

**Template for Department/Local Induction Checklist for
Agency/Locum Staff**

Ward/Department Orientation Form

Name Department/Agency

Notes for completion. Please use the tick chart below to record when you have received an orientation to each new ward/department that you work on. It is your responsibility to complete this document, and to ensure you have been made aware, and understood all the elements listed below before ticking the column concerned. The form should be used at the beginning of your **first shift only** on a ward/department and, when completed, returned to the bank office for inclusion in your personal file (**agency to send back to the bank office.**)

Please collect additional forms from the ward/department areas or the Nursing/Administration Staff bank .

Ward/Department Name

Orientation List	Done	Comments
Tour of ward, basic ward/department routines, roles & functions of other staff		
Fire Procedure		
Cardiac arrest procedure		
OHSS: Needle stick action box		
Facilities e.g. toilets, staff rooms etc.		
Documentation, location of policies & procedures incl. Standards, major incident, infection control & drugs etc.		
Bleep system, phones & fax		
Admissions, Transfers & Discharges / Deaths		
Site Co-ordinators / Bed Management		
Incident reporting		
IT Access (format to be agreed)		

Signed Date

(Agency Doctor)

Signed Print Name

(Lead Clinician/Supervising Doctor)