumberland Care Services Employee Handbook for your service.
3. Complete the Cumberland Care Services Induction Checklist. All relevant sections must be completed. If a section is not applicable to the new member of staff then N/A must be placed in the appropriate box.
4. Both the Corporate and Cumberland Care Services I1 Induction / Employee handbook must be completed within the first 6 weeks of employment.
5. There is also an I1 managers development checklist which can be used to support new managers / acting managers / supervisors who wish to develop into the managers role.

6. Guidance can also be found with the procedure and checklist for the following:

* ICT & ECR Training
* New user request

This form must be completed for all new employees alongside the Cumberland Induction. This should be used to enhance the Cumberland Induction and to ensure the Cumberland Care Service specific information is discussed.

* When it is fully completed, copy the original with the Cumberland Induction and place both in the employee’s personnel file.
* If some of the sections are not applicable, please put “N/A.”

**Name of employee: Job title:**

**Place of work:** **Start date:**

**Manager / Supervisor name:**

|  |  |  |
| --- | --- | --- |
| **Health and Safety** | **Tick** | **Add date completed / discussed** |
| Call / Emergency Bells / Lighting  |  |  |
| Security of Building / Houses  |  |  |
| Fire Exits / Fire equipment  |  |  |
| Evacuation Routes |  |  |
| F5 Fire Induction |  |  |
| Accident / Incident / Near Miss reporting & recording on IAS & Esafety |  |  |
| Night Worker Assessment (if applicable) |  |  |
| Fridge Temperatures / Kitchenettes / Main Kitchen / Cleaning  |  |  |
| COSHH |  |  |
| Food Hygiene  |  |  |
| Water Temperatures |  |  |
| Laundry  |  |  |
| PPE / Specific PPE Equipment (Aerosol Generated Procedures) / PPE Competency  |  |  |
| Hep B (DMH or those risk assessed to require it)  |  |  |
| Vaccines  |  |  |
| Lone Working / driving  |  |  |
| Concerns / reporting  |  |  |
| Key safety / responsibility  |  |  |
| First Aid / Defibrillator  |  |  |
| Working Time Directive  |  |  |
| Mobile Devices / Technology  |  |  |
| **Complete the Cumberland Induction** | **Tick** | **Add date completed / discussed**  |
|  |  |  |
| **Policies and Procedures**  | **Tick** | **Add date completed / discussed** |
| Cumberland Care Services policies and procedures  |  |  |
| Code of Conduct for Healthcare Support Workers and Adult Social Care Workers in England (Give out the booklet)  |  |  |
| IPC Policies  |  |  |
| **Service Information** | **Tick** | **Add date completed / discussed** |
| Care Planning / Support plans |  |  |
| CQC |  |  |
| Service User file (where applicable)  |  |  |
| Safeguarding  |  |  |
| Service user communication (6c’s Skills for Care)  |  |  |
| Corporate Values – (Compassionate, Innovative, Empowering, Ambitious & Collaborative).  |  |  |
| Shift Handovers  |  |  |
| Other Professionals / Contact Details  |  |  |
| Medication / EMAR system  |  |  |
| Communication / Confidentiality  |  |  |
| Contact details e.g., manager / supervisor |  |  |
| Equipment  |  |  |
| Working Patterns  |  |  |
| **Personnel**  | **Tick** | **Add date completed / discussed**  |
| ICT log in details requested specific to your service * Request access to a shared laptop
* Access to ICT training & Electronic care recording training if required
* ICT overview guidance
* IAS log in (if required)
* Strata (if required)
 |  |  |
| Personal belongings / Financial information |  |  |
| **Mandatory courses** |  | **Add date completed**  |
| Health, Safety and Employee Wellbeing (eLearning) |  |  |
| Customer Service for Cumberland Council (eLearning) |  |  |
| Equality, Diversity, Inclusion and Belonging (eLearning) |  |  |
| Information Security and Data Protection (eLearning) |  |  |
| Prevent (eLearning) |  |  |
| Climate Change / Carbon Literacy (eLearning) |  |  |
| Safeguarding Awareness (eLearning) |  |  |
| Follow mandatory training relevant to specific job roles (see role profiles)  |  |  |
| **Probation**  | **Tick** | **Date arranged** |
| Probation Agreement  |  |  |
| 12 weeks  |  |  |
| 20 weeks |  |  |
| 26 weeks (Appraisal)  |  |  |
| **Manager Specific / I1 Managers development checklist can also be used**  |  |  |
| **CQC** | **Tick** | **Add date completed / discussed** |
| Register new manager using CQC DBS form |  |  |
| Fit Person Interview |  |  |
| CQC New Manager Application |  |  |
| Discuss CQC Notification Forms / Reporting  |  |  |
| Cumberland Care Service Plan  |  |  |
| Statement of Purpose  |  |  |
| Handbooks – Staff / Reablement / Support at Home  |  |  |
| **Meet and Greet (If Applicable)** | **Tick** | **Add date completed / discussed** |
| Meet Adult Social Care Team |  |  |
| Attend Managers Meeting |  |  |
| Meet Service Managers |  |  |
| Meet Senior Leadership Team  |  |  |
| Meet with Finance Team / Book Training  |  |  |
| **Quality Assurance and Governance**  | **Tick** | **Add date completed / discussed** |
| Performance Dashboard / Share Point / QA Strategy / CES Reporting  |  |  |
| Process For Internal Audits and Reports |  |  |

On completion of the whole induction programme

I confirm that I discussed, understood and received the relevant information about this document.

**Manager / Supervisor signature:**   **Date:**

**Employee signature:**  **Date:**