

Recruitment and Selection

Human Resources Policy

Effective Date: March 2010

TABLE OF CONTENTS

1	PURPOSE	4
2	APPLICATION.....	4
3	GUIDELINES.....	4
4	DELEGATION	4
5	REFERENCES.....	4
6	SUPERSEDES.....	5
7	POLICY	6
8	APPLYING THE POLICY	6
PART I – WORKFORCE PLANNING AND JOB DESIGN		6
9	WORKFORCE PLANNING AND JOB DESIGN	6
9.1	Role descriptions.....	7
9.2	Review and maintenance of role descriptions	7
9.3	Role evaluation methodology.....	8
PART II – FILLING VACANCIES		9
10	REPLACEMENT OF EXISTING STAFF	9
11	TIMING OF THE RECRUITMENT PROCESS	9
12	MANDATORY OBLIGATIONS FOR FILLING VACANCIES.....	9
12.1	Suitability of Queensland Health Surplus Employees.....	9
12.2	Suitability assessment – surplus staff and priority placement employees.....	10
13	DIRECT APPOINTMENTS.....	10
13.1	Direct appointment to base grade positions.....	10
13.2	Direct appointment to roles at a higher level.....	10
13.3	Direct appointment of a temporary employee to tenured status at level	11
13.4	Reporting requirements for direct appointments.....	12
14	OPTIONS FOR FILLING VACANCIES	12
14.1	Transfer at Level	12
14.2	Secondments	13
14.3	Staff interchange.....	13
PART III – ADVERTISING		13
15	ADVERTISING	13
15.1	Advertising vacancies	13
15.1.1	Expression of interest (EOI).....	13

15.1.2	Temporary vacancies – base grade.....	14
15.1.3	Temporary vacancies – non base grade.....	14
15.1.4	Permanent vacancies – base grade.....	15
15.1.5	Vacancy advertising – general (Permanent non base grade vacancies).....	16
15.1.6	Vacancy Advertising – targeted	16
15.1.7	Vacancy Advertising – specified	17
15.2	Exemptions from advertising.....	17
15.3	Recurring Vacancies	18
15.4	Continuous applicant pools	19
PART IV – PROCESS APPLICATIONS		19
16	MERIT	19
17	PROCESS APPLICATIONS.....	20
17.1	Assessment of applicants	20
17.2	Selection panel.....	20
17.3	Role of chair	21
17.4	Prior knowledge of the applicant.....	21
17.5	Potential conflict of interest	21
17.6	Reasonable adjustment	22
PART V – SELECTION.....		22
18	SELECTION STRATEGY.....	22
18.1	Selection strategy.....	22
18.2	Selection techniques	22
18.3	Assessment process	23
18.4	Qualitative or quantitative methods of assessment	23
18.4.1	Qualitative method	23
18.4.2	Quantitative method	23
18.5	Short listing	24
18.6	Moderation	24
18.7	Close assessment.....	24
19	REFEREE CHECKING	24
19.1	Use of referee reports	24
19.2	Identifying referees.....	25
19.3	Conducting referee checks	26
19.4	Obligations of referees	26
20	MEDICAL PRACTITIONER INTERNET SEARCH AND REFEREE CHECKING	26
20.1	Application.....	26
20.2	Internet Search – All medical officers	27
20.3	Referee checking for medical practitioners.....	27
20.4	Methods for referee checks for medical practitioners	28
20.5	Professional registration and credential checking.....	28
21	SELECTION RECOMMENDATION	28
Recruitment and Selection		

21.1	Selection report.....	28
21.2	Paypoint recommendation (external applicants only).....	29
21.3	Order of merit.....	29
PART VI - PRE-APPOINTMENT		30
22	PRE-APPOINTMENT	30
22.1	Delegate responsibilities.....	30
22.2	Professional registration and credential checks.....	30
22.3	Voluntary early retirement (VER) status checks.....	31
22.4	Citizenship/visa requirements checks.....	31
22.5	Proof of identity.....	31
22.6	Criminal history checks.....	32
22.7	Pre-employment structured clinical interview (PESCI) for international medical graduates (IMGs)	32
22.8	Curriculum Vitae (CV) / Resume.....	32
PART VII – APPOINTMENT		33
23	APPOINTMENT	33
23.1	Verbal appointment notification.....	33
23.2	Other notifications.....	33
23.3	Appointment letters.....	34
23.4	Acceptance of appointment.....	34
23.5	Timing of offer.....	34
23.6	Work location.....	35
PART VIII – POST APPOINTMENT		35
24	POST APPOINTMENT.....	35
24.1	Post selection feedback.....	35
24.2	Documentation and confidentiality.....	35
25	DEFINITIONS.....	35
26	HISTORY	39

ATTACHMENT ONE Recruitment and Selection Process

1 PURPOSE

The purpose of this policy is to specify the requirements for recruitment and selection for Queensland Health vacancies.

This policy is consistent with the Public Service Commission (PSC) directive for recruitment and selection and has been developed to assist in its application in Queensland Health.

2 APPLICATION

This policy applies to all Queensland Health employees, except casual employees and roles at senior officer (SO), district senior officer (DSO), senior executive service (SES), and health senior executive (HES) levels.

The principles of this policy apply to all selection activities undertaken, even if the selection activity is not mandated by this policy or relevant legislation.

3 GUIDELINES

People and Culture Corporate has developed a recruitment and selection guide to assist with the implementation of this policy. The guide is available on the People and Culture Corporate website.

4 DELEGATION

The 'delegate' for recruitment and selection appointment activities is as listed in the Human Resource delegations manual as amended from time to time.

5 REFERENCES

- *Information Privacy Act 2009*
- *Right to Information Act 2009*
- *Public Service Act 2008*
- *Commission for Children and Young People and Child Guardian Act 2000*
- *Industrial Relations Act 1999*
- *Aged Care Act 1997 (Cth)*
- *Disability Discrimination Act 1992 (Cth)*
- *Anti-Discrimination Act 1991*
- *Health Services Act 1991*
- *Racial Discrimination Act 1991 (Cth)*
- *Human Rights and Equal Opportunity Commission Act 1986 (Cth)*
- *Sex Discrimination Act 1984 (Cth)*
- Nurses and Midwives (Queensland Health) Certified Agreement (EB7) 2009
- Queensland Public Health Sector Certified Agreement (No. 7) 2008 (EB7)
- Queensland Health Building, Engineering and Maintenance Services Certified Agreement (No. 4) 2008
- Medical Officers' (Queensland Health) Certified Agreement (No. 2) 2009
- Queensland Government Standing Offer Arrangement (SOA) No. 200

Recruitment and Selection

- Directive 4/10 – Placement of employees following machinery-of-government changes or service delivery reform
- Directive 01/10 – Recruitment and Selection
- Directive 12/09 – Employment Arrangements following workplace change
- Directive 11/05 – Voluntary Early Retirement (VER)
- Health Service Directive 2/98 – Transfer at Level
- Queensland Health Code of Conduct 2006
- Senior Executive Service Information Sheet – Recruitment Processes
- Health Executive Services Terms and Conditions of Employment Guide
- Queensland Health Recruitment and Selection Guide
- Nursing and Midwifery Classification Structure HR Policy B7
- Roles and Responsibilities - Medical Superintendents employed under the District Health Services - Senior Medical Officers' and Resident Medical Officers Award - State 2003 HR Policy B8
- Health Professionals Registration - Medical Officers, Nurses and other Health Professionals HR Policy B14
- Appointments - Permanent &/or Temporary - Commonwealth &/or State Funded Programs HR Policy B24
- Job Evaluation HR Policy B29
- Appointment of Permanent Relief Staff to Non-Relieving Positions - Administrative Stream HR Policy B31
- Exemption from Open Merit Positions Reclassified from AO2-AO3 HR Policy B32
- In-house Relief Process For Administrative Staff at AO3 Positions and Above HR Policy B33
- Surplus Employees HR Policy B36
- Criminal History Checking HR Policy B40
- Transfers in Queensland Health HR Policy B41
- Secondment HR Policy B42
- Relinquishment of Role HR Policy B43
- Identified (Lawful Discrimination) Positions HR Policy B58
- Determining Salary Levels Upon Appointment HR Policy C59
- Citizenship, Residency and Visa Requirements for Appointment in Queensland Health HR Policy B55
- Child Safety - Health Professionals Capability Requirements and Reporting Responsibilities HR Policy E7
- Separation of Employment HR Policy H1
- Indemnity for Queensland Health's Medical Practitioners HR Policy I2
- Indemnity for Employees and Other Persons HR Policy I3
- Managing Organisational Change HR Policy

6 SUPERSEDES

- IRM 1.13-1 Recruitment and Selection - Policy Framework
- IRM 1.13-2 Recruitment and Selection - Merit
- IRM 1.13-3 Recruitment and Selection - Job Descriptions
- IRM 1.13-4 Recruitment and Selection - Advertising Vacancies
- IRM 1.13-5 Recruitment and Selection - Selection Methodology
- IRM 1.13-6 Recruitment and Selection - Appointment Processes
- IRM 1.13-7 Recruitment to Base-Grade Level Positions
- IRM 1.13-8 Recruitment and Selection - Time to Fill

- IRM 1.13-13 Streamlined Expression of Interest Process for Engagements Or Appointments up to 12 months
- Circular ER 11/04 Recruitment and Selection – Advertising of Positions

7 POLICY

This policy sets out the minimum requirements and standard processes to recruit the best people for the job, in a timely, open and transparent manner. It provides direction in recruitment and selection processes to achieve greater flexibility in recruitment options to attract a diverse range of people. It encourages the use and review of a range of selection techniques when recruiting potential employees. This policy also ensures that actions are based on ethical decision making and in accordance with the relevant legislation.

