NURSDOC

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INDUCTION & ONBOARDING

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INDUCTION AND ONBOARDING POLICY

1. PURPOSE

1.1 To set out the standards and general process of onboarding and induction for new staff who are recruited, relocated or transferred to work at Nursdoc Limited.

1.2 To support in meeting the following Key Lines of Enquiry/Quality Statements (New):

KEY QUESTION	KEY LINES OF ENQUIRY	QUALITY STATEMENTS (NEW)
EFFECTIVE	E2: How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support?	QSE2: Delivering evidence-based care & treatment QSE3: How staff, teams & services work together
SAFE	S1: How do systems, processes and practices keep people safe and safeguarded from abuse?	QSS3: Safeguarding
WELL-LED	W1: Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person- centred, open, inclusive and empowering, which achieves good outcomes for people?	QSW1: Shared direction and culture QSW2: Capable, compassionate and inclusive leaders
WELL-LED	W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?	QSW5: Governance, management and sustainability

1.3 To meet the legal requirements of the regulated activities that Nursdoc Limited is registered to provide:

- Health and Social Care Act 2008 (Regulated Activities) (Amendment) (Coronavirus) Regulations 2021
- The Care Act 2014
- Equality Act 2010
- Equality Act 2010: Chapter 1 (Protected Characteristics) Chapter 2 (Prohibited Conduct) and Chapter 3 (Services and Public Functions)
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Safeguarding Vulnerable Groups Act 2006

2. SCOPE

2.1 The following roles may be affected by this policy:

- All staff

2.2 The following Service Users may be affected by this policy:

- Service Users

2.3 The following stakeholders may be affected by this policy:

- Commissioners

3. OBJECTIVES

3.1 For staff involved in any part of onboarding of new starters to recognise the importance of providing individuals who are joining, transferring or relocating to Nursdoc Limited with a suitable, structured induction programme.

3.2 Ensuring that staff and new starters are properly supported through the induction process, to reduce the risk of employees feeling out of their depth, in turn reducing their stress and increasing their enjoyment of their job.

4. POLICY

4.1 Nursdoc Limited is committed to applying equality to all stages of the onboarding and induction process. Nursdoc Limited will make sure to eliminate unlawful discrimination, promote equality and opportunities for all and foster good relations between staff.

4.2 Nursdoc Limited will ensure that all requirements in relation to the onboarding process of new staff has been followed to evidence the commitment to safeguarding Service Users from unsafe recruitment practices. This includes staff not starting work until DBS is cleared and assurance in all other areas of recruitment satisfied from Ms Leanne Harris.

4.3 Cases of COVID-19 remain present, so Nursdoc Limited recognises the need to be cautious when managing the risks to staff and others. The priority must be the safety and protection of Service Users' Care and staff who are providing care and support.

Digital solutions continue to be a safe option, but it is recognised that there is a need for a safe re-introduction of face-to-face training and work-based assessment activities.

4.4 This policy does not form part of an employee's contract of employment. The contents of this policy can be amended from time to time.

5. PROCEDURE

5.1 **Onboarding**
For all accepted candidates, Ms Leanne Harris (or a delegated other) will telephone them to offer them the post on the terms and conditions. The offer will be subject to a successful DBS (where applicable) and right to work check. If they accept, Ms Leanne Harris or a delegated other will agree a start date and tell them the appointment will be confirmed by letter (refer to the Forms section of the Recruitment Policy for a template).

A member of staff involved in onboarding will start an employee file with an Individual Candidate Application for each successful candidate. Staff can refer to the Onboarding Flowchart for further details (located in the Forms section of this policy) regarding other necessary documentation.

Before starting employment, the recruiting staff will ensure that there is evidence of the validity of the successful candidate's National Insurance Number, or investigate further to a satisfactory conclusion if there is not.

5.2 **Induction**
The local induction programme will normally take place within the first 6 weeks of employment at Nursdoc Limited, whilst the general induction will take place within the first 3 months of employment.

The length and nature of the induction process should be tailored to the individual depending on the complexity of their role, the nature of the department, their degree of experience and whether or not they are a new or existing member of staff.

