

**INDUCTION AND PROBATIONARY PERIOD POLICY November 2019**

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**Committee Approved: Executive Team**

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**Equality Impact Assessment Completed - Screening**

**Sustainability Impact Assessment: Completed**

**Quality Impact Assessment Completed**

**Added to Intranet on: 27 November 2019**

**Target Audience: All Staff**

**Version Number: 1.2**

**The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as ‘uncontrolled’ and as such may not necessarily contain the latest updates and amendments.**

**POLICY AMENDMENTS**

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

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| --- | --- | --- | --- | --- |
| **New****Version****Number** | **Issued by** | **Nature of Amendment** | **Approved by &****Date** | **Date on****Intranet** |
| 1.0 |  | New Policy | Quality Group 23/11/16 | 01/12/16 |
| 1.1 | Mark Culling | Minor Information Governance updates |  |  |
| 1.2 | John Pougher | Minor Updates | Executive team Nov 19 | 27/11/2019 |
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**1 INTRODUCTION**

1.1 This policy describes the approach of North Lincolnshire Clinical Commissioning Group (the CCG) on the use of induction and probationary periods for new employees.

1.2 The purpose of a probationary period, together with other measures such as induction, is to provide a consistent means by which new employees can be supported to become effective as quickly as possible and to enable a manager to objectively assess the capability, attitude and potential of the new employee. Should the required standards of the CCG not be met during the probationary period employment may either be terminated or, exceptionally, extended.

**2 ENGAGEMENT**

 Social Partnership Forum – Policy Sub Group

 NLCCG staff via staff communication

**3 SCOPE**

3.1 This policy and procedure will apply to all new employees of the CCG but will not apply to those engaged on fixed term contracts of six months or less where a local induction will be appropriate.

3.2 Existing CCG staff who take up new posts within the CCG will not be subject to a probationary period nor will individuals who join the CCG due to the application of the Transfer of Undertakings Protection of Employment regulations. However a local induction will be appropriate in these instances.

3.3 All bank, agency, temporary workers and contractors are required to undertake the local induction as set out in part 2 of this policy. It is the responsibility of the line manager to determine whether a bank, agency, temporary worker or contractor is required to complete the corporate induction training. Line managers should consider the length of the appointment, time commitment and the role undertaken.

3.4 The CCG has the right to terminate the contract of an employee at any time during the probationary period should they fail to meet the required standards. Staff whose contracts are terminated during the probationary period will be entitled to a **notice period of one month**, which will normally be paid in lieu.

3.5 On successful completion of the probationary period, the notice period as outlined in an individual’s contract of employment will apply.

**4 POLICY PURPOSE & AIMS**

4.1 The organisation recognises the importance of providing each of its new employees with a suitable structured Induction programme. This policy ensures all staff are clear about the requirements of their role and have an overall understanding of the organisation.

4.2 A well inducted, trained and educated workforce will enable the CCG to achieve its organisational objectives and provides the staff with information, knowledge and tools to carry out their job safely and well.

4.3 The organisation has legal obligations to provide compliance/mandatory training and to deliver a suitable induction programme for new staff. The CCG takes these obligations seriously and seeks to ensure all staff comply with the procedure outlined in part 2 of this policy.

4.4 The probation process should work alongside the induction process to help create a positive and supportive working environment, allowing new staff to settle into the organisation and learn the key elements of the job within a reasonable and realistic timescale.

4.5 The policy aims to ensure that the induction and probation process is undertaken for all staff and is applied in a fair and consistent manner, within a supportive framework and in line with employment legislation requirements.

**5 The Probationary Period**

5.1 A probationary period is a trial period during which the performance, conduct and attendance of the employee will be assessed by a manager against the particular requirements of the role, the CCG’s values, behaviors and expected levels of attendance and punctuality.

5.2 A decision about whether the probationary period has been successful will normally be made within **six months** of the date of commencement of employment. However, if there are significant concerns highlighted at earlier review stages, and there is no evidence of the required improvement being made, a decision to dismiss or to extend the probationary period may be taken before the end of the probationary period by the appropriate manager.

5.3 During the probationary period the employee’s performance, conduct and attendance will be reviewed by the manager and recorded within standard documentation (Appendix 2 and 3).

|  |  |
| --- | --- |
| Induction review | Week 1 |
| Initial review | Week 4 |
| Intermediate review | Week 12 |
| Final review | Week 26 |

This timetable is however flexible and can be tailored to meet the needs of the line manager and employee, provided four review meetings are held. This may include, but is not limited to reasons relating to annual leave, sickness absence or other absence.