8 APPLYING THE POLICY

The policy applies to the following categories of employment:

- permanent (includes full-time or part-time)
- temporary (includes full-time or part-time)
- apprenticeships and traineeships
- clinical appointments (including visiting medical officers).

The recruitment and selection principles in this policy apply to the filling of roles at SO, DSO level and above. The Executive Workforce Policy and Contracts Unit, People and Culture Corporate is to be contacted to discuss additional requirements for senior roles.

Employment of casual staff is not subject to the provisions of this policy. However, the principles of this policy are to be applied to ensure sound recruitment and selection practices. It is the responsibility of all recruiters to ensure that quality applicants are appointed.

PART I – WORKFORCE PLANNING AND JOB DESIGN

9 WORKFORCE PLANNING AND JOB DESIGN

Workforce planning and job design relates to the investigation of role activities and requirements, and is fundamental to the establishment of appropriate organisational structures and accountabilities.

When a position becomes vacant, the recruiter needs to consider whether:

- the role is still required
- there is ongoing funding available to continue with the filling of the vacancy
- the role needs to be reviewed and updated to meet current/emerging business requirements.

One of the key elements to ongoing workforce planning and job design is the review and updating of role descriptions.

9.1 Role descriptions

A role description used for recruitment and selection purposes need not contain the same level of detail as a role description used for role analysis, role evaluation or performance planning purposes.

A role description for the purpose of recruitment and selection must be applicant friendly and outline, clearly and simply:

- the current context in which the role exists
- the key duties of the role
- the key attributes against which applicants will be assessed. The key attributes are to include the abilities, aptitude, skills, knowledge, experience and **personal qualities** required to perform the role.

The role description is to also indicate any potential locations, or range of locations, and the potential basis for employment (eg part-time or full-time).

It is a requirement of the Recruitment and Selection Directive that the key attributes must reflect the capabilities of the National Health Service (NHS) Leadership Qualities Framework, which is the approved leadership framework for Queensland Health. Please refer to the Role Description Instructions for further details on this Framework.

Organisational fit is a dimension of merit (i.e. the skills, personal qualities etc. necessary for the appointee to operate effectively in the particular organisational environment) and not separate. Organisational fit, or particular personal qualities are to be articulated in the key attributes to ensure merit is transparently and appropriately assessed.

The role description is to be in the approved Queensland Health Role Description Template and is to meet the mandatory requirements in the Instructions for Developing Role Descriptions.

Applicants must be informed that newly appointed public service employees are obliged to provide the Director-General, within one month of commencing, a disclosure of employment as a lobbyist in the previous two years, as per the *Disclosure of Previous Employment as a Lobbyist Policy*.

When the role is an identified position, refer to Identified (Lawful Discrimination) Positions HR Policy.

For more information on role descriptions refer to the Queensland Health Role Description Templates, and Instructions for Developing Role Descriptions located on the People and Culture Corporate website.

9.2 Review and maintenance of role descriptions

To ensure that a role description accurately reflects the role within the organisational structure, role descriptions are to be reviewed:

- every two years

- when a vacancy occurs in that position (prior to advertising)
- when organisational change significantly impacts on the role
- to reflect the goals of the Queensland Health Strategic Plan.

Organisational change may affect the title or designation, key accountabilities, key attributes and or the classification level of a position. In each case the role description needs to be revised in accordance with organisational and unit objectives. When organisational change is likely to affect an employee, there is an obligation on Queensland Health managers to consult with the employee and/or relevant union(s). For more information, refer Managing Organisational Change HR Policy, and Queensland Health Managing Organisational Change - 'How To' Guide which places an obligation on Queensland Health to consult with the employee(s).

9.3 Role evaluation methodology

All classification streams in Queensland Health are supported by a job evaluation methodology specified by the relevant Award or Industrial Agreement. The following table summarises the methodologies used by each major classification stream.

Medical	General medical position classification definitions are contained within the relevant Medical Officers' Awards and the Medical Officers' (Queensland Health) Certified Agreement (No.1) 2005.
Nursing	The Nursing and Midwifery Classification Structure HR Policy B7 sets out the agreed generic level statements for nursing officers, grades one to 12 and the process to support the evaluation and re-evaluation of nursing and midwifery positions.
Building and engineering	Classification levels are determined by competency levels contained under the relevant Queensland Health Building, Engineering and Maintenance Services Certified Agreement (No.3) 2006.
Operational	The Operational Stream Employees (Queensland Health) Certified Agreement 2006, and Operational Services Manual, identifies the various methods to be used for supervisory, management and other specialist roles in the operational stream. Generic level statements for most operational positions are contained within the Operational Services Manual. Newly created role descriptions below OO5 that are not defined in the Operational Services Manual determination C is to be submitted via the Public Hospitals Oversight Committee (PHOC) Secretariat for approval by PHOC.
Health practitioner	Health practitioner classification levels one to eight are evaluated through work level statements contained within the Health Practitioners (Queensland Health) Certified Agreement (No.1) 2007.
All other AO, OO, TO and PO roles not identified above	Job Evaluation Management System (JEMS) is the standard generic role evaluation methodology used in the Queensland Government. For more information on the JEMS process, refer to Job Evaluation Positions Covered by the Classification and Remuneration System HR Policy.

PART II – FILLING VACANCIES

10 REPLACEMENT OF EXISTING STAFF

The *Queensland Public Health Sector Certified Agreement (No. 7) 2008*, requires Queensland Health to replace permanent employees who leave due to retirement, resignation, termination, transfer or promotion. Having regard to workload management and workforce planning issues, a replacement strategy is to be commenced as follows:

Base grade staff – commence the replacement process within three days of the position being vacated (permanently) or notification of the vacancy. The recruitment process is to be completed within one month.

Other than base grade staff – commence the replacement process within 14 days of the position being vacated (permanently) or notification of the vacancy. The recruitment process is to take no longer than three months.

11 TIMING OF THE RECRUITMENT PROCESS

Selection decisions and notification of selection outcomes to applicants must be expedited in the interests of candidate care.

To expedite selection decisions it is recommended that:

- panel member constitution and availability be confirmed prior to lodging a request to fill a vacancy form, and;
- timeframes for short listing and finalising a selection process be developed prior to advertising a vacancy.

12 MANDATORY OBLIGATIONS FOR FILLING VACANCIES

With the implementation of PSC Directives 12/09 and 4/10, there are now a number of stages for assessing surplus employees and/or priority placement employees before certain vacancies can be advertised.

Refer to Directives 12/09 and 4/10 for further information.

12.1 Suitability of Queensland Health Surplus Employees

Prior to filling a temporary vacancy for greater than 6 months, or a permanent vacancy Queensland Health is to ensure employees formally registered as Queensland Health surplus employees, and priority placement employees, are assessed under suitability guidelines to determine whether they are suitable for deployment or redeployment.

Exemption from Open Merit for Positions Reclassified from AO2 to AO3 Policy B32 does not require surplus officers to be considered for appointment.

Surplus checks are not required when filling a vacancy through transfer at level. See section 7.4.4 of HR Policy B41 'Transfers in Queensland Health'.

Other levels of assessment will need to be undertaken for public service award vacancies identified under Directive 4/10. Please refer to Human Resources Policy B36 Surplus Employees and Priority Placement Employees for further information.

12.2 Suitability assessment – surplus staff and priority placement employees

Assessing suitability for surplus employees and priority placement employees, although not as rigorous as a merit selection process, requires an assessment against the key attributes to be undertaken. Documentation of the assessment and recommendation to appoint or not appoint the surplus employees is to be provided to the delegate.

Please refer to the Public Service Commission Guideline for Suitability Assessment, effective 23 October 2009 for further details for assessing the suitability of registered employees and priority placement employees.

Contact QHSSP Statewide Recruitment Services for assistance with this process.

13 DIRECT APPOINTMENTS

When the option of direct appointment is being considered, managers or supervisors are to consult with their local HR managers and QHSSP Statewide Recruitment Services before proceeding. Reference is to be made to Directive 01/10 – Recruitment and Selection which stipulates the mandatory requirements and criteria for direct appointments.

Applications for all categories of direct appointments are to be considered on a case-by-case basis. Direct appointment is at the **discretion** of the Director-General (or delegate).

13.1 Direct appointment to base grade positions

The Director-General (or delegate) may appoint a temporary or casual employee, apprentice or trainee to a permanent base grade position if the following requirements are met:

- The applicant is to have been appointed on a temporary or casual basis via a merit process (i.e. minimum two selection techniques, surplus check undertaken).
- The employee is to have been assessed as having demonstrated performance of a sufficiently high standard that advertising the role would be unlikely to yield a superior candidate.
- Ongoing budget provision is available.

The date of appointment under this provision is to be the date of approval of the appointment by the delegate.

13.2 Direct appointment to roles at a higher level

The Director-General (or delegate) may, without advertising, appoint an employee to a role at a higher classification level where:

- the occupant has been seconded to, or temporarily employed in, the role, or;
- the role has been reclassified.

In both of these cases, the employee:

- must have had undertaken the role in question for a total of not less than one of the preceding two years
- must be assessed as having demonstrated performance of a sufficiently high standard that advertising the role would be unlikely to yield a superior candidate.

In relation to direct appointment following secondment to, or temporary employment in a role at a higher classification, the temporary role must have been advertised according to the provisions of sections 7.3 or 7.4 of Directive 1/10 to enable other applicants to be considered. The requirement for the occupant of the role to have demonstrated their merit in a competitive process applies irrespective of whether the role was originally filled temporarily for no more than 12 months.

