



Kaia Induction Record – Service Manager

Once completed this form is attached to the completed work area orientation form and forwarded to HR.

PART 1 – Employee details

Induction date		Start date	
Workplace address			
Employee name			
Position			
Program/Department			
Supervisor name			
Position			

PART 2 – Information to be provided within the first week

In addition to that specified on the work area orientation form

(Note: double click to check the appropriate box)

Information to be provided	Completed	NA ¹
1. Provide access to KAIA Program Practice Manual - Foster Care or KAIA Program Practice Manual - Residential Care Services .	<input type="checkbox"/>	<input type="checkbox"/>
2. Opportunity to read KAIA Program Practice Manual - Foster Care or KAIA Program Practice Manual - Residential Care Services .	<input type="checkbox"/>	<input type="checkbox"/>
3. Explain relevance to the role.	<input type="checkbox"/>	<input type="checkbox"/>
4. Ensure attendance at Child Safety induction & discuss training.	<input type="checkbox"/>	<input type="checkbox"/>
5. Show the TRACCS database and explain use and relevance to the KPPM.	<input type="checkbox"/>	<input type="checkbox"/>
6. Read TRACCS database user manual.	<input type="checkbox"/>	<input type="checkbox"/>
7. Arrange access to the TRACCS database, computer access & HRSS (request to IT).	<input type="checkbox"/>	<input type="checkbox"/>
8. Explain and demonstrate administrative processes (scanning, photocopying, filing, confidentiality and privacy related to documentation, record keeping – provide meeting book). Reviewing documents ensuring currency.	<input type="checkbox"/>	<input type="checkbox"/>
9. Briefly outline caseloads for existing coordinator(s).	<input type="checkbox"/>	<input type="checkbox"/>
10. Introduce Service Manager to stakeholders via email.	<input type="checkbox"/>	<input type="checkbox"/>
11. Show location of electronic and hardcopy carer/child files. Demonstrate documentation required for program and young person.	<input type="checkbox"/>	<input type="checkbox"/>
12. Provide hardcopy of residential house details (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>

¹ NA = Not applicable

Information to be provided	Completed	NA ¹
13. Explain referral process (documents) and matching requirements (tools).	<input type="checkbox"/>	<input type="checkbox"/>
14. Explain history of each young person.	<input type="checkbox"/>	<input type="checkbox"/>
15. Explain transition process (documents).	<input type="checkbox"/>	<input type="checkbox"/>
16. Explain file note process.	<input type="checkbox"/>	<input type="checkbox"/>
17. Team meeting process. Send calendar invite for team meetings.	<input type="checkbox"/>	<input type="checkbox"/>
18. Discuss recent important events, especially actions that may need immediate follow up.	<input type="checkbox"/>	<input type="checkbox"/>
19. Organise formal introductions - set home visit/meeting dates/times with relevant coordinators.	<input type="checkbox"/>	<input type="checkbox"/>
20. Provide dates for any other planned meetings (e.g. family group meetings, placement review meetings/case plan reviews, stakeholder meetings).	<input type="checkbox"/>	<input type="checkbox"/>
21. Visit residential houses. (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
22. Organise work schedule.	<input type="checkbox"/>	<input type="checkbox"/>
23. Residential office set up (as outlined in the KAIA Program Practice Manual - Residential Care Services) (if applicable) <ul style="list-style-type: none"> • Young persons' files • Medication requirements • Dietary record requirements (if applicable) • Individual young persons' monthly plans • Staff communication • Computer access • Individual young persons' daily updates • Maintenance requests • Hazard reports • After-hours response (On call) • Personal care plans such as PEG feeding (if applicable) • Medical Support Services and GP access • DSE handover report – Kaia residence • Young People About Me • Personal items register form – Kaia • Children's/ Young Persons' welcome pack • House meetings (team and staff) • Community Visitor 	<input type="checkbox"/>	<input type="checkbox"/>
24. Outline FSGA accounts procedures as relevant to KP. Include internal use of house and KP cards/vouchers.	<input type="checkbox"/>	<input type="checkbox"/>
25. Arrange sharing of team's contact lists and calendars.	<input type="checkbox"/>	<input type="checkbox"/>
26. Explain how to book an FSGA vehicle, complete vehicle log book and petrol card.	<input type="checkbox"/>	<input type="checkbox"/>
27. Explain how to book a meeting room.	<input type="checkbox"/>	<input type="checkbox"/>
28. Define team members' roles (i.e. recruitment/administration facilitators, coordinators, service manager, operations manager, senior coordinator).	<input type="checkbox"/>	<input type="checkbox"/>
29. Show Department of Communities, Child Safety and Disability Services – Child Safety Services website.	<input type="checkbox"/>	<input type="checkbox"/>
30. Child Safety Practice Manual and other relevant forms such as VC	<input type="checkbox"/>	<input type="checkbox"/>

Information to be provided	Completed	NA ¹
Blue Cards/ and authorisations, foster carer assessment forms.		
31. Explain foster carer assessment/re-approval process. (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
32. Demonstrate electronic FSGA filing system.	<input type="checkbox"/>	<input type="checkbox"/>
33. Provide list of FSGA office contacts.	<input type="checkbox"/>	<input type="checkbox"/>
34. Review controlled documents/policies.	<input type="checkbox"/>	<input type="checkbox"/>
35. Explain continuous improvement notification procedure.	<input type="checkbox"/>	<input type="checkbox"/>
36. Explain incident report writing process.	<input type="checkbox"/>	<input type="checkbox"/>
37. Review FSGA Staffing Solutions support.	<input type="checkbox"/>	<input type="checkbox"/>
38. Review the process for requesting direct service employees.	<input type="checkbox"/>	<input type="checkbox"/>
39. Review Railway Street courier/postage service.	<input type="checkbox"/>	<input type="checkbox"/>
40. Schedule monthly supervision with Operations Manager. Explain team meeting processes i.e. agenda, minutes.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
41. Schedule monthly supervision with staff under line management	<input type="checkbox"/>	<input type="checkbox"/>
42. Show and explain HRSS (explain leave application, updating personal information, location of current documents etc.).	<input type="checkbox"/>	<input type="checkbox"/>
43. Review on-call procedures and FSGA KP on-call folders	<input type="checkbox"/>	<input type="checkbox"/>
44. Discuss monthly report process and responsibilities (show and explain monthly report template)	<input type="checkbox"/>	<input type="checkbox"/>
45. Other:	46. <input type="checkbox"/>	47. <input type="checkbox"/>
48. Other:	49. <input type="checkbox"/>	50. <input type="checkbox"/>
51. Other:	52. <input type="checkbox"/>	53. <input type="checkbox"/>
54. Other:	55. <input type="checkbox"/>	56. <input type="checkbox"/>
57. Other:	58. <input type="checkbox"/>	59. <input type="checkbox"/>
60. Other:	61. <input type="checkbox"/>	62. <input type="checkbox"/>

New employee's name: _____

Signature: _____ Date: __/__/__

Line Manager's name: _____

Signature: _____ Date: __/__/__