

Orientation guidance

# Introduction

# This document is designed to provide information to support programme managers to plan an effective orientation experience into the NHS and the wider health and care system.

# We hope these guidelines will help you to prepare an exciting and full orientation plan which your trainee will remember for the rest of their NHS careers. We know from experience that this is a great foundation, not only for their training but their futures as leaders in healthcare.

# Aims of orientation

The aim of orientation is to give trainees a broad overview of health and care systems to help them consider how patients experience the NHS and the wider health and care system. It should allow trainees to gain a sense of the complexity of the NHS and wider care systems. An effective way to achieve this is through an experiential approach, allowing trainees to learn through shadowing, observation and experience.

Orientation should aim to introduce trainees to:

Orientation should **not** be an introduction to the trainee’s role in their placement and it should **not** be specific to their specialism.

* + The patient journey and the experience of interacting with patient and families.
	+ A systems approach, visiting a variety of partner organisations.
	+ The nature and pattern of the health service delivery.

Wherever possible, trainees should directly experience the provision of health and care services through shadowing, observation or participation. Meetings can have value but should be offered sparingly.

# Duration and timing

The orientation period is **20 working days** at the start of the Scheme except for Policy & Strategy and Health Analysis trainees who should complete **10 days** of orientation at the start of the Scheme and **10 days** in the second six-month wider NHS placement. This excludes education dates or any other scheme dates such as the Welcome Event. These dates will be confirmed as soon as possible to enable orientation planning to take these into account.

# Designing an orientation plan

# Key principles

When designing an orientation plan, consider how to:

* Promote the best introduction to the NHS and the wider health and care system.
* Follow patient journeys.
* Split time between different organisations in your ICS such as:
	+ Acute trusts.
	+ Primary care.
	+ Mental health trusts.
	+ Integrated Care Boards and Integrated Care Partnerships.
	+ Commissioning Support Units.
	+ Ambulance services.
	+ Social care.
	+ Partner organisations including public, private and voluntary organisations.
* Provide opportunities to meet and have exposure to senior managers.
* Create time for reflection so trainees can complete a blog, learning diary and/or share experiences with other trainees.

See **Appendix A** for suggested services to consider for your trainee’s orientation

# Other considerations

**Previous experience**

When designing orientation, please consider the trainee’s previous experience and knowledge. Some trainees may have prior NHS experience or knowledge.

**Working collaboratively**

You may wish to join up with other Scheme managers in your system to create a single plan to support a varied range of activities across multiple organisations. If you would like to be put in touch with other local Scheme managers, please [contact your regional NHS GMTS team](#_APPENDIX_D:_Leadership).

**Multiple trainees in an organisation or system**

If you have multiple trainees in your organisation or system, please consider whether there are orientation activities they could attend in pairs or small groups; this ensures an effective use of time and supports trainees to build relationships with their peers.

**Involving previous trainees**

If you have developed an orientation plan for a previous trainee or have a trainee/alumni in your organisation, we recommend asking them for feedback on their experiences. Previous trainees may also be willing to support with the design and organisation of orientation plans for new cohorts.

**Hybrid and virtual working**

The impact of Covid-19 means many areas of the NHS are now working in a more virtual or hybrid manner. As much as possible, orientation activities should be face-to-face. However, we understand this may not be possible for all activities.

**Cancellations**

In some instances, orientation plans may need to change according to operational priority. Where possible, please reschedule cancelled activities to a later date, even if that means it falls outside of the first 20 working days.

**DBS Checks**

All trainees complete a Standard DBS as part of the NHS recruitment checks prior to commencing on the scheme. If there are delays to clearances being received, we will advise you of this.

# After orientation

# Trainee feedback

Trainees should provide feedback on their orientation. This can be achieved in several ways, although we suggest this is completed through either:

* A one-to-one meeting between the trainee and their Programme Manager.
* As part of the trainee’s first Probation Review meeting.

Other possible ways a trainee could provide feedback are:

* A presentation to placement team, other trainees or at a board meeting
* Writing an article for your organisation or systems newsletter.

# Future placements

We encourage trainees to continue learning about the variety of services in the health and social care system throughout their time on the Scheme, so please do discuss any future shadowing opportunities with trainees. You may want to consider a ‘mini’ orientation when trainees start any future placements.

Still have a question? Take a look at our **Orientation FAQs**

# Appendix A: Suggested services for orientation

**Primary and community care:**

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| GP practices – including practice nurse, allied health professionals, advanced clinical practitioners, phlebotomists, receptionists etc. |[ ]
| Elderly care  |[ ]
| Community therapy services - physiotherapy, psychological therapy, occupational therapy, health visiting, speech therapy, podiatry etc. |[ ]
| Learning disabilities |[ ]
| district nurses, health visitors, school nurses, community psychiatric nurses  |[ ]
| Palliative care services or hospices |[ ]
| Community mental health  |[ ]
| Homeless teams |[ ]
| Social prescribing |[ ]
| Voluntary sector and/or a social enterprise  |[ ]

**Secondary and tertiary care**

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| Clinical specialties e.g. cardiology, trauma and orthopedics, surgery, ear, nose & throat, paediatrics, gynaecology  |[ ]
| Clinical support services e.g. occupational therapy, physiotherapy, podiatry, dietetics, pharmacy, radiography, pathology, theatres and medical physics |[ ]
| Ambulance service - both on the road and at central control. |[ ]
| Hospital support services e.g. catering, portering, domestics, security, switchboard, medical records, hospital estates and supplies, IT. |[ ]
| Central services e.g. finance, corporate communications, marketing, staff development, contracting and IT. |[ ]
| Clinical networks. |[ ]
| Night shift in A&E or shadowing a junior doctor |[ ]

**Mental Health**

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| Adult mental health |[ ]
| Mental health services for older people (organic and functional wards), |[ ]
| Child and Young Peoples Mental Health |[ ]
| Learning disabilities |[ ]
| Forensic mental health  |[ ]
| Substance misuse e.g. community centres or rehabilitation wards |[ ]
| Community mental health and integrated teams |[ ]
| Social services |[ ]

**Other**

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| Academic Health Science Networks |[ ]
| Commissioning Support Units |[ ]
| NHS Blood and Transplant |[ ]
| Healthwatch |[ ]
| Care Quality Commission (CQC) |[ ]
| NHS England |[ ]
| Voluntary, Community and Social Enterprise Sector (VCSE) |[ ]

# Appendix B: Regional NHS GMTS team contact details

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| **Region**  | **Email address**  |
| East of England  | eoe@leadershipacademy.nhs.uk  |
| London  | graduateenquiries.lase@leadershipacademy.nhs.uk  |
| Midlands  | midlands@leadershipacademy.nhs.uk  |
| North East & Yorkshire  | england.gmts.ney@nhs.net  |
| North West  | nwla.gmtsnw@nhs.net  |
| South East  | gmts.selll@leadershipacademy.nhs.uk  |
| South West  | leadership.SW@leadershipacademy.nhs.uk  |

**Version Control**

Orientation Guidance Document and FAQ’s combined and refreshed.

V1 Updated 9th December 2020 by BW and NY

V2 Updated 3rd June 2021 by TC and KB

V3 Updated 10th June 2022 by EW and RN