Surplus checks are not required for direct appointments to roles at a higher level.

In relation to direct appointment to roles which have been reclassified:

- The employee is to be the substantive occupant, and;
- Reclassification is not to be higher than one classification level above the employee's substantive classification level, and;
- An employee who has been appointed to a higher classification level in accordance with section 7.15 (b) (ii) of Directive 1/10, or similar provision in an earlier directive relating to recruitment and selection, is not eligible for further appointment in the event that the role in question is again evaluated at a higher classification level.

13.3 Direct appointment of a temporary employee to tenured status at level

The Director-General (or delegate) may directly appoint a temporary employee to tenured status at level in the following circumstances:

- The temporary role must have been advertised according to the provisions of sections 7.3 or 7.4 of Directive 1/10 to enable other suitable applicants to be considered. The requirement for the temporary employee or temporary general employee to have demonstrated their merit in a competitive process applies irrespective of whether the role was originally filled temporarily for no more than 12 months, and;
- The temporary employee must have undertaken the duties of the role for a continuous period of not less than one year, and;
- The temporary employee must be assessed as having demonstrated performance of a sufficiently high standard that advertising the role would be unlikely to yield a superior candidate, and;
- The suitability of Queensland Health's registered and unregistered deployees has first been considered in accordance with provisions contained in the directive relating to priority placement.

In addition to the discretionary option for Direct Appointment of temporary employees to tenured status, please note the provisions of *HR Policy B52 – Conversion of Temporary Employees to Permanent Status*, which applies to full-time and part-time temporary employees with a minimum of three years service and who meet certain criteria. Please refer to HR Policy B52 to determine eligibility.

13.4 Reporting requirements for direct appointments

Documentation relating to appointments is to be kept for a minimum of 12 months for audit and reporting purposes. Documentation for SES/DES/HES and executive contract employment is kept indefinitely.

In the case of appointments made following job reclassification, the appointment is to be identified in the Queensland Health HR Payroll system. If the position is further upgraded, no further direct appointments can be made for this employee to this position. An open merit selection process is to be undertaken.

14 OPTIONS FOR FILLING VACANCIES

Other recruitment options are available to reduce timelines, costs and improve flexibility prior to advertising a vacancy. These options include:

14.1 Transfer at Level

Transfer at level may be considered to fill a permanent vacancy. The delegate may use a transfer at level as an alternative recruitment methodology when reasons exist which make it more appropriate to appoint through transfer.

Transfer at level can be considered prior to advertising or after the vacancy has been advertised, e.g. when considering the pool of applicants.

Transfer at level is at management discretion and may be considered on a case-by-case basis.

Transfer at level can proceed even if there are registered surplus employees. Refer to Transfers in Queensland Health HR Policy B41.

Existing permanent employees can be considered for transfer at level if assessed as being suitable for the position. This includes assessment on the basis of compassionate grounds, excluding deployment based on medical grounds, for district health service employees under the Health Service Directive 2/98 – Transfer at Level.

Transfers at level are assessed on the basis of 'suitability' in the same way that surplus or priority placement employees are considered. A merit process is only required when there is more than one transfer at level application. Please refer to section 12.2 – Suitability assessment for further information.

A permanent employee from other Queensland Government departments or agencies can also be considered for transfer at level. For more information refer Transfers in Queensland Health HR Policy B41.

14.2 Secondments

Secondments are the temporary engagement of a permanent employee, either at their substantive classification level or at a higher classification level. Secondments are a developmental opportunity for an employee and for periods of up to 12 months and may or may not be subject to a merit process. Secondments can be:

- temporary engagement of a permanent employee within Queensland Health
- temporary engagement of a permanent employee to Queensland Health from another Queensland Government department or public agency, or;
- temporary engagement of a permanent employee of Queensland Health to another Queensland Government department or public agency.

Employees who choose to take up secondments for more than 12 months may be required to relinquish their role. For more information refer Relinquishment of Role HR Policy B43, and Secondment HR Policy B42.

14.3 Staff interchange

Formal interchange arrangements exist between Queensland Government departments/agencies and Federal Government/local authorities when employees in one sector may be engaged on temporary assignments in another sector. This promotes the sharing of knowledge and business practices and processes across the public sectors and encourages the professional and personal development of employees. Refer to section 184 of the *Public Service Act 2008*

PART III – ADVERTISING

15 ADVERTISING

The Directive 1/10 provides for a range of advertising requirements under the categories of:

- Vacancy Advertising General
- Vacancy Advertising Targeted
- Vacancy Advertising Specified
- Exemptions from Advertising.

15.1 Advertising vacancies

Advertising requirements differ according to the nature of the vacancy, i.e. permanent or temporary / base grade or non base grade.

15.1.1 Expression of interest (EOI)

An expression of interest (EOI) is a method for sourcing applicants for temporarily filling vacant positions for short term needs/projects (up to 12 months). A merit based process is still required, with the minimum use of two selection techniques. EOIs provide a faster method of sourcing applicants as they are usually conducted within Queensland Health and are not subject to minimum advertising timeframes or closing dates. EOIs can also be sought across Queensland Government.

On occasion, applications from external applicants (i.e. external to Queensland Government, Queensland Health, or external to the immediate work area) may be received in response to an expression of interest that has been advertised internally. Consideration of these external applications is at the panel's discretion.

The outcome of conducting an EOI may result in:

- temporary appointment
- higher duties arrangement
- secondment.

Recruiting managers are to be aware that the EOI process does not meet the minimum advertising requirements to provide for:

- direct appointment of a temporary employee to permanent status in a non base grade position
- extension of engagement in a non base grade vacancy beyond a 12 month period.

In-house Relief Process for Administrative Staff at Classification AO3 and Above HR Policy has been developed to provide backfill of temporarily vacant positions due to planned leave or secondment of the incumbent. Recruiting managers are to be aware of and comply with the requirements of this policy prior to advertising EOI for administration staff.

15.1.2 Temporary vacancies – base grade

Temporary base grade vacancies, irrespective of the duration of the temporary engagement, are not required to be advertised.

- The method of filling temporary vacancies is at management discretion and can be filled in accordance with operational convenience.
- Advertising (either formally or informally, i.e. EOI) is optional.
- If a number of employees exist that may be suitable for temporary engagement, then an EOI process may be conducted.
- An EOI may be advertised within a work area/district/ division. This provides for existing employees to become aware of the opportunity and express their interest. An EOI process ensures equity in access for all employees.
- The delegate is required to ensure that temporary employees are appropriate for appointment and can fulfil the requirements of the role.
- Mandatory requirements of the role, (i.e. professional registration) are to be met.

15.1.3 Temporary vacancies – non base grade

Temporary non-base grade vacancies for periods not exceeding 12 months are not required to be advertised.

- The method of filling temporary vacancies is at management discretion and can be filled in accordance with operational convenience.
- Advertising (either formally or informally, i.e. EOI) is optional.

- If a number of employees exist that may be suitable for temporary engagement, then an EOI process may be conducted.
- An EOI may be advertised within a work area/district/division. This provides for existing employees to become aware of the opportunity and express their interest. An EOI process ensures equity in access for all employees.
- The delegate is required to ensure that temporary employees are appropriate for appointment and can fulfil the requirements of the role.
- Mandatory requirements of the role (i.e. professional registration) are to be met.

For **periods of more than 12 months** (non base grade):

- Consecutive temporary appointments are not to exceed 12 months unless the role has been externally advertised.

Temporary non base grade vacancies of more than 12 months are to be advertised in accordance with the same requirements for permanent non base grade vacancies (refer section 15.1.5).

The In-House Relief Process for Administrative Staff at AO3 Positions and Above HR Policy describes the process to be followed in relation to in-house relief opportunities for **administrative staff** in temporary vacancies at AO3 and above levels. The process is designed to promote fair and equitable access to higher duty opportunities.

15.1.4 Permanent vacancies – base grade

External advertising for base-grade positions is not required when there are existing temporary and casual employees who can fill these roles. This means existing employees are not disadvantaged by extending the pool of applicants when a permanent position arises. If there is more than one applicant for the position then a merit selection process is to be undertaken.

The following procedure applies for the recruitment to vacant base grade permanent roles:

- The recruiter is to ensure that existing registered suitable surplus employees and priority placement employees are considered for deployment or redeployment through the active matching process.
- If no suitable surplus employees are identified, the recruiter can invite applicants from temporary or casual pools to apply for permanent vacancies.
- External advertising of permanent vacancies is not to be used to penalise the poor performance of temporary and casual staff. Performance is to be monitored and problems addressed as soon as they arise.
- An assessment is to be undertaken to ascertain the suitability of employees for appointment. The assessment requires the use of a minimum of two selection techniques, is to be based on merit, and is to include referee checking.
- Only if there are no employees assessed as being suitable for appointment, can the position be advertised more widely.
- Other sources for base grade recruitment can be through the Queensland Government SOA, which is only applicable to AO1 and AO2 base grade roles. (Refer Queensland Government Standing Offer Arrangement (SOA) No. 200).
- If external advertisement (outside Queensland Health) of base grade vacancies has occurred, appointments are to be notified in the Health Services Bulletin and/or Government Gazette as appropriate.

- It is recommended that a simplified curriculum vitae (CV)/resume and relevant selection technique(s) be used to assess merit and suitability for any vacant position.
- It is not a requirement that written responses to key attributes be used as a selection technique except for positions where written skills are a significant component of the role.
- For filling of operational stream base grade roles, the OO selection tools approved and issued by the Director-General are to be used.