5.4 Where necessary additional support and development opportunities will be provided by the manager in order to help new employees carry out the role safely and well.

**6 ROLES / RESPONSIBILITIES / DUTIES Executive Team**

6.1 Responsible for ensuring that this policy is implemented within their teams.

**Managers**

6.2 To create and implement an induction plan for the employee including regular supervision arrangements.

6.3 To agree induction and probationary review dates with the employee and to ensure that these reviews are undertaken and the probationary assessment forms are completed.

6.4 Undertake regular supervision and a performance and development review with the new starter within 4 weeks of employment, to establish clear objectives for the employee and ensure training (including statutory and mandatory) and development opportunities are identified, planned and undertaken by the new employee. Ensuring a copy of the individuals personal development plan is sent to Organisational Learning and Development Lead within 6 weeks of starting in post

 6.5 To signpost to key employment policies associated with health and safety, risk management, corporate and information governance (including cyber security) as a priority.

 6.6 To provide access to the range of policies and procedures associated with employment.

6.7 To seek advice from Human Resources Team should the employee not be performing to the required standard.

6.8 To make recommendations to their manager should they believe that an employee’s contract of employment ought to be terminated during, or at the conclusion of, the probationary period.

6.9 To ensure that copies of all related correspondence and records are kept and are accessible.

6.10 Where necessary, to carry out a workplace assessment and ensure that any reasonable adjustments required at work are implemented in a timely manner.

**Human Resources Team**

6.11 To provide guidance and advice to managers and probationers about implementation of this policy and procedure as appropriate.

6.12 To provide support to line managers in monitoring the completion of probationary periods.

6.13 To ensure that all recruitment/contractual documentation reflects the requirement for probationary periods, with particular emphasis on correct notice periods.

**The Employee**

6.14 Take an active role in their workplace induction, identifying where further knowledge is required and discussing this with their line manager.

6.15 Complete the new starter induction checklist at appendix 2 and submit this with a copy of their personal development plan to their manager within 5 weeks of starting in post.

6.16 To identify whether additional support, training, equipment or adjustments are required to enable to fulfil the role.

**7 IMPLEMENTATION**

7.1 The CCG’s Executive Team is responsible for formal approval of, and monitoring compliance with this policy. Following ratification the policy will be disseminated to staff via the organisation’s intranet.

**8 TRAINING & AWARENESS**

8.1 A copy of the policy will be available on the CCG intranet. Training needs will be identified via the performance appraisal process, performance development plan and Training Needs Analyses.

8.2 **Data Protection and Security Training**

When staff start with a new organisation, it is during their induction period when they can be at their most vulnerable. They may not understand the organisation’s systems, policies and procedures, its cultures or norms.

The training will help staff understand their obligations under the National Data Guardian’s data security standards in their organisation. It will cover the following areas:

* the importance of data security in the care system
* the NDG data security standards, particularly the three standards relating to personal responsibility (standard 1, 2 and 3)
* the applicable laws (GDPR, FOI etc.) knowing when and how to share and not to share
* understanding:
	+ what social engineering is
	+ safe use of social media and email
	+ the dangers of malicious software
	+ how to protect information
	+ physical security.
* knowing how to spot and report data security breaches and incidents.

**9 MONITORING & AUDIT**

9.1 The implementation of this policy will be audited on an annual basis by the CCG and reported to CCG Executive Team.

**10 POLICY REVIEW**

10.1 The policy and procedure content will be monitored regularly, to ensure it is relevant and up to date, by the CCG, in conjunction with operational managers and staff at the

social Policy Forum. Where review is necessary due to legislative change, this will happen immediately, otherwise the overall review will be every 3 years.

**11 IMPACT ANALYSES**

11.1 **Equality**

In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation.

In developing this policy, an Equality Impact Analysis has been undertaken and is attached at Appendix 2. As a result of the initial screening, the policy does not appear to have any adverse effects on people who share protected characteristics and no further actions are required at this stage.

The application of this policy will be monitored alongside recruitment monitoring data to ensure fair application.

11.2 **Sustainability**

A Sustainability Impact Assessment has been completed for this policy and is attached at Appendix 2.

11.3 **Quality**

All policies require an assessment for a potential impact on quality. A quality impact assessment form is attached at Appendix 2 of the Policy.

