Healthcare New Employee Orientation Checklist

Onboarding & Training

EMPLOYEE NAME	START DATE	DEPARTMENT	POSITION	LINE MANAGER
	____ / ____ / _____			

PRE-EMPLOYMENT

- [ ] Employment contract signed
- [ ] Identity verification completed
- [ ] Professional registration verified
  If applicable — nursing, medical, allied health
- [ ] Criminal background check cleared
- [ ] Occupational health clearance
- [ ] Immunisation status confirmed
- [ ] Emergency contact form completed
- [ ] Uniform and ID badge issued

DAY 1 ORIENTATION

- [ ] Welcome and facility tour
- [ ] Department introduced to team
- [ ] Emergency exits and assembly points
- [ ] Fire safety equipment locations
- [ ] Key contacts and escalation routes
- [ ] Staff amenities and break areas
- [ ] Payroll and benefits orientation
- [ ] Employee handbook acknowledged

MANDATORY TRAINING

- [ ] Fire safety training
- [ ] Manual handling training
- [ ] Infection prevention and control
- [ ] Basic life support / resuscitation
- [ ] Safeguarding (adults and children)
- [ ] Data protection and confidentiality
- [ ] Health and safety awareness
- [ ] Equality and diversity

IT SYSTEMS & ACCESS

- [ ] Network login credentials provided
- [ ] Clinical system access granted
  EMR/PAS as appropriate to role
- [ ] Clinical system training completed
- [ ] Email account activated
- [ ] Information security training completed
- [ ] Smartcard or digital certificate issued
  If applicable

DEPARTMENT-SPECIFIC ORIENTATION

- [ ] Department policies and procedures reviewed
- [ ] Specific equipment training
- [ ] Department emergency procedures
- [ ] Shift patterns and rota explained
- [ ] Key clinical protocols for this area
- [ ] Supervision arrangements agreed

CLINICAL COMPETENCIES

- [ ] Clinical observations and escalation
  If clinical role
- [ ] Medication administration assessed
  If applicable
- [ ] Aseptic technique competency
  If applicable
- [ ] Specimen collection procedures
  If applicable
- [ ] Patient assessment skills
  If applicable
- [ ] Documentation standards demonstrated

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SIGN-OFF

Areas requiring additional support

Probation review date

Employee signature

Line manager signature

Notes

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