15.1.5 Vacancy advertising – general (Permanent non base grade vacancies)

Subject to the provisions of section 7.4 and 7.5 of the Directive 1/10, all Queensland Health vacancies other than base grade, including senior officers and SES roles, are to be advertised (as a minimum) for no less than two calendar weeks, excluding public holidays and the Christmas/New Year closure period in the:

- Health Services Bulletin
- Smart jobs and careers Whole of Government website
- Queensland Health WorkForUs Intra and Internet Job Board.

Additionally, all clinical roles will be advertised on Seek.Com. Applicant pools can be supplemented by other means if not sufficient for the purpose of filling the vacancy.

Vacancy advertising is to include specific information identified in 7.3 (b) of the Directive 1/10, and is to stipulate the potential range of centres/locations at which a vacancy may arise, and if there is potential for the role to be offered in a part-time capacity or full time only. The vacancy advertising is also to identify similar roles provided the classification level, remuneration and merit criteria are the same as the original vacancy and role requirements are similar. This will provide for the capacity to appoint to similar/ identical vacancies, in multiple locations, and provide for flexible work options where these are deemed suitable.

When an advertising process is to potentially cover different locations and/or hours of work, the recruitment process is to request that applicants nominate preference locations and/or hours of work.

Vacancies are **not** to be routinely advertised in state and national print media, however each edition of the Saturday Courier Mail and the Weekend Australian is to include pointer advertising, directing job seekers to relevant web addresses.

Courier Mail and Weekend Australian advertising using standard Queensland Health templates can only be used for senior or difficult to fill vacancies, and only with the approval of the Deputy Director-General, Corporate Services.

Advertising using standard Queensland Health templates in local print media (e.g. regional newspapers) and/or professional journals can be approved at appointment delegate level.

15.1.6 Vacancy Advertising – targeted

Targeted advertising limits the invitation to apply for a vacancy to Queensland Health employees. Current Queensland Health employees include employees seconded from

other agencies as at the closing date of the vacancy, and employees of Queensland Health who are on secondment to other agencies. The invitation may also be extended to employees of other agencies or selected external candidates.

Targeted advertising is to be considered in circumstances where wider advertising of a role below senior officer level would be unlikely to yield a superior candidate, and would therefore not justify the expenditure of agency resources or applicant effort.

Approval to undertake targeted advertising must be sought from the HR Policy and Recruitment Team, People and Culture Corporate.

15.1.7 Vacancy Advertising – specified

Previously known as a ‘limited applicant pool’, or ‘closed merit process’, specified advertising is an invitation for specific employees or groups of employees to apply for particular vacancies. The aim of specified advertising is to:

- minimise potential displacement of existing permanent Queensland Health employees, or;
- to minimise, as far as possible, any disruption to the provision of Queensland Health’s services resulting from organisational change.

All proposals for specified advertising are to be agreed to by the Director-General (or delegate), and the relevant union(s). Promotions made under specified advertising which do not have the written agreement of the relevant industrial organisation of employees are invalid.

Requests are to be forwarded to the HR Policy and Recruitment Team, People and Culture Corporate for approval.

The written agreement of the relevant industrial organisation of employees for the use of specified advertising must be made available to staff who are invited to apply.

In relation to positions reclassified from AO2 – AO3, refer to Exemption from Open Merit for Positions Reclassified from AO2 - AO3 HR Policy B32 for more information.

15.2 Exemptions from advertising

Specific exemptions for Queensland Health vacancies may apply as follows:

Appointment of permanent relief staff to non-relieving positions	This is only applicable to the administrative stream.
Positions reclassified in the administrative stream	Exemptions apply to positions reclassified from AO2 - AO3 as per the relevant industrial instrument.
Clinical roles	In certain circumstances, where a case can be made that existing qualified clinical staff could potentially be displaced as a result of open advertisement, approval can be sought from People and Culture Corporate to exempt

	a clinical role from advertisement.
Non Clinical roles	Exemption may be sought from advertising requirements where advertising would demonstrably result in significant detriment to the achievement of service delivery outcomes, or unfair treatment of an employee. Approval can be sought from People and Culture Corporate.

Specific exemptions approved by the PSC:

Assistants in nursing, enrolled nurses and nursing officer grade 5 roles	Nurses (Queensland Public Hospital) Award 2004, and the Nurses (Queensland Public Health Sector) Award 2004.
Group HBEA12 and group HBEA10	Relevant Queensland Health Service Districts Building, Engineering and Maintenance Services Certified Agreement 2001, provided these roles maintain their relativity with the base-grade roles under wage group C12 of the Engineering Award - State 2002 and wage group BW1 (a) under the Building Trades Public Sector Award - State 2002 respectively.
OO3	Operational officer level 3 - trade equivalent non-supervisory.
Medical interns at salary level RMO1 (L1) intern	District Health Services Senior Medical Officers' and Resident Medical Officers' Award - State 2003.
AO1 - AO2 OO1 - OO2 TO1 - TO2 PO1 - PO2	All considered base grade.
HP base grade	The status of these positions is currently under review.

15.3 Recurring Vacancies

Positions sometimes become vacant after an appointment is made. Applications for roles of senior officer and below may be used to make appointments to subsequent vacancies where:

- the vacancy advertisement states that applications are to remain current for 12 months from the closing date. This enables selection processes to be treated as

potential recurring vacancies, which allows for identical and/or recurring roles to be filled from the original vacancy process if desired.

- The subsequent vacancy is identical to the original vacancy in terms of title, remuneration, classification level and role description.
- Similar vacancies may also be filled using the original vacancy process provided that the classification level, remuneration and key attributes are the same as the original vacancy and role requirements are similar. The vacancy advertisement must specify the similar roles to which the recurring vacancy may be applied.

If the existing pool is supplemented or a late application is accepted, the original panel is to be convened (or at least two of the original members – with one panel member still requiring to be external to the work area or external to the department) to assess the new applicants. By using the same selection techniques for the first applicant pool, the existing order of merit can be supplemented with additional meritorious applicants. In developing the original role description consider if the position might be offered on a full-time/part-time basis and the range of possible position locations. Recurring vacancies can only use the order of merit if they are covered by the original role description.

15.4 Continuous applicant pools

The directive provides for the use of a specific type of continuous applicant pool. These continuous applicant pools do not meet the business needs of Queensland Health and therefore do not apply to Queensland Health.

PART IV – PROCESS APPLICATIONS

16 MERIT

Section 27 of the *Public Service Act 2008* requires the selection for appointment of employees is to be based on merit alone (the merit principle). The principle of appointment on merit applies to public service and health service employees.

In applying the merit principle to a person, the following is to be taken into account:

- The extent to which the person has abilities, aptitude, skills, qualifications, knowledge, experience and personal qualities relevant to the carrying out of the duties in question.
- If relevant:
 - the way in which the person carried out any previous employment or occupational duties
 - the extent to the person has potential for development.

Organisational fit is a dimension of merit (i.e. the skills, personal qualities etc. necessary for the appointee to operate effectively in the particular organisational environment) and not separate. It is to be articulated in the key attributes and appropriately assessed.

The merit principle is not to apply to the appointment of a surplus employee. A suitability assessment is required (refer section 12.1).

17 PROCESS APPLICATIONS

17.1 Assessment of applicants

Assessment processes must:

- Be appropriate to the key attributes against which applicants will be assessed as outlined in the role description within the current context and duties of the role
- Consider the way applicants have carried out any previous employment or duties and, where relevant, the extent to which the applicants have potential for development
- Be robust and comprehensive in order to assess the merit of applicants as opposed to the performance of applicants in the assessment process
- Be procedurally fair and evidence-based; and
- Be consistent with the principles of employment equity and anti-discrimination.

Selection decisions and notification of selection outcomes to applicants must be expedited in the interests of applicant care.

Selection decisions must be able to be reviewed. At minimum, there must be a statement which is sufficient to enable a reviewer to understand the basis on which the panel has concluded that the recommended appointee has superior merit overall against the key attributes of the role in relation to shortlisted applicants. If there is an order of merit, there must be a comparative statement explaining the reason for the order of merit against the key attributes of the role. It is not sufficient for the comparative statement to consist of scores alone.

When the applicant is a deployee the suitability assessment provisions apply.

Applications received after the closing date of the vacancy may be considered.

17.2 Selection panel

The panel is to be comprised of at least two members. One member is to be external to the immediate work area¹ or external to the department. It is essential that all members have an understanding of the requirements of the role, and for at least one member to have detailed knowledge. In addition, the panel chairperson is to be trained in conducting recruitment and selection activities. When there are a number of applicants from any one particular equal employment opportunity (EEO) target group (i.e. people from a non-English speaking background, people with a disability, Aboriginal and Torres Strait Islander people and women), it is advisable that the panel contains at least one person from the relevant target group. For an identified position, one member of the panel is to possess the attribute that is the basis for the identified position.

In some situations, a specialist member of the panel is used for recruitment into specialised roles. The specialist member is not to be a current employee of

¹ Please seek clarification from your People and Culture unit if unsure about 'external to the immediate work area'
Recruitment and Selection

Queensland Health, and preferably not a former employee. The specialist member can be from another government department/agency/community group and is selected for their knowledge of the skills required for the role.

Panel members are generally to be at a higher classification level than the vacancy. However, a panel member may be at the same or lower classification level if they are required to contribute specialist knowledge of the role to the panel. In these circumstances, it is advised that the panel is comprised of at least three panel members, with two of the three panel members being at the higher classification level. In these circumstances, all panel members are required to participate equally in the entire selection process.