Completed paperwork on all assessments should be submitted with the policy for approval and must be published on the internet with the approved policy

11.4 **Bribery Act 2010**

The relevance of the Bribery Act 2010 must be considered in respect of every policy. It is considered that it is relevant to this policy as it is possible that someone may be bribed into offering a role to a candidate and therefore the audience of the policy must be respectful of the following information;

Under the Bribery Act 2010, it is a criminal offence to:

* Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so;  and
* Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.
* Failure to prevent bribery; The Bribery Act also introduced a corporate offence for a relevant commercial organisation (the CCG) to bribe another person intending (1) to obtain or retain business, or (2) to obtain or retain an advantage in the conduct of business.  The only defence available to the CCG against Bribery Act
* offences would be to prove that it had adequate procedures in place designed to prevent persons associated with it from undertaking any of the conduct outlined above.

These offences can be committed directly or by and through a third person and, in many cases, it does not matter whether the person knows or believes that the performance of the function or activity is improper.

It is therefore, extremely important that staff adhere to this and other related policies and documentation (as detailed on the CCG’s intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.

If an employee suspects that fraud, bribery or corruption has taken place, they should ensure it is reported to the LCFS and/or to NHSCFA as follows:

* LCFS, AuditOne, Kirkstone Villa, Lanchester Road Hospital, Lanchester Road, Durham, DH1 5RD.  Tel: 0191 4415936; Email: counterfraud@audit-one.co.uk or ntawnt.counterfraud@nhs.net
* The CCG’s Chief Finance Officer,
* NHSCFA, 0800 028 40 60 (powered by Crimestoppers)
* Online: <https://cfa.nhs.uk/reportfraud>

Further information on the Bribery Act can be found at [www.opsi.gov.uk/acts](http://www.opsi.gov.uk/acts).

**12 REFERENCES and ASSOCIATED DOCUMENTATION**

This policy should be read in conjunction with the following CCG policies:

 Recruitment and Selection policy

 Disciplinary policy

 Absence Management Policy

**PART 2**

**INDUCTION PROCEDURE**

1.1 The CCG will ensure that the induction programme will normally be completed within

the first 3 months of an individual’s employment with them, however, Safeguarding

training should take place within 6 weeks of commencement date.

1.2 The length and nature of the induction process can be tailored to the individual depending on the complexity of their role, nature of the department and if they are a new or existing employee.

1.3 The CCGs induction is in two parts corporate and local. Completion of the corporate induction and completion of a local induction will be monitored and recorded in line with the CCG’s policy and procedure.

• Stage 1 Local Induction:

This part of the induction introduces the employee to the Team / Directorate and should be completed within the first four weeks of employment. It may be completed either in groups or on a one to one basis and should encompass all elements listed in the Local Induction Checklist attached in Appendix 1. A copy of the completed checklist should be signed and retained by both the manager and individual.

• Stage 2 Corporate Induction:

1.4 The corporate induction should be completed within the first 3 months of employment. Areas that should be covered include:

 The CCGs – vision, value and strategic overview

 Organisation structure – specific divisional roles and responsibilities



 Conflicts of Interest Management

 The role of the HR Team

 Compliance/Mandatory Training

1.5 If it is not practical to run formal corporate induction training due to the small number of new recruits to the CCG each month, then it will be the responsibility of line managers to arrange 1-1 sessions for the new employee to meet with the appropriate people to cover the areas outlined above.

1.6 Induction may also include visits to other teams / Directorates as appropriate.

1.7 It is the responsibility of the line manager to determine whether a bank, agency, temporary worker or contractor is required to complete the corporate induction training. Line managers should consider the length and time commitment associated with the role and also the requirements of the role.

**2 CONTRACT OF EMPLOYMENT AND RELATED POLICIES AND PROCEDURES**

2.1 During the probationary period the employee will be employed on a contract of employment and subject to a range of CCG policies and procedures together with all relevant operational policies and procedures. However, the following policies will not apply during the probationary period: Management of Attendance Policy, Disciplinary

Policy and Managing Work Performance Policy. This does not affect any statutory rights.

2.2 Details of the probationary period will be clearly set out in offer letters, and the contract of employment.

2.3 During the probationary period and in line with contractual requirements the CCG shall give the employee one month notice of termination of employment.

2.4 During the probation period the employee is required to give the CCG notice in line with that set out within their contract of employment should they wish to terminate their employment.

2.5 Following successful completion of the probationary period the employee will also be covered by the Performance Appraisal Framework.

**3. RECORD KEEPING**

3.1 It is important that a written/electronic record is kept by the manager of the outcome of every stage of the probationary assessment process and that this record can be accessed by the employee and the HR Team.