The Induction Record is located within the Forms section of this policy.

5.3 **Induction Procedure**
Before the new member of staff begins work, Ms Leanne Harris or their delegate will ensure that:

- A full induction programme is specified
- A venue for the induction has been arranged
- Sufficient uninterrupted time is available for adequate one-to-one training
- Equipment and resources required during the induction have been prepared in advance

On appointment, the new staff member will be issued with the induction programme and a schedule of completion agreed, which will, in all cases, be no more than 12 weeks.

When the member of staff first reports for duty, Ms Leanne Harris or a person delegated to the task, given sufficient time and knowledge to carry out the task, will greet them and introduce them to colleagues. An experienced member of staff will be allocated to new staff as a "buddy" or "mentor", with the intention of providing a point for informal support during the introductory period. Where possible, the staff rota will be organised so that new staff and their 'buddy' or 'mentor' will be working together as much as possible, and alternative supervision arrangements will be made where the 'buddy' or 'mentor' is not on duty.

If the full programme is not completed by the end of the available time, a further time will be agreed between Ms Leanne Harris and the new member of staff.

New staff will be coached to use a computer linked to the QCS system and given a personal ID and password. They will also be encouraged and supported to make full use of the QCS App.

5.4 The line manager, buddies or mentors will use a blended approach to monitor the competence of new staff during induction and this will include the following means:

- **Self-evaluation** - Ask the person to describe how they think they are progressing
- **Observation** - Direct observation of how the person is performing in their role
- **Feedback** - From Service Users and their close networks as well as colleagues

- **Reflection** - Ask the person to reflect on an aspect of their work, usually a specific incident, and explain what they learned from it
- **Questions** - To test the person's understanding of a topic in more depth
- **Evidence** - Of accredited training in a particular area

Where concerns are identified by the mentor or buddy regarding the performance and competence of a new member of staff, this will be documented and reported in a timely manner to the line manager or Ms Leanne Harris.

5.5 **Care Certificate for Care Staff**
The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors.

The Care Certificate is made up of the 15 minimum standards that should be covered if you are 'new to care' and should form part of a robust induction programme.

The Care Certificate is the start of a career journey for Care staff who are not part of a professional body and is one element of training and education that will support practice within Nursdoc Limited.

Nursdoc Limited will support all staff to complete a Care Certificate whether they are direct care workers or indirect. All newly recruited adult social care workers, who are not members of regulated professions, are required by Nursdoc Limited to complete the Care Certificate (NB: existing staff competencies and skills will be assessed against the Care Certificate standards, and where gaps are identified, those gaps will be added to the Personal Development Plan for that individual).

At the point of offer, Ms Leanne Harris or a delegated person will make clear to the Care Worker that, as a condition of their employment, there is an expectation for them to complete the Care Certificate.

The line manager, in cooperation with the new recruit, will assess the method of development which best suits them and Nursdoc Limited and support the new recruit to complete the Care Certificate. Regular one-to-one sessions will be established to provide additional support for the Care Worker.

5.6 **Signing Off Completion of the Care Certificate**
Those that have the responsibility to sign off the Care Certificate must be confident that the new worker is competent in their job role.

The Care Certificate is endorsed by the Care Quality Commission (CQC). It is the beginning of the career journey for those new to care and acts as a foundation for health and adult social care integration.

Delivery and Assessment
Choose how the Care Certificate is delivered and assessed; for example, in-house or by commissioning an external learning provider. Nursdoc Limited will ensure that the Care Certificate assessor/trainer is occupationally competent in the standard(s) they are assessing or delivering.

To delegate assessment responsibilities within Nursdoc Limited, Ms Leanne Harris must assess whether the staff member:
- Has a thorough understanding and direct experience in what they are assessing
- Is confident and competent in the skills required to assess in the workplace (Remember they do not need a formal assessor qualification but some training about the principles of work-based assessment to a certain standard is recommended)

Carer Competency
A carer competency record to help monitor the progression and competency of carers completing the Care Certificate should be completed by the assessor before signing off completion of the Care Certificate.