17.3 Role of chair

The panel chair is responsible for managing the selection process in a timely manner, and to lead the panel in an open and transparent way in accordance with policy and legislation. The chairperson is to be appointed by the delegate and is to be a Queensland Health employee.

17.4 Prior knowledge of the applicant

Prior knowledge of an applicant and their ability to demonstrate key attributes, including conflict of interest or work relationships, does not necessarily preclude a person from being a panel member. In this situation, due consideration is to be given to whether real or perceived bias would be of concern as a result of that person being part of the panel.

When one or more panel members have prior knowledge of applicants regarding their ability to meet the key attributes, panel members are to declare this to other panel members. The panel member with the first hand knowledge is to exercise discretion in the timing of the use of this information. It is generally recommended that this information be introduced at the completion of an interview process so that the remaining panel members are not unduly influenced.

The information is to be factual and able to be verified, so that its influence in the selection recommendation is transparent. The prior knowledge may be documented in a referee report and/or the selection report. Particular attention is to be paid to ensure that natural justice is afforded to the applicant, so that any adverse information is disclosed to the applicant for comment. Care should also be taken to avoid any real or perceived bias.

Prior or current professional knowledge does not prevent a supervisor from participating on a panel assessing a position within their control, or staff who work for them, when their knowledge of the applicant is gained through normal on-the-job activities.

17.5 Potential conflict of interest

A conflict of interest occurs when the relationship between individuals breaches professional boundaries and is perceived to be a personal relationship.

After discovering a conflict exists, real or perceived, the panel member with prior knowledge is to inform the chairperson or, if it is the chairperson, inform the delegate responsible for appointment and discuss whether their prior knowledge or relationship would preclude them from participating in the selection process. Such panel members may voluntarily withdraw or the chairperson/delegate may choose to replace the panel member, particularly when there is a personal relationship. It is recommended that any panel member with a personal relationship either current or past, excuse themselves from the panel to avoid allegations of perceived conflicts of interest.

17.6 Reasonable adjustment

Reasonable adjustment requires that Queensland Health, where necessary and reasonable to do so, is to make modifications and adjustments to the workplace to meet the individual needs of people with a disability or impairment.

In recruiting and selecting staff, it is the responsibility of the chair of each panel to ensure that work environments do not unreasonably prevent employment for people with a disability or impairment. Refer Reasonable Adjustment HR Policy for further information.

PART V – SELECTION

18 SELECTION STRATEGY

18.1 Selection strategy

The selection panel is to implement a selection strategy that directly relates to the key attributes so that the most meritorious applicant is selected for the position through a credible, reliable, consistent, fair, open and accountable approach.

The selection strategy is to identify the information to be gathered and how it is to be used at each stage of the selection process. The selection strategy can be developed in conjunction with a review of the role description prior to advertising, and generally includes the type and sequence of selection techniques to be used.

The panel is responsible for choosing a minimum of two selection techniques to be used, however the use of a minimum of three selection techniques is recommended. The more selection techniques that are used result in more valid and reliable selection decisions. The selection techniques are to be relevant to the key accountabilities and key attributes of the position and are to clearly assess the abilities required to competently perform in the position.

The chosen selection strategy is to meet the principles of the directive and be sufficient to assess the merits of applicants. It is essential that the selection strategy be applied equally, consistently and fairly.

18.2 Selection techniques

A combination (minimum of two but more than two is recommended) of any of the below selection techniques may be used in any order that the panel determine.

- Applicant screening e.g. specific questions, similar to those used in an interview that can be part of a written application, or conducted as a discussion over the telephone or in person
- Eligibility Screen – using questions that are mandatory requirements for the role
- General written applications (only where written skills are an essential requirement – this is usually the 1-2 page request)
- Curriculum vitae (CV)/ resume
- Referee reports (mandatory)
- Practical work-based demonstration
- Role plays
- Presentations
- Computer skills testing
- Work samples
- Interviews - behavioural and situational
- Psychometric testing (e.g. for senior roles)
- Assessment centres.

The panel may request advice on the validity of selection techniques for a role from their local People and Culture unit. Refer to the Queensland Health Recruitment and Selection Guide for further information on selection techniques.

18.3 Assessment process

The panel is to determine the form of assessment and set the standards for all assessment related activities. When assessing applicants, the panel is to take into account each applicant's personal qualities and, if relevant, potential against the key attributes.

The panel is to identify and document the expected standards for assessing the key attributes.

18.4 Qualitative or quantitative methods of assessment

When assessing applicants, there is a requirement that a method of assessment is used to determine each applicant's merit against the key attributes. There are two methods of assessment available: qualitative or quantitative.

18.4.1 Qualitative method

The qualitative method of assessment involves writing statements that clearly describe how an applicant meets the key attributes. Qualitative assessment focuses on the description of quality of the applicant. The qualitative method enables an holistic or overall assessment of each applicant, rather than applying a numerical score per key skill requirement.

18.4.2 Quantitative method

The quantitative method of assessment involves the use of numerical scoring for each applicant against the key attributes.

When using numerical scoring, it is still a requirement to write statements which clearly describe how an applicant meets the key attributes. Using the quantitative method of assessment therefore also requires the use of the qualitative method of assessment.

18.5 Short listing

Short listing is the process of making an initial determination of which applicants have the strongest claim against the key attributes, and determining which applicants then progress to the next stage of the process.

If the applicant fails to meet a mandatory requirement for the position, e.g. mandatory registration, their application cannot proceed further through the process. In situations when it is not clear regarding an applicant's current registration, verify status with the registration board and/or contact the applicant to confirm registration status. This informs the panel whether to include or exclude the applicant from further consideration.

18.6 Moderation

Moderation is a mandatory quality review process to support assessment decisions during the selection process. Moderation discussion is to be undertaken by the panel members to ensure a shared understanding of the requirements of the role, and is to be undertaken during short listing, and following the use of other selection techniques to ensure a level of consistency and reliability in the assessment of applicants.

While panel members may differ in their assessment, wide variations are to be scrutinised and consensus reached on who best meets the requirements of the role.

18.7 Close assessment

Following short listing, further information gathering is to be undertaken using the agreed selection strategy and selection technique/s.

If there is not a clear recommendation and a decision cannot be reached, the selection information is to be reviewed and additional selection techniques may be used to separate applicants.

19 REFEREE CHECKING

19.1 Use of referee reports

Referee checking relating to an applicant's work behaviour and performance must be conducted. At least one referee check is to be completed for the preferred applicant, except for medical roles, which require a minimum of two checks (refer section 20). Referee checks are to be completed for all appointments regardless of the nature or duration of the appointment (e.g. includes all permanent and temporary appointments for any period of time).

Referee checks are considered to be one of the two minimum selection techniques, and can be sought and used at any stage of the selection process.

If an order of merit is established, indicating that other suitable applicants may be appointed at a later date, a referee check does not have to be done at this point, but is to occur prior to any appointment offer. This ensures that the referee reports are current at the time of a recommendation for appointment.

Referees are to be informed that their comments are to be made available to the applicant if requested. It is the panel's duty to disclose adverse or unfavourable referee comments to applicants when these comments have the potential to affect the outcome of the selection recommendation. This is to give the applicant an opportunity to respond. The panel is to consider responses from the applicant regarding any adverse comments, seek any additional evidence (e.g. ask for additional referees) and make appropriate notes in the selection report.

19.2 Identifying referees

At least one referee must, unless there are extenuating circumstances, have a thorough knowledge of the applicant's conduct and performance within the previous two years.

Ideally, the referee is to be, or have been, in a recent supervisory relationship with the applicant. When an applicant is moving back into the workforce following absences, e.g. for family reasons, they are not to be disadvantaged because they do not have a current or recent past supervisor.

The panel is only to contact referees that have been nominated by the applicant. The panel is **not** to contact the current supervisor of a public service or health service employee for a referee check unless the applicant has nominated the supervisor as a referee through the application process, or consent has been given by the applicant. In circumstances where a panel believes that there are referees other than those nominated by the applicant that hold information relevant to the selection decision, a panel may contact the applicant for additional referees.

Applicants must seek approval from any prospective referees before they nominate that person as a referee. An employee who is asked to be a referee is not bound to accept.

A panel member can act as a referee for an applicant (refer section 7.4 for the recommended approach).

If applicants are external to the public sector, care is to be taken in contacting referees so as not to jeopardise the applicant's existing employment. The issue may be discussed with the applicant and arrangements made which are acceptable to the applicant.

If an applicant fails to identify suitable and relevant referees (except where they have been absent from the workforce), the panel is to consider this when assessing the merit of the applicant and document the outcome of panel deliberations in the selection report. Advice is to be sought from the local People and Culture unit before this action is taken.

19.3 Conducting referee checks

It is a Directive requirement that referee checks are to be conducted for all recommended applicants for appointment, unless applicants are not able to provide these (e.g. when applicants have not been in the workforce). All reasonable steps are to be taken by the panel to assess the merits of applicants by using additional selection techniques.

Specific and targeted questions are to be directed to referees to increase the validity and reliability of this selection tool. Refer to the referee report template and guidelines on the People and Culture Corporate website.

Referee checks may be obtained over the telephone, in person, in writing or via email, however **verbal contact is to be made** with the referee initially. Verbal referee reports are to be documented and it is recommended that the reports then be returned to the referee for verification and signature. Applicants may submit written references, but these are not to form part of the reference checking process unless the content is verified by the panel.