3.2 Records will include the Probationary Period Assessment Form (Appendix 3) and copies of any letters sent to the employee by the manager concerning a need for improvement, an extension of the probationary period and the outcome of the probationary period review process.

**4. RIGHT TO REPRESENTATION**

4.1 An employee is entitled to be accompanied at a probationary period review meeting should they wish. The employee may be accompanied by a Trade Union or staff organisation representative, or a CCG colleague not acting in a legal capacity.

4.2 A minimum of five working days’ notice of each review meeting will be provided by the manager who will take into account the right of the employee to representation when making the meeting arrangements.

4.3 It is the responsibility of the employee to arrange for their representative to attend a review meetings. If an employee’s chosen companion will not be available at the time proposed for a meeting by the employer, the CCG must postpone the hearing to a time proposed by the employee provided that the alternative time is both reasonable and not more than five working days after the date originally proposed unless agreed by both parties..

**5. EXTENSION TO PROBATIONARY PERIODS**

5.1 A probationary period should only be extended in exceptional circumstances, e.g. where the performance of the employee has not met the required standard, but it is felt that further time for review is necessary, e.g. due to a lack of available support or because of sickness absence resulting in an inability to conduct reviews.

5.2 Any extension to the probationary period can only be for a short period of time, and for no more than eight weeks beyond the end of the initial probationary period. The manager and the employee must both agree to an extension. Advice and guidance on the extension of probationary periods is available from the HR Team. If the employee does not agree to an extension the manager will follow the process set out in section 16.

5.3 Any extension to the probationary period should be confirmed to the employee, see

Appendix 5, including the reason/s for the extension together with the required

standards/objectives and the support available to achieve the required performance standards.

**6. OUTCOME OF PROBATIONARY PERIOD**

6.1 Upon completion of the probationary review meetings, including any extension to the probationary period, the manager will either decide that the employee is to be confirmed in post or to recommend that they be dismissed.

6.2 This decision/recommendation, with reasons, will be recorded in a letter to the employee. A copy should be retained by the manager, and on the employee’s personal file (see Appendix 4 and 6).

6.3 Where there is a recommendation that the employee be dismissed this will be subject to a written report by the manager which will be considered at a meeting with the Chief Operating Officer/ Director with delegated authority, a HR representative and the employee, at which a decision will be made. The employee is entitled to be accompanied at this meeting as stated in section 3 of this procedure.

**7. RIGHT OF APPEAL**

7.1 An employee has a right to appeal against a decision made to terminate their employment during, or at the conclusion of, their probationary period.

7.1 The appeal process to be followed is set out in Appendix C of the CCG Disciplinary Policy and Procedure – CCG Appeals Procedure.

**8. Statutory and Mandatory Training**

8.1 The CCG is committed to the safety and welfare of its staff. To ensure the organisation and new starters comply with the statutory legislation and mandatory requirements identified by national and local guidelines, all new (and existing) employees must complete the statutory and mandatory training required of their role, as per the Statutory and Mandatory Training Policy, within 4 weeks of commencement of employment.

**Appendix 1: Local Induction Checklist**

**Name: Start Date: Department: Submission Date:**

(no later than 1 month after commencement)

|  |  |
| --- | --- |
| **ADVANCE OF STARTING** | **Completed by Line Manager (Initials)** |
| Log In’s Requested (Y Drive and nhs.net) – Via BM |  |
| IT Booked for first day to assist with Computer Set up (Mapping to the Y Drive/Printers etc.) |  |
| Y Drive Access |  |
| Desk Allocated – if applicable |  |
| Equipment Ordered and Set Up |  |
| CCG Structure Sent |  |
| Added to all Staff Distribution List |  |
| Portal Password Requested – Via IT (if applicable) |  |

|  |  |
| --- | --- |
| **Induction Subject Area** | **Completed (Initials)** |
|  | **Employee** | **Manager** |
| **1. Introductions** |
| Introduction to colleagues/team and manager |  |  |
| Introductions to key contacts specific to role: |  |  |
| Domestic Arrangements (Lunch, Refreshments, Toilet, Codes, Reception Opening Hours, Signing In etc.) |  |  |
| 1:1 with CCG Director – Overview of CCG |  |  |
| **2. Health & Safety** |
| Tour of building e.g. toilets, meeting rooms, kitchen |  |  |
| **2.1 Fire Safety:** |
| Introduction to Fire Warden |  |  |
| Fire escapes, fire assembly points, fire alarm weeklytest time, actions to take in the event of a fire |  |  |

