



**Northern Ireland Practice and Education Council  
for Nursing and Midwifery**

**PROJECT INITIATION DOCUMENT  
FOR  
REGIONAL SCOPING OF INDUCTION PROGRAMMES FOR NURSES  
AND MIDWIVES (BAND 5)**

## 1.0 Introduction

Chief Nursing Officer (CNO) has commissioned NIPEC in 2016 to conduct a scoping exercise in relation to Band 5 Nurse and Midwifery induction programmes within the 5 HSC Trusts.

Induction or induction training is described as a form of introduction for new starters in order to enable them to do their work in a new profession or job role within a business (or establishment).<sup>1</sup> Induction provides employees with a smooth entry into the organisation by providing them with the information they require to get started and is recognised as the end or final stage of the recruitment process.

In small organisations, the responsibility for carrying out induction training usually rests with one person. In larger organisations, the responsibility is shared between managers, supervisors and human resources. In the case of both big and small organisations the employees and his/her, senior manager play a major role in inducting an employee.

Within the HSC Trusts all new staff receive an induction. Induction programmes for Band 5 Nurses and Midwives comprises of:

- Human Resources Corporate Induction
- Nursing Induction
- Local or Departmental Induction

### **Human Resources Corporate Induction:**

The Human Resources /Corporate aspect of induction aims to:

Increase knowledge of the organisation and its procedures and policies including those associated with the patient experience and health and safety, to provide the new employee with the information they need, to operate safely in the workplace.

Corporate Induction aims to:

- Make it easier for new members of staff to familiarise themselves with the organisation and the services that it provides

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<sup>1</sup> Collins Dictionary, 2014. *Induction Training*. [Online] (Updated 2014) Available at: <http://www.collinsdictionary.com/dictionary/english/induction-training> accessed July 2016

- Enable new employees to understand the Trust's values and culture and the environment that they'll be working in
- Provide an overview of the organisation to enable the new employee to see where he/she fits into the overall picture
- Introduce new staff to key, relevant Trust policies, procedures and practices.
- Support the new nurse/midwife to registered to the correct originate on HRPTS

### **Nursing Induction:**

Nursing Induction aims to:

- Provide the new employee an overview to the senior nursing team and nursing structures within the organisation
- Ensures initial clinical mandatory information/training needs are met
- Provide information and signpost access to relevant nursing policies and procedures of the organisation.

### **Local or Departmental induction:**

Local Induction complements the induction process and ensures new-starts are inducted into local practice area settings.

The aim of Departmental Induction is to localise the induction process:

- address any new job concerns
- to provide the new nurse/midwife with the departmental information they need to operate safely in the workplace.
- to support the new nurse/midwife who moves across clinical settings and/or organisational boundaries
- share job specific information including KSF/PDP requirements

### **Background to project**

There is a view that Band 5 Nursing and Midwifery induction programmes vary across the five HSC Trusts with regard to content, duration and how induction programmes are delivered.

In some instances induction programmes are delivered in-house by the Trust Nursing Team whilst in others the HSC Trust works in partnership with the Clinical Education Centre to deliver some or part of the Nursing/Midwifery induction programmes. It is also acknowledged that there is variation as to how nurses and midwives coming from various areas i.e. newly qualified, new to a Trust and international nurses are inducted across the region and how induction interfaces with preceptorship.

The initial scoping exercise has been requested by CNO to obtain accurate information regarding the range, type and extent of Band 5 Nursing and Midwifery induction programmes being delivered across the five HSC Trusts. It is anticipated this will lead to further work to agree and develop an induction programme for use across the HSC.

### **Objectives**

To develop a regionally agreed programme to support the induction of Nurses and Midwives across the five HSC Trusts to include newly qualified registrants and registrants new to the organisation.

It is anticipated that the objectives of the project will be delivered over 2 phases

- **Phase1**  
Scope the current education/training programmes commissioned by or employed within each of Trusts that relate to Band 5 Nursing and Midwifery induction programmes.
  
- **Phase2**  
Develop a regionally agreed induction programme to support Nursing induction for Band 5 Nurses and Midwives across the five HSC Trusts.

**To Note:** this work stream is being progressed alongside the specific work to support the induction of International Nurses being progressed by the International Recruitment Professional Pathway Subgroup. A programme to be delivered by the

Clinical Education Centre has been developed regionally to support induction of International Nurses.

**Objectives:**

**Phase 1**

- a. Establish a regional steering group to achieve the expected outcomes.
- b. Agree a proforma to gather the information required in relation to the professional induction programmes for Band 5 Nurses and Midwives.
- c. Through Trust representatives, identify personnel, who can collect the data within their respective Trusts.
- d. Scope the current education/training programmes commissioned by or employed within each of five Trusts that relate to Band 5 Nursing and Midwifery induction.
- e. Agree a strategy for qualitative data analysis
- f. Review and analyse data received

**Phase 2**

- g. Develop a regionally agreed induction programme for Band 5 Nurses and Midwives across the five HSC Trusts to include
  - Newly qualified registrants
  - Registrants new to the organisation

**Methodology Overview**

NIPEC will lead this work programme, in partnership with key stakeholders. It is proposed that this should be conducted over a six month period commencing in September 2016. Following the establishment of a working group the methodology proposed below will be further defined. This project will be completed by February 2017. The work programme outlined below, is designed to achieve the objectives.