19.4 Obligations of referees

A referee who is a Queensland public sector employee is to disclose all information known to them that is relevant to the applicant's ability to undertake the responsibilities and duties of the advertised vacancy, and to the work behaviour of the applicant. Information relevant to the merit criteria or potentially indicative of the applicant's future performance or work behaviour must be provided, clearly and transparently, even if not directly requested by the panel. The omission of relevant information or the provision of untruthful information by a referee to the referee's own agency or to another agency is a breach of the Directive and Code of Conduct and constitutes grounds for discipline.

20 MEDICAL PRACTITIONER INTERNET SEARCH AND REFEREE CHECKING

The following internet and referee checking for medical practitioners is to supplement the roles and responsibilities listed in the below HR policies:

- Roles and Responsibilities - Medical Superintendents employed under the District Health Services - Senior Medical Officers' and Resident Medical Officers Award - State 2003 H R Policy B8.
- Health Professionals Registration - Medical Officers, Nurses and other Health Professionals HR Policy B14.

Medical superintendents or the appropriate delegated authority are to ensure recruitment and employment of all medical staff is performed in accordance with Queensland Health policies and procedures.

20.1 Application

These specific recruitment and selection processes apply to:

- current and potential medical practitioners of Queensland Health, pursuant to *Medical Officers' (Queensland Health) Certified Agreement (No. 2) 2009*
- medical practitioners engaged through recruitment agencies
- contracted medical staff (e.g. independent contractors)
- medical practitioners engaged as locums.

20.2 Internet Search – All medical officers

It is a requirement that all medical officers be subject to an internet search as part of the recruitment process. Medical Officers who are employed via recruitment agencies, contractors or locums are also required to have an internet search conducted.

The internet search is to assist in the identification of any previously undisclosed criminal history or adverse findings that may potentially impact on the Medical Officers ability to deliver safe quality care to consumers of Queensland Health services.

The internet search is to be conducted based on the following criteria:

- First name
- Last name
- Dr
- Search engine: Google.

The first three pages (10 hits per page) of the search results are to be viewed and signed by the Executive Director Medical Services and kept on the medical officer's personal file.

The internet search **must** be completed and any concerns addressed prior to commencement of employment. Any adverse information is to be reported by the Executive Director Medical Services to the District Chief Executive Officer immediately.

The Executive Director Medical Services is responsible for:

- ensuring the internet search is conducted as per the criteria listed above
- reviewing the content of the internet search
- identifying and investigating any adverse information
- reporting any findings to the District Chief Executive Officer and Credentialling Committee
- ensuring a copy of the internet search is kept on the medical officer's personal file
- ensuring the outcomes of any investigations are recorded on the medical officer's personal file
- ensuring the internet search is completed prior to the medical officer commencing employment with Queensland Health.

20.3 Referee checking for medical practitioners

It is a Queensland Health requirement that a **minimum of two referee checks** be conducted. These are to be conducted by the medical superintendent (MS), medical superintendent with right of private practice (MSRPP), or the appropriate delegated authority. The referee checks are to be relevant to the role in question.

20.4 Methods for referee checks for medical practitioners

It is not appropriate that written references provided by the applicant are used as the sole method of verifying claims to the position. Referee checks are to be conducted in person, via the telephone, or via email. Verbal referee reports are to be documented and it is recommended that the reports then be returned to the referee for verification.

20.5 Professional registration and credential checking

Prior to permitting a person to commence any clinical duties, the supervisor or manager is to sight the medical practitioner's registration certificate, match the name on the registration certificate to other identification documentation submitted, and independently verify that the registration submitted is current. This applies to all medical practitioners, medical practitioners engaged as locums, or medical practitioners engaged through a recruitment agency.

21 SELECTION RECOMMENDATION

The selection recommendation is documented in the selection report and is signed by all panel members. The panel is to use the approved Queensland Health selection report template. At a minimum the recommendation is to demonstrate that the recruitment process meets the minimum legislative requirements identified in section 17.1 Assessment of Applicants.

The minimum documentation to be kept for legislative purposes includes:

- role description
- advertisement
- selection report
- referee report
- applications, including CV/resumes
- details and results of selection techniques.

Individual panel members may take personal notes to assist in their deliberations and moderation of the selection process. This information is to be included in the final selection report. These notes are not required to be retained or attached to the selection report.

21.1 Selection report

The selection report provides all essential information to the delegate to make a decision on the recommendation of the panel. The report is to clearly indicate whether applicants are meritorious or not. The selection report provides the delegate with:

- confirmation by the panel that the selection report and the recruitment and selection process have been undertaken in accordance with this policy and the relevant industrial instruments
- the method of short listing and a qualitative summary statement of each short listed applicant against the key attributes and/or comparative statement when more than one applicant

- an order of merit of suitable applicants for appointment where applicable (**NOTE:** Please do not include applicants in the order of merit who are NOT suitable for appointment)
- a recommendation for an external appointee to a particular pay point within a classification as determined by the panel (refer section 21.2)
- confirmation and evidence that appropriate referee checks have been completed.

A copy of all applications, including CV/resumes, role description, referee report/s, and other relevant selection documents are to be provided to the delegate for review as necessary.

If a unanimous selection decision cannot be agreed on, it is recommended that the selection panel seek advice from their delegate and/or local People and Culture unit.

21.2 Paypoint recommendation (external applicants only)

An external applicant (i.e. an applicant who is not an existing Queensland Health or permanent Queensland public service employee) may be appointed to any paypoint (increment) within the classification level upon the panel's recommendation. The recommendation is to be made at the time of appointment, and is to be based on consideration and supporting evidence of the following:

- relevant previous experience in equivalent or higher level roles
- the skills, knowledge and abilities of the applicant
- the paypoints and experience of existing employees within the work unit performing similar work.

Approval for the appointment of an external candidate to a higher paypoint within the classification level is confidential and at the discretion of the delegate. The supporting evidence to justify such a recommendation is to be included in the selection report for delegate approval.

Some industrial instruments provide specific previous service recognition provisions for determining commencement paypoints, e.g. medical and nursing staff. The relevant Award or Certified Agreement is to be read (and applied) in conjunction with this policy.

It is acceptable to discuss salary and wage rates with potential employees, however no commitment is to be made by the panel to an applicant about a commencing paypoint until the delegate has approved the paypoint recommended by the panel. If further assistance is required, it is recommended that the selection panel seek advice from their local People and Culture unit.

If no paypoint is stated for an external appointee, they are to commence on the lowest paypoint unless they can provide proof that a higher level paypoint is to be paid (refer Determining Salary Levels HR Policy for further information).

21.3 Order of merit

When appropriate, a documented order of merit is to be established in merit based selections for potential use for future identical vacancies. When establishing an order

of merit, panels are to ensure that only applicants who are considered suitable for appointment are placed in the order of merit.

The order of merit is established by the panel beginning with the applicant who achieved the highest level of merit, cascading down to the lowest. This is to be clearly documented in the selection report.

An existing order of merit can be supplemented with late applications. Refer to 15.3 Recurring Vacancies for further information.

PART VI - PRE-APPOINTMENT

22 PRE-APPOINTMENT

22.1 Delegate responsibilities

The delegate is responsible and accountable for the decision to appoint in the recruitment and selection process, and is specifically responsible for:

- possessing a thorough understanding of the requirements of recruitment and selection processes as applied within Queensland Health
- reviewing the selection report and documentation to ensure the process applied was completed fairly and able to withstand appropriate scrutiny
- dealing with matters of contention
- making decisions relating to the appointment recommendations made in the selection report by approving/not approving the recommendations.

The delegate is to ensure that decisions made regarding a selection, particularly when there is contention, are documented clearly, including any reasoning used by the delegate in making the decision.

22.2 Professional registration and credential checks

When registration and credentials are required to legally practice in a health profession, the requirement is to be specified in the role description and/or the procurement contract, inter-agency arrangement, or other documentation that details placement arrangements.

Recruitment and selection processes are to include the verification by the panel of an applicant's registration. Prior to permitting a person to commence any clinical duties, the supervisor or manager is to sight the health professional's registration certificate, match the name on the registration certificate to other documentation submitted, and independently verify that the registration submitted is current. Certified copies must be obtained to submit with commencement of duty forms.

The manager is to also confirm that the registration is appropriate for the position and duties to be performed, and identify any endorsements and limitations placed on the right to practice (refer Health Professionals Registration – Medical Officers, Nurses and Other Health Professionals HR Policy B14).

22.3 Voluntary early retirement (VER) status checks

Prior to making an appointment, it is the chairperson's responsibility to check the VER status of all former public sector employees, including temporary and casual. It is recommended that the chairperson ask the question directly to the applicant, or check the application form.

If the applicant is currently within the benefits period of a VER package issued by a Queensland Government agency, the chairperson is to liaise with local People and Culture about the need to potentially recover funds from the applicant. For more information refer Directive 11/05 – Voluntary Early Retirement (VER).

22.4 Citizenship/visa requirements checks

Prior to any offer of employment being made it is the responsibility of the panel chair to check the applicant satisfies citizenship requirements and is eligible for appointment. It is recommended that the chairperson check the application form and ask the question directly to the applicant.

Documentary evidence can be requested at any time during the selection process. Refer to Citizenship, Residency and Visa Requirements for Appointment in Queensland Health HR Policy B55.

22.5 Proof of identity

All Queensland Health employees are to provide proof of identify within one month of commencing employment. The selection panel is to seek suitable proof of identity and forward copies to the Recruitment Services Team to confirm **all** of the following:

- photo identification
- full name
- evidence of age
- place of birth.

Suitable proof of identity consists of:

- current passport
- certified copy or a certified extract of a birth certificate **plus** a current drivers licence, or;
- certified copy or a certified extract of a birth certificate **plus** a current 18+ card.