|  |  |  |
| --- | --- | --- |
| **2.2:Risk Assessments** |  |  |
| Location of Risk assessments ( CCG Intranet)Any allergies / conditions that may be affected by anything in the assessments |  |  |
| **2.3 Manual Handling** |
| Is any specific manual handling required for the role(other than handling associated with office work) |  |  |
| **2.4 Security:** |
| Issue ID Badge – Office Manager |  |  |
| Issue Door Fob/access card - Receptionist |  |  |
| **2.4 Safe Working Practice:** |
|  Complete Display Screen Equipment Assessment |  |  |
| Discuss safe working practices (e.g. Risks associatedwith Display Screen Use, not bringing electrical items in from home, personal safety, lone working) |  |  |
| Incident/Accident/ Reporting (CCG Incident App) |  |  |
| Location of First Aid Room & Boxes |  |  |
| Is a Young Persons Risk Assessment required? |  |  |
| Is a Personal Emergency Evacuation Plan required? |  |  |
| No Smoking Building |  |  |
| **3. Car Parking & Travel** |
| Car Parking Arrangements |  |  |
| Travel Expenses – including checking of documentationin line with Travel and Expenses Policy (insurance Documents) |  |  |

|  |
| --- |
| **4. Management/Corporate** |
| Contract of Employment – Signed and returned toLine Manager |  |  |
| All new starter paperwork completed and returned toLine Manager ESR New Starter form Declaration of Interest form |  |  |

|  |
| --- |
| **4.2 Attendance** |
| Time and Attendance Process |  |  |
| Booking Annual Leave |  |  |
| Reporting Sickness Absence |  |  |
| Procedures regarding Special Leave |  |  |
| Flexi time/time off in lieu |  |  |
| **Policies and Strategies to Read** |  |  |
| Absence Management |  |  |
| Annual Leave |  |  |
| Carers Compassionate and Crisis Leave |  |  |
| Code and Conduct for Confidentiality |  |  |
| Conflicts of Interest Policy |  |  |
| Disciplinary |  |  |
| Flexi time |  |  |
| Grievance |  |  |
| Smoking |  |  |
| **Strategies to read:** |  |  |
| CCG Constitution |  |  |
| Incident Reporting |  |  |
| Performance and Development Appraisal |  |  |
| Risk Strategy |  |  |
| Statutory and Mandatory Training Framework |  |  |
| Staff members should make themselves aware of the other policies of the CCG via the Policy section on the website |  |  |
| **4.3 Job Specific** |
| Understanding of Job Description and how role fits intoCCG structure (copy of structure chart) |  |  |
| Booked 1-1 to set objectives and personal developmentplan |  |  |
| Attendance at team meetings and any other identifiedmeetings/groups |  |  |
| Monitoring of performance & Performance Reviewprocess |  |  |
| Information and support available –mentoring/coaching |  |  |
| **4.4 Development** |
|  Please see the Learning and Development Policy. |  |  |

|  |  |  |
| --- | --- | --- |
| Authorisation of Training/Courses Process |  |  |
| **4.5 Health & Wellbeing** |
| Occupational Health Services and Contact Details |  |  |
| **5. Confidentiality** |
| Discussed Confidentiality in Work Setting (locking PCscreen, filing paperwork, shredding etc) |  |  |
| **6. IT** |
| Access to PC, email, phone on site, internet Mobile Phone |  |  |
| Issue of any mobile equipment required |  |  |
| Issue of Smart Card (if relevant) |  |  |
| Add contact details to CCG directory/distribution list (office Manager) |  |  |
| Discuss appropriate use ofemail/internet/telephone/mobile phone |  |  |
| Discuss use of encrypted memory stick only and notusing personal laptops for work (if relevant) |  |  |
| Ensure understanding of process for reporting issuesthrough IT helpdesk |  |  |
| **7. Finance** |
| Sign post to Finance and Corporate Governance Policiesand Procedures (This must include the Counter FraudPolicy and the Whistleblowing Policy) |  |  |
| All new starter paperwork completed and returned toLine Manager |  |  |
| 1-1 with Management Accountant (if Budget Holder) |  |  |
| **8. Environment & Resources** |
| Car Sharing, Reduced use of paper and printing,recycling |  |  |
| System for Stationery and Equipment Orders |  |  |
| **9. Mandatory/Compliance Training** |
| Please see Statutory and Mandatory Training Policy The following training must be completed within 1 month of start date: |
|  Information Governance (including cyber security training) COI Training |  |  |
| The following training must be completed within 3 month of start date, unless otherwise stated: |
|  Equality & Diversity* DSE (Within 1 Month)