Please find a link to Carer Competency Record in the Further Reading section of this policy.

5.7 **Planning for Face-to-Face Training**
There are several key questions to examine when planning for face-to-face training. When evaluating any expected risks with face-to-face training, consider the following:

- Can the training be provided online either remotely using webinars or video conferencing, or via e- learning?
- Are there alternative methods to support the achievement of learning and development, such as changes to assessment methods or by utilising suitable colleagues who can provide the assessment?
- Can approaches such as additional workplace shadowing, supervision and competency checks be undertaken?

5.8 **Standards of Competencies for Registered Nurses (where applicable to Nursdoc Limited)**
Nurses must demonstrate standards of competence throughout their careers to remain on the NMC register. Nurses must also practise in line with The Code: Professional standards of practice and behaviour for nurses, midwives and nursing associates. The standards for competence apply to all fields of nursing and are set out in four main areas of professional nursing practice; these are:

- Professional values
- Communication and interpersonal skills
- Nursing practice and decision making
- Leadership, management and team working

In addition to the above, Registered Nurses should also have training and assessed competencies in any clinical task they undertake.

5.9 **Roles and Responsibilities in Assessing Competency**

Assessee: The member of staff undergoing competency assessment. An assessee is accountable for their own practice and competency in the task and at every stage of the training and assessment process is accountable for the ongoing maintenance of their skills (following sign off as competent).

Assessor: An individual who has full knowledge and comprehension of the task and has fully developed their skill without the need for supervision and assistance in more unusual or complicated situations. They have been deemed fit to act as an assessor by Ms Leanne Harris. The criteria for who can become an assessor will be a local decision. An assessor is accountable for signing off members of staff who demonstrate sufficient knowledge and skill during a competency assessment, they must give adequate feedback to those who do not show competence on assessment and must complete the competency assessment document fully at the time of assessment. They must also devise an action plan for re- assessment if needed, in collaboration with the person's line manager as appropriate.

Registered Manager: Must allow access to training and ensure time for any supervised practice needed prior to competency assessment.

They will liaise with the assessor, as appropriate, to devise an action plan for re-assessment if needed.

Supervisor: Any member of staff who has already been assessed and signed off as competent in the task may supervise another member of staff prior to completing their competency assessment. A supervisor must ensure that the member of staff is practising according to local policy and procedure and is accountable for their own practice whilst supervising others.

5.10 **Competency Templates**
The Competency Assessment Tool, within the Forms section of this policy, has been designed to aid competency assessment following appropriate training and supervised practice. It is not a training document, though evidence of training may be required as part of the competency assessment, i.e. as evidence that a competency component has been achieved.

Adequate training should be sourced as appropriate to the task.

Should a period of supervised practice be required following initial training, this can be supported by another member of staff who has already been assessed and signed off as competent in the task.

A member of staff will only be considered safe and competent to perform the task autonomously once they have been assessed and signed off as competent by an assessor.

5.11 **Review and Evaluation**
Ms Leanne Harris is responsible for reviewing the induction to ensure it remains fit for purpose and meets any changes to legislation, regulation or best practice recommendations. Individual feedback will be sought from new members of staff and their 'buddies' during and on completion of the induction to identify if any changes need to be made.

The induction process will be recorded on the training matrix and completion of and compliance with induction will be monitored as part of the quality assurance of Nursdoc Limited.

Induction, mandatory, specialist and any role specific training will form the core agenda of team staff meetings and will be discussed during management meetings at Nursdoc Limited. Any competencies that require a refresher should be scheduled in. Records will be maintained to evidence successful completion of any induction, training and ongoing development of staff.

5.12 **Agency/Temporary Workers**
Agency and temporary workers are entitled to a local induction at Nursdoc Limited and staff will refer to the Agency Staff Policy and Procedure.