When the name shown on the documents differs from the person's current name, the person is to provide sufficient evidence of their name change (e.g. certified copy of marriage certificate).

When these documents are requested for criminal history checking purposes, an additional copy is to be forwarded with the criminal history check application. If a criminal history check is not required for appointment, these documents are still to be provided for general proof of ID purposes.

22.6 Criminal history checks

The offer of appointment cannot be made until the appropriate criminal history checking process is completed. The selection panel (with the applicant's written consent) is responsible for requesting criminal history checks.

Depending on the relevant duties of the role, having a criminal history may not necessarily result in disqualification for appointment. A person is not to be asked to disclose personal criminal history information to a selection panel or other employee at any stage during a selection process.

Depending on the role being recruited to, applicants are required to be subject to one or more of the following criminal history checks:

- General criminal history check.
- Aged care criminal history check.
- Aged care key personnel check.
- Corrective Services criminal history check.
- Working with children check (blue card).

All interviewed applicants are to provide written consent to conduct a criminal history check at the time of interview. Criminal history checks are only to be conducted on the recommended applicant.

Refer Criminal History Checking HR Policy B40, or contact the SSP Criminal History Unit for further information.

22.7 Pre-employment structured clinical interview (PESCI) for international medical graduates (IMGs)

A PESCI is one of the assessments of qualifications and skills which an IMG is **required** to undergo as part of the nationally consistent assessment process. A PESCI is required for all IMGs on the standard pathway to general registration who are applying for house officer positions and expected to commence employment after 30 March 2009. This is to apply for positions in Emergency, Anaesthetics, Obstetrics and Gynaecology, and Mental Health. Offers of employment can be made subject to the successful completion of a PESCI. Refer to <http://qheps.health.qld.gov.au/raps/project/assessment.htm#pesci> or contact Clinical Workforce Solutions for further information.

22.8 Curriculum Vitae (CV) / Resume

At the time of appointment, all new or renewing registered health professionals employed by Queensland Health will be required to provide their CV/resume with certification by the health professional that the content is true and correct. Where relevant, the CV/resume must be consistent with that provided for registration purposes.

Health professionals who apply for advertised vacancies via the 'Smart Jobs and Careers' site are required to declare their CV/resume is a true and correct at the time their application is lodged.

Where a health professional is employed by any other means, it is the responsibility of the delegate to ensure the CV/resume certification requirement is met.

Refer to Memo (Ref: DG049075) for further information

http://qheps.health.qld.gov.au/peopleandculture/recruitment/documents/dg_memo.pdf

PART VII – APPOINTMENT

23 APPOINTMENT

23.1 Verbal appointment notification

Until the delegate approves the panel recommendation and pre-employment checks are completed, no offer can be made to any applicant. After the delegate has approved the panel's recommendation, the chair or representative can liaise with the recommended applicant to advise that the delegate has approved the selection and that they are the preferred applicant.

It is important that no verbal offers or firm undertakings in relation to conditions of employment are made before delegate approval and pre-employment checks are completed as these may be construed as formal offers and, if accepted, may be binding on Queensland Health.

23.2 Other notifications

It is the responsibility of the panel chair to verbally advise the other applicants who progressed past the short listing stage that they were unsuccessful. In addition, the chair is to send the correct documentation to SSP Recruitment Services who are to notify all unsuccessful applicants in writing.

When a position has been advertised in the Health Services Bulletin or the Queensland Government Gazette, any appointment made to that vacancy is to be notified in the same publication. This notification is to be made promptly once the delegate approval and pre-appointment checking has been satisfactorily completed and the applicant has accepted the offer.

When applicable, an appeal period of 21 days commences from the date that the appointment is published in the relevant gazette. Eligible unsuccessful applicants are to have an opportunity to appeal the appointment. The selection process is not complete until the appeal period and any subsequent appeal processes are concluded.

Non base grade appointments made under section 13.3 are to be published in the Health Services Bulletin (health service roles), the Queensland Government Gazette (public service roles) or both when applicable. Refer to SSP Recruitment Services for further information.

23.3 Appointment letters

Once the relevant pre-employment checks have been completed and are satisfactory, an appointment letter and the terms and conditions of employment are to be sent by SSP Recruitment Services to the successful applicant. This is to ensure the successful applicant is properly informed of their obligations and entitlements before accepting the offer of employment.

The appointment letter is to be provided to the prospective employee prior to commencing duty. At this time, the appropriate pay rate is to be stated according to Award conditions or the delegate approved paypoint recommendation (refer section 21.2).

The appointment letter is to give the prospective employee sufficient time to consider the offer and to decide if they will accept. The appointment letter is to state that the prospective employee has seven calendar days from the date of receiving the letter to sign and return the Acceptance of Appointment form to SSP Recruitment Services.

The selection report signed by the appropriate delegate is the authorisation for appointment and for advising SSP Recruitment Services to create and send an appointment letter.

It is **mandatory that Queensland Health standard appointment letters**, including the relevant terms and conditions of employment, are used for **all** offers of employment across all streams of employment within Queensland Health. Local additional information regarding the specific occupation and the work unit may be included in the offer of appointment package.

23.4 Acceptance of appointment

The appointment letter is to contain a request to the applicant to sign and return the acceptance of appointment form.

Upon receipt of an appointment letter, a prospective employee may take the following action:

- sign the Acceptance of Appointment form and return it to SSP Recruitment Services
- seek additional information regarding the offer of employment
- refuse the offer by indicating non-acceptance on the Acceptance of Appointment form.

The applicant's acceptance of the offer and terms and conditions of employment is to be in writing.

23.5 Timing of offer

SSP Recruitment Services is to advise the panel chair if a reply has not been received within seven calendar days.

The panel chair is to follow up and communicate with the prospective employee to establish that they have received and are aware of the terms of the offer, and to identify if they wish to accept the offer. The panel chair is to then communicate with

SSP Recruitment Services regarding the outcome of the contact with the appointee and any further action required (e.g. sending of an amended appointment letter).

23.6 Work location

Although appointment to Queensland Health is to a particular location, staff may be required to work at an alternative location. Staff are to be consulted with respect to any change to their work location. Appointments may be made to districts but the employee is to be advised at which principal facility or work unit they will be based or located. If a staff member does not agree to the change in work location, they are entitled to lodge a grievance according to the relevant HR policy.

PART VIII – POST APPOINTMENT

24 POST APPOINTMENT

24.1 Post selection feedback

Applicants are to be advised in the unsuccessful letter that they can request feedback from a panel member. When feedback is requested by the applicant, factual, constructive and sensitive feedback should be offered in a timely manner. When feedback is requested in writing by the applicant, the feedback may include information on the applicant's assessment against the key attributes extracted from the selection report or qualitative statements from the short listing process.

If feedback is requested after the appeal period, the giving of feedback is discretionary. Information such as the identity of other unsuccessful applicants and personal information is not to be disclosed by the panel.

It is the discretion of the panel to provide feedback in writing if requested from an applicant, but generally it is considered more helpful to provide the feedback verbally.

24.2 Documentation and confidentiality

All documentation relating to recruitment and selection exercises is to be held by SSP Recruitment Services except in situations when WorkForUs recruitment campaigns are conducted. Selection, appointment and commencement documents are to be maintained in strict confidence and security for the periods under the Queensland State archives general retention and disposal schedule for administrative records for roles at senior officer level and below. In the case of senior executive officers, selection documents are kept indefinitely.

25 DEFINITIONS

Appoint	Appoint an officer or employ as a tenured general employee.
----------------	---

Base grade level positions	<p>Roles defined as:</p> <ul style="list-style-type: none"> • Operational officer OO1 - OO3 (trade equivalent non-supervisory positions) • Administration officer AO1 - AO2 • Technical officer TO1 - TO2 • Professional officer PO1 - PO2 • Dental Officer DO1 • Nursing officer NO1, grade 1 (AIN), grade 2 (undergraduate students in midwifery/nursing), grade 3 (EN), grade 5 (RN/midwife) • Medical intern level 1 • Health building and engineering apprentice HBEA 10 – 12 • Health practitioner – currently under review.
Clinical appointment	Appointment to all roles of a clinical nature, e.g. medical, nursing and health practitioner.
Curriculum vitae (CV)/resume	A summary of skills, experience and education provided by the applicant.
Deployee	A deployee is a surplus employee who has been appointed at level into a public sector vacancy, either within Queensland Health, or to another department or agency.
Direct appointments	Refer section 13 for direct appointments for base grade and non base grade roles.
Employee	An employee is defined as either a health service employee, public service officer or general tenured employee as stated in the <i>Public Service Act 2008</i> and <i>Health Service Act 1991</i> .
Entry level positions	See base-grade level positions.
Expression of interest	An advertising method for temporarily filling vacant positions for short term needs/projects (up to 12 months). A merit based process is still required, with the minimum of two selection techniques.
Externally advertised	Advertised (as a minimum) in the Health Services Bulletin (health service and public service vacancies) or Queensland Government Gazette (public service vacancies only).
Identified position	A position in which it is lawful to discriminate in favour of a person possessing one of the attributes set out in s. 7 of the <i>Anti-Discrimination Act 1991</i> , e.g. gender, race, age, impairment, sexuality, religious belief or religious activity.
Identical or similar role	A role which shares the same title, remuneration, classification level and role description as another role.
Job analysis	A process of investigation into the functions, duties and employee requisites of a position. It is a process for obtaining valid information about positions as a