 Fire Safety (within 1 month) Health & Safety ( within 1 Month) Infection Prevention & Control |  |  |

|  |  |  |
| --- | --- | --- |
|  Manual Handling Mental Health Legislation Safeguarding Adults(within 6 weeks of starting) Safeguarding Children(within 6 weeks of starting) |  |  |
| **Comments:**................................................. ManagersSignature................................................. Print Name |

**I confirm that I have received the above Induction**

**Name: Date:**

**A copy of the completed checklist must also be placed on the employees personnel file held in the CCG Administration Office**

**Appendix 2: Standard Letter for Review Meeting**



Dear ................................. Induction and Probationary period

Further to our discussion I write to confirm the agreed dates for your review meetings:-

|  |  |  |
| --- | --- | --- |
| **Week** | **Date** | **Time** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

All meetings will be held in my office and if you are unable to attend any of these meetings please let me know as soon as possible.

You have the right to be accompanied at the meeting by a work colleague or trade union representative not acting in a legal capacity.

Yours sincerely

Manager

**Appendix 3: Probationary Periods – Review Documentation**

Name of employee ........................................................ Post ............................................................. Department ........................................... Date commenced in post .................................................. Name of Line Manager ..................................................................................... Review period (specify week) ...........................................................................................

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **KEY RESULT AREAS****(breakdown further if necessary)** | **Satisfactory** | **Unsatisfactory****(specify in more detail)** | **Details of further****experience, learning, coaching required** | **Comments from employee** |
| Induction |  |  |  |  |
| Performance of duties |  |  |  |  |
| Customer service |  |  |  |  |
| Integration into department |  |  |  |  |
| Relationships with co-workersand manager |  |  |  |  |
| Attendance/Timekeeping |  |  |  |  |
|  | Sign off | Manager: | Date: |
|  | Employee: | Date: |

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**Appendix 4: Standard Letter – Successful Outcome**

Dear ................................... Probationary period

I write to confirm that you have successfully completed your probationary period in the following areas:-

 performance of the duties in accordance with the job description

 customer service

 integration into the workplace

 relationships with co-workers and managers

 attendance and timekeeping or as relevant to post.

I have pleasure in confirming your appointment with effect from your original date of commencement with North Lincolnshire CCG.

Please attach this letter to your contract of employment.

I am looking to you to maintain the high standard of work you showed during your probationary period.

Thank you for your hard work and contribution to the CCG. Yours sincerely

Manager



**Appendix 5: Standard letter – Extension of Probationary Period**

Dear ................................... Extension of probationary period

Following our review meetings I can confirm that it will be necessary to extend your probationary period for a period of (up to 8 weeks), effective from

..................................................... and ending on...............................................

This is necessary for the following reasons:-

By the end of this extension I expect you to have achieved the following objectives/standards:-

To help you to do this, I will support you as follows:-

If you are unable to meet the required standards for this post, it will be necessary to terminate your employment with North Lincolnshire CCG.

Yours sincerely

Manager



**Appendix 6: Standard letter – Unsuccessful Outcome**

Dear ................................... Probationary period

Further to our meeting on ........................................... I write to confirm the outcome. Present with me was .................................................... You were accompanied by........................................

Prior to the meeting we met on a number of occasions to discuss progress on your probationary period and I offered you additional help and support to help you to meet the required standards of your post.

Specifically, this additional help and support was as follows:-

I regret to inform you however that despite the CCG’s best efforts you have not completed your probationary period to the required standards in the following areas:-

Documentary evidence in support of this is attached.

As a consequence of the standards not being met I have no option other than to convene a dismissal hearing in line with the CCGs Disciplinary Policy. I will write to you in due course setting out the details of the hearing. ...................................................

Upon dismissal you are entitled to one month’s notice and this will be paid in lieu to you.

In line with the policy, you will have upon dismissal the right of appeal to ………….

There is no further right of appeal beyond this.