## Work Programme

<b>Activity:-</b>
<b>Phase 1 September 2016 – March 2017</b>
1. Establish regional steering group to achieve expected outcomes
2. Agree a proforma to gather the information required in relation to the range and extent of induction programmes within the five HSC Trusts.
3. Scope the current education/training programmes commissioned by or employed within each of the five Trusts to support induction.
4. Trust representatives; identify personnel, who can collect the data within their respective Trusts.
5. Agree a strategy for data analysis
6. Review and analyse data received.
7. Draft findings and report to CNO
<b>Phase 2 March- May/June 2017</b>
8. Develop a regionally agreed induction programme to support induction for Band 5 Nurses and Midwives across the five HSC Trusts to include <ul style="list-style-type: none"><li>➤ Newly qualified registrants</li><li>➤ Registrant New to HSC Trust organisation</li></ul>

### 2.0 Scope

To include Band 5 Nursing and Midwifery induction programmes within the five HSC Trusts.

It is anticipated the outputs from the International Recruitment of Nurses into Northern Ireland - professional pathway sub group being led by the DHSSPS will compliment and this work stream

### 3.0 Resources

NIPEC will co-ordinate, host and provide professional nursing expertise as well as administrative support to the project, applying a project management approach. Individuals on the Group have a responsibility to represent their organisation effectively, by full attendance at meetings relating to the project.

Participating organisations will undertake that relevant staff be released for all required meetings, for the duration of the project, and to support further participation in activities/groups, if required, to achieve the objectives of the project.

#### **4.0 Dissemination and Implementation**

Communication and consultation will be on-going throughout the project, using various mechanisms such as email, teleconferencing facilities and face-to-face meetings. The NIPEC website and news bulletin will reflect the progress of the project.

Dissemination of the Final Report of the project will be the responsibility of NIPEC.

#### **5.0 Equality and Governance Screening**

As required by Section 75, Schedule 9, of the Northern Ireland Act, 1998, any equality implications of this project have been considered. In addition, consideration has been given to the terms of the Human Rights Act 1998.

Consideration has been given to any equality implications relating to Phase 1 of this project and none were found as this is purely a scoping exercise to inform Phase 2. However, a full equality screening of Phase 2, i.e. the development of a regionally agreed framework/pathway to support nursing induction for Band 5s, will be undertaken at that stage, and will include any products arising from this phase of the project.

In addition, to ensure NIPEC and its stakeholders are meeting its legal obligations and responsibilities under various Corporate Governance areas, the project plan, its aims and objectives and outcomes have been examined and screened for any issues relating to the following areas:

- Risk Management
- Privacy Impact Assessment (PIA)
- Personal Public Involvement (PPI)

A summary of these considerations and any action required is documented in Appendix A.

**6.0 Evaluation**

The project will be subject to an end of project evaluation report.



## Equality and Governance Screening

Area	Comments
<b>Risk Management questions</b>	
<ul style="list-style-type: none"> <li>• Have any risks been identified?</li> <li>• What is the potential impact of these?</li> <li>• How can these be mitigated or have alternatives options been identified which would have a lower risk outcome?</li> <li>• Where negative impacts are unavoidable, has clarity been given to the business need that justifies them?</li> </ul>	No
<b>Equality and Human Rights questions</b>	
<ul style="list-style-type: none"> <li>• What is the likely impact on equality of opportunity for those affected by this policy for each of the Section 75 equality categories (minor/major/none)?</li> <li>• Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?</li> <li>• To what extent is the policy likely to impact on good relations between people of a different religious belief, political opinion or racial group (minor/major/none)?</li> <li>• Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?</li> </ul> <p><b>NB</b> – please refer to NIPEC’s Equality Screening Policy and Screening Templates to assist in considering equality and human rights</p>	<i>Please see section 5.0 within the PID</i>
<b>Privacy Impact Assessment (PIA) questions</b>	
<ul style="list-style-type: none"> <li>• Will the project use personal information and/or pose genuine risks to the privacy of the individual?</li> <li>• Will the project result in a change of law, the use of new and intrusive technology or the use of private or sensitive information, originally collected for a limited purpose, to be reused in a new and unexpected way?</li> </ul>	See above
<b>Personal and Public Involvement (PPI) questions</b>	
<ul style="list-style-type: none"> <li>• Has a requirement for PPI been identified, and if so, what level of PPI will be required for the project?</li> </ul> <p><b>NB</b> – please refer to and use NIPEC’s PPI Decision Tree/Algorithm to assist in considering PPI</p>	See above

**MEMBERSHIP**

**Stakeholder organisation Representative**

- 5 HSC Trusts Nursing Learning and Development Leads
- Moira Mannion (Proposed Chair), & representing the Education Leads 5 HSC Trusts
- Clinical Education Centre N&M
- DoH Workforce Policy
- NIPEC Frances Cannon (Project Lead)
- Staff side
- Human Resources representing HR Leads 5 Health & Social Care Trusts

## Membership

<b>Member of Group</b>	<b>Organisation</b>
Frances Cannon (Project Lead)	NIPEC
Moira Mannion, (CHAIR)	Belfast Health & Social Care Trust
Eilish McDougal	Belfast Health & Social Care Trust
Adrian Bell	Belfast Health & Social Care Trust
Una St Ledger	Belfast Health & Social Care Trust
Claire McGuigan	Northern Health & Social Care Trust
Sharon McRoberts	South Eastern Health & Social Care Trust
Dawn Ferguson	Southern Health & Social Care Trust
Sally Martin	Western Health & Social Care Trust
Fiona Bradley	Clinical Education Centre
Linzi McIlroy	Royal College of Nursing
Mary Caddell	Royal College of Midwives
Ursula Doherty	Rep HR Director for 5 Trusts
Maura McKenna	Unions representatives
Heather Finlay	DoH Nursing
Marc Bailie	DoH Workforce Policy



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This document can be downloaded from the NIPEC website  
<http://www.nipec.hscni.net>

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