5.13 **Probationary Period**
When a new member of staff joins, they will be subject to a probationary period which usually lasts for six months, unless stated otherwise within the individual's contract of employment. During the probationary period, the individual's performance and suitability for their role will be monitored. At the end of the probationary period, the individual's probationary period will either be confirmed as successful, extended, or Nursdoc Limited may decide that the individual is not suitable for the role and terminate their employment. The employee's employment may be terminated on one week's notice by either party during the probationary period unless the contract of employment states otherwise.

6. DEFINITIONS

6.1 **Local Induction**
Elements of induction that are specific to the role, team or department of the new employee

6.2 **Statutory Training**

- Training that is usually required by law or where a statutory body has instructed an organisation to provide training on the basis of specific legislation (i.e. The Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999)
- Employers often describe this as 'essential' or 'compulsory' training and it ensures that staff have the knowledge to maintain a healthy and safe working environment for themselves and their colleagues

6.3 **Mandatory Training**
Mandatory training is obligatory or compulsory, required or commanded by an authority or organisation

6.4 **Onboarding**
Refers to the mechanism through which new employees acquire the necessary knowledge, skills and behaviours to become effective members of staff

KEY FACTS - PROFESSIONALS

Professionals providing this service should be aware of the following:

- Agency staff have the same rights to an induction within Nursdoc Limited
- Care staff will be required to complete the Care Certificate or evidence achievement of the standards within it
- Where required, competencies should be assessed
- All completed inductions are recorded on the training matrix of Nursdoc Limited
- All new staff will have a personnel file commenced that contains all necessary records and evidence to demonstrate safe recruitment
- The local induction at Nursdoc Limited lasts for 6 weeks and the general induction lasts for 3 months. It is at the discretion of Ms Leanne Harris if longer time is required to complete
- All staff will be assigned a buddy or mentor to work alongside during the period of induction. They are responsible for supporting the new member of staff whilst developing an insight into the new member of staff's ability to do their job to the satisfaction and values of Nursdoc Limited

KEY FACTS - PEOPLE AFFECTED BY THE SERVICE

People affected by this service should be aware of the following:

- All new staff at Nursdoc Limited are provided with an induction by an experienced member of staff
- During induction, staff are assessed to ensure that they are competent to carry out their role safely and to the high standard that Nursdoc Limited expects
- You can be assured that the induction process in place is based on best practice recommendations and meets regulatory and legislative requirements
- You are encouraged to discuss any aspects of the induction process or staff performance with Ms Leanne Harris or a senior member of staff

FURTHER READING

As well as the information in the 'underpinning knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

Skills for Care - Buddying vs Mentoring:
https://www.skillsforcare.org.uk/resources/documents/Recruitment-support/Retaining-your-staff/Buddying-Vs-Mentoring.pdf#:~:text=Although%20both%20buddying%20and%20mentoring%20offer%20support%20to,what%20we%20do%2C%20and%20this%20includes%20our%20staff.

Skills for Care - Managing a Service:
https://www.skillsforcare.org.uk/Leadership-management/managing-a-service/Managing-a-service.aspx

SCIE - Induction:
https://www.scie.org.uk/workforce/peoplemanagement/recruitment/induction/

ACAS - Guide to Induction:
https://www.acas.org.uk/acas-guide-to-staff-induction

OUTSTANDING PRACTICE

To be ' outstanding ' in this policy area you could provide evidence that:

- Nursdoc Limited focuses on supporting its staff through induction and ongoing training
- Nursdoc Limited offers a robust and comprehensive induction programme
- Buddies and mentors support new staff to deliver support to Service Users with compassion, dignity and respect and they will assess this and report any concerns to their line manager
- The wide understanding of the policy is enabled by proactive use of the QCS App
- Staff responsible for mentoring or buddying new staff have the skills, knowledge and expertise to perform their role correctly, safely and competently
- Themed audits take place to review the quality and effectiveness of the induction process, any findings are acted upon and changes are embedded in practice
- Feedback from staff, Service Users and stakeholders is positive in relation to induction and the competence of staff
- There is evidence that competencies, where required, are assessed as part of the induction

SIGN OFF DATE:	12/06/2026
REVIEW DATE:	12/06/2027
SIGNED:	 Marc Stiff – Group Managing Director