Yours sincerely

Manager

**Appendix 7**

|  |  |  |  |
| --- | --- | --- | --- |
| **INTEGRATED IMPACT ASSESSMENT** |

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| --- |
|  |

 |  |
| Policy/project/function/service |  Induction & Probationary Period Policy 2019 |  |  |  |  |
| Date of analysis: |  23/9/2019 |  |  |  |  |
| Type of analysis completed | Quality  |  Yes |  |  |  |  |
| Equality |  Yes |  |  |  |  |
|  |  Yes |  |  |  |  |
| What are the aims and intended effects of this policy/project or function? |  Support the effective induction of new staff to the CCG . |  |  |  |  |
| Please list any other policies that are related to or referred to as part of this analysis |  Recruitment & Selection PolicyDisciplinary PolicyAbsence Management Policy |  |  |  |  |
| Who does the policy, project, function or service affect? | Employees |  Yes |  |  |  |  |
| Service users |   |  |  |  |  |
| Members of the public |   |  |  |  |  |
| Other (please list) |   |  |  |  |  |
|   |   |   |   |   |   |   |   |   |  |  |  |  |
| **QUALITY IMPACT** |  |  |  |  |
|  | **Please ‘X’ ONE for each**  | **Brief description of potential impact** | **Mitigation strategy and monitoring arrangements** | **Risk 5 x 5 risk matrix)** |  |  |  |  |
| **Chance of Impact on Indicator** |  |  |  |  |
| **Positive Impact** | **No Impact** | **Negative Impact** | **Likelihood** | **Consequence** |  |  |  |  |
|  | **X** | **X** | **X** |  |  |  |  |
| **PATIENT SAFTEY**  |   |  |  |  |  |
| Patient safety /adverse events |  | **X** |  |  |   |  |  |  |  |  |  |
| Mortality position |  | **X** |  |  |   |  |  |  |  |  |  |
| Infection control MRSA/CDIFF |  | **X** |  |  |   |  |  |  |  |  |  |
| CQC status |  | **X** |  |  |   |  |  |  |  |  |  |
| NHSLA / CNST  |  | **X** |  |  |   |  |  |  |  |  |  |
| Mandatory/statutory training | **X** |  |  | Policy should support staff in undertaking appropriate training   |   |  |  |  |  |  |  |
| Workforce (vacancy turnover absence) | **X** |  |  | Policy should support the retention of staff through effective engagement and clarity re expectations. |   |  |  |  |  |  |  |
| Safe environment | **X** |  |  | Staff are expected to familiarise themselves with health & safety requirements.  |   |  |  |  |  |  |  |
| Standard & suitability of equipment |  | **X** |  |  |   |  |  |  |  |  |  |
| **CLINICAL EFFECTIVENESS** |  |  |  |  |
| NICE Guidance and National Quality Standards, eg VTE, Stroke, Dementia |  | **X** |  |  |   |  |  |  |  |  |  |
| Patient related outcome measures |  | **X** |  |  |   |  |  |  |  |  |  |
| External accreditation e.g. professional bodies ie RCN |  | **X** |  |  |   |  |  |  |  |  |  |
| CQUIN achievment |  | **X** |  |  |   |  |  |  |  |  |  |
| **PATIENT EXPERIENCE** |  |  |  |  |
| Will there be an impact on patient experience if so how |  | **X** |  |  |   |  |  |  |  |  |  |
| Will it impact on carers if so how |  | **X** |  |  |   |  |  |  |  |  |  |
| **INEQUALITIES OF CARE** |  |  |  |  |
| Will it create / reduce variation in care provision? |  | **X** |  |  |   |  |  |  |  |  |  |
| **STAFF EXPERIENCE** |  |  |  |  |
| What is the impact on workforce capability care and skills? | **X** |  |  | Supports requirements for a well educated workforce  |   |  |  |  |  |  |  |
| Will there be a change in working practice, if so, how? |  | **X** |  |  |   |   |   |  |  |  |  |
| Will there be an impact on training  | **X** |  |  | Clarifies training requirements  |   |  |  |  |  |  |  |
| **TARGETS / PERFORMANCE** |  |  |  |  |
| Will it have an impact on performance, if so, how? |  | **X** |  |  |   |  |  |  |  |  |  |
| Could it impact on the achievment of local, regional, national targets, if so, how? |  | **X** |  |  |   |   |   |  |  |  |  |
|  |  |  |  |  |   |   |   |   |  |  |  |  |
| **EQUALITY IMPACT** |  |  |  |  |
| Analysis Rating (see completion notes) | Red |   | Red/Amber |   | Amber |   | Green |   |  |  |  |  |
| Approved by: | Commissioner Lead: |   | GP lead for E&D: |   |  |  |  |  |
| Date |   | Date  |   |  |  |  |  |
| **Local Profile Data** |  |  |  |  |
| General  |  N/A |  |  |  |  |
| Gender (Men and Women) |   |  |  |  |  |
| Race (All Racial Groups) |   |  |  |  |  |
| Disability (Mental and Physical, Sensory Impairment, Autism, Mental Health Issues) |   |  |  |  |  |
| Religion or Belief |   |  |  |  |  |
| Sexual Orientation (Heterosexual, Homosexual and Bisexual) |   |  |  |  |  |
| Pregnancy and Maternity |   |  |  |  |  |
| Transgender |   |  |  |  |  |
| Marital Status |   |  |  |  |  |
| Age |   |  |  |  |  |
| **Equality Data** |  |  |  |  |
| Is any equality data available relating to the use or implementation of this policy, project or function? |  None |  |  |  |  |
| List any consultation e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this policy, project or function. |  Local staff side involvement through Social Policy Forum |  |  |  |  |
| Promoting inclusivity; How does the project, service or function contribute to our aims of eliminating discrimination and promoting equality and diversity? |  No specific impact. |  |  |  |  |
| **Equality Impact Risk Assessment test** |  |  |  |  |
| What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by *The Equality Act 2010*? |  |  |  |  |
| Protected Characteristic: | No Impact | Positive Impact | Negative Impact | Evidence of impact and if applicable justification where a *Genuine Determining Reason* exists |  |  |  |  |
| Gender (Men and Women) |  X |   |   |   |  |  |  |  |
| Race (All Racial Groups) |  X |   |   |   |  |  |  |  |
| Disability (Mental and Physical, Sensory Impairment, Autism, Mental Health Issues) |  X |   |   |   |  |  |  |  |
| Religion or Belief |  X |   |   |   |  |  |  |  |
| Sexual Orientation (Heterosexual, Homosexual and Bisexual) |  X |   |   |   |  |  |  |  |
| Pregnancy and Maternity |  X |   |   |   |  |  |  |  |
| Transgender |  X |   |   |   |  |  |  |  |
| Marital Status |  X |   |   |   |  |  |  |  |
| Age |  X |   |   |   |  |  |  |  |
| **Action Planning**  |  |  |  |  |
| As a result of performing this Equality Impact Analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by The Equality Act 2010? |  |  |  |  |
| Identified Risk: | Recommended Action: | Responsible Lead | Completion Date | Review Date |  |  |  |  |
|  |   |   |   |   |  |  |  |  |
|   |   |   |   |   |  |  |  |  |
|   |   |   |   |   |  |  |  |  |
| **SUSTAINABILITY IMPACT** |  |  |  |  |
| Staff preparing a Policy / Board Report / Committee Report / Service Plan / Project are required to complete a Sustainability Impact Assessment. Sustainability is one of the Trust’s key Strategies and the Trust has made a corporate commitment to address the environmental effects of activities across Trust services. The purpose of this Sustainability Impact Assessment is to record any positive or negative impacts that this activity is likely to have on each of the Trust’s Sustainability Themes.  |  |  |  |  |
|   | **Positive Impact** | **Negative Impact** | **No Specific Impact** | **What will the impact be? If the impact is negative, how can it be mitigated? (action)** |  |  |  |  |
| Reduce Carbon Emission from buildings by 12.5% by 2010-11 then 30% by 2020 |   |   |  X |   |  |  |  |  |
| New builds and refurbishments over £2million (capital costs) comply with BREEAM Healthcare requirements. |   |   |  X |   |  |  |  |  |
| Reduce the risk of pollution and avoid any breaches in legislation. |   |   |  X |   |  |  |  |  |
| Goods and services are procured more sustainability. |   |   |  X |   |  |  |  |  |
| Reduce carbon emissions from road vehicles. |   |   |  X |   |  |  |  |  |
| Reduce water consumption by 25% by 2020. |   |   |  X |   |  |  |  |  |
| Ensure legal compliance with waste legislation. |   |   |  X |   |  |  |  |  |
| Reduce the amount of waste produced by 5% by 2010 and by 25% by 2020 |   |   |  X |   |  |  |  |  |
| Increase the amount of waste being recycled to 40%. |  X |   |   |  Covers re-cycling during induction period |  |  |  |  |
| Sustainability training and communications for employees. |   |   |  X |   |  |  |  |  |
| Partnership working with local groups and organisations to support sustainable development. |   |   |  X |   |  |  |  |  |
| Financial aspects of sustainable development are considered in line with policy requirements and commitments. |   |   |  X |   |  |  |  |  |