	prerequisite to the preparation of role descriptions and role evaluation.
Job evaluation management system (JEMS)	JEMS is the framework adopted across Queensland Health to assess and establish the relative work value of roles. JEMS forms the basis on which the classification and remuneration levels of roles are determined.
Key attributes	The description of the abilities, aptitude, skills, qualifications, knowledge, experience and personal qualities against which applicants will be assessed (previously known as assessment criteria or key skill requirements).
Merit	Refer section 16 for definition of merit
Moderation	It is a quality review and assurance process which supports the assessment decisions during the selection process. This is a measure to ensure consistency and reliability in the assessment of applicants.
Open merit	A merit based selection process whereby the applicant pool is not restricted. This is achieved through advertising a position internally (base grade) and externally (non base grade) to Queensland Health. Open merit is to include an assessment of merit, not just advertising.
Order of merit	The panel may create an order of merit of the applicants who meet the key attributes, and are considered suitable for appointment.
Reasonable adjustment	The requirement of making adjustments to a job or workplace to allow a person with a disability or impairment to use their skills effectively. Adjustments can range from modifications to work design, alterations to facilities or equipment etc.
Recurring vacancy	A recurring vacancy is at and below the level of senior officer or equivalent and can be filled from the applicant pool for the same or identical role.
Recruitment	The process of seeking and attracting a pool of qualified applicants from which applicants for job vacancies can be selected.
Redeployee	A surplus officer who has accepted a permanent appointment to a lower classification level than their substantive classification level. Surplus employees, who are redeployed, may remain registered for a maximum period of 12 months from the date redeployment commences. This enables them to be assessed on suitability (as opposed to relative merit) when they apply for permanent vacancies at classification levels up to and including their original substantive classification.

Referee checks	Referee checking provides a means of obtaining further information about an applicant from present or past supervisors or other people with a direct personal knowledge of the applicant's conduct and performance at work.
Role description	A role description provides applicants with sufficient information to inform them of the requirements of the role and the basis for assessment of merit.
Role evaluation	The process of assessing the relative work value of a position(s).
Secondment	Secondments are the temporary engagement of a permanent employee, either at their substantive classification level or at a higher classification level.
Selection	The process of choosing the most meritorious applicant based on assessment.
Specified advertising	Specified advertising is a form of a limited applicant pool or closed merit process, where the invitation to apply is for specific employees or groups of employees.
Suitability assessment	A suitability assessment is to be undertaken in accordance with the requirements of the PSC guidelines for assessing suitability.
Surplus officer	Surplus employees are those whose substantive employment position has become surplus or redundant, or who have relinquished their substantive position.
Targeted advertising	Targeted advertising is a form of a limited applicant pool or closed merit process which can limit the invitation to apply to Queensland Health employees only.
Vacancy	A position in which no employee is currently appointed.
Verification	<p>To sight the original or a certified copy of a health professional's registration certificate or view the health professional's registration details on the public access register and check the details contained within.</p> <p>Checks include ensuring the name on the registration certificate/public access register is the same as other documentation in possession of Queensland Health, confirming that the registration is current and appropriate for the position and/or roles to be performed and to identifying any endorsements and/or limitations placed on the employee's right to practice.</p>

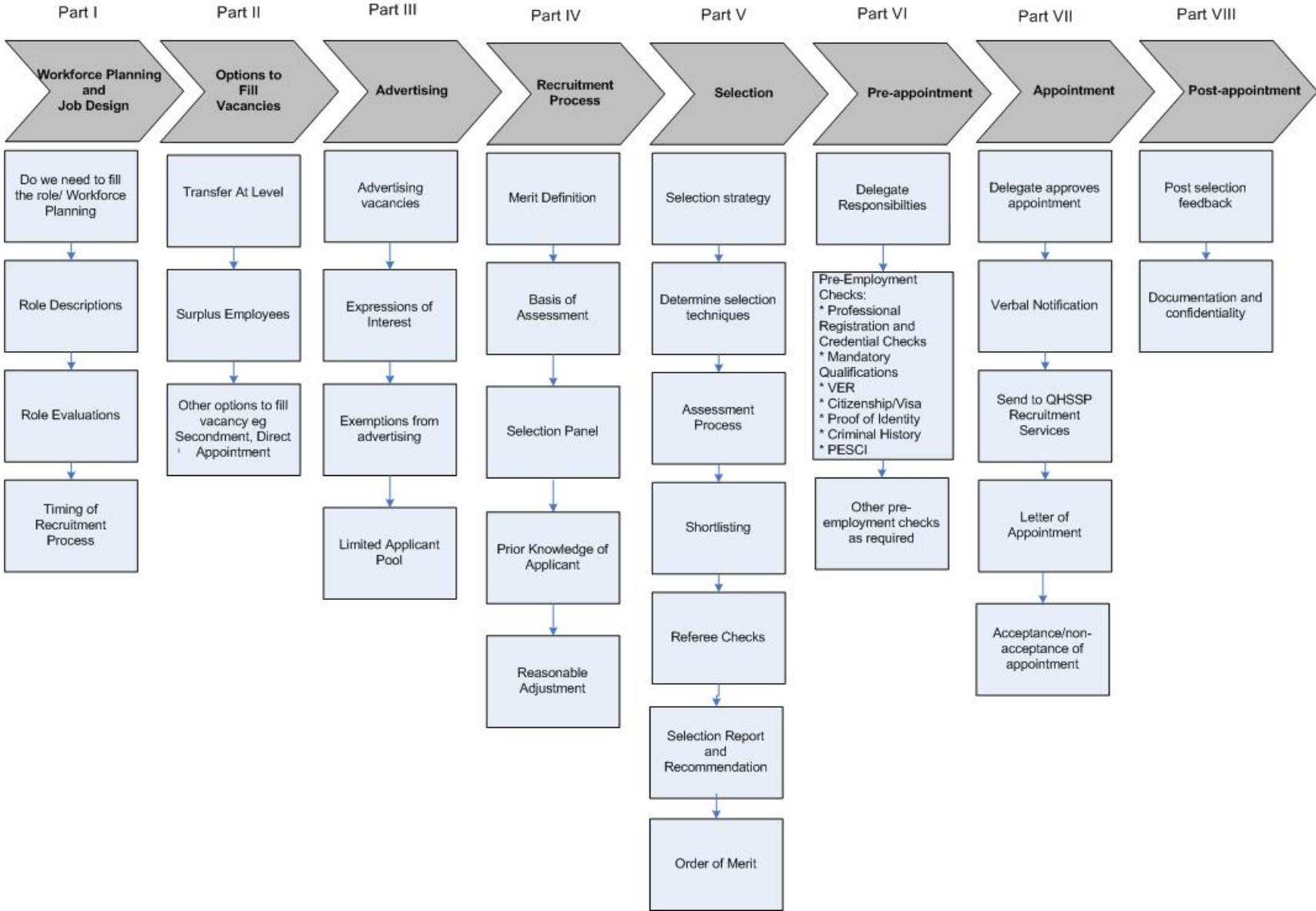
Voluntary early retirement (VER)	<p>VERs apply when:</p> <ul style="list-style-type: none"> • positions are identified as surplus to requirements and expressions of interest are called; or • an individual employee becomes surplus to requirements either through the position being redundant or through the employee being unsuccessful in gaining an appointment to a position within a new structure.
---	---

26 HISTORY

February 2010	Updates based on new Directive 1/10 issued 12 February 2010 and minor updates based on evolving practices. Inclusion of the Internet search for all medical officers.
December 2009	<ul style="list-style-type: none"> • Swapped section 12 with section 13 – to reflect order of process. • Update to section 14.1 Transfer at Level
November 2009	<ul style="list-style-type: none"> • Updated S5 references to reflect EB7, Nurses and Midwives EB7, and BEMS4 • Changed wording around Timing of Process S11 • Mandatory obligations for filling vacancies S13 • Changes incorporating Directives 12/09 and 4/10 S13.1 • Change surplus checks required for all temporary vacancies 6 months and longer S13.1 • Changes to order of process – transfer at level can only occur after surplus checking S14 • Changes to advertising requirements and reduction of advertising costs S15.1.5
July 2009	<p>Amended:</p> <ul style="list-style-type: none"> • to supersede IRM 3.13-13 • section 12 to include whole of government
June 2009	<ul style="list-style-type: none"> • Reformat into parts • Renumbered section 23 onwards • Inclusion of expression of interest (EOI) • Included additional information to define merit • Selection recommendation includes information in relation to differentiating applicants.
May 2009	<ul style="list-style-type: none"> • Addition of s22.5 Proof of identification. • Update to s19.3 indicating verbal contact is to be made with referees. • Update to s17.1(a)(v) in accordance with new interim directive 04/09. • Update to s16.2 Limited Applicant Pools to indicate new approval process in accordance with directive 03/09. • Update to direct appointments section to align with directive 03/09.

March 2009	<ul style="list-style-type: none"> • Update to Paypoint Recommendation (for external applicants) section to clarify requirements of appointing above increment level one. • Update to reflect inclusion of casuals in direct base grade appointment section. • Addition of section 22.5 PESCI
February 2009	Updated to clarify requirements of referee checking
December 2008	Amendment to incorporate information on base grade appointments, direct appointments, advertising, paypoint recommendations, pre-employment and to reflect the <i>Public Service Act 2008</i> . Also, general re-wording to reflect evolving and contemporary R&S practices.
May 2008	Amendment to incorporate changes to base grade appointments, direct appointments, criminal history checks
April 2008	Developed as a result of reviewing related Recruitment and Selection HR policies and Directive 03/09 – Recruitment and Selection.

Recruitment and Selection Process



Please note that any material printed is regarded as an uncontrolled copy. It is the responsibility of the person printing the document to refer frequently to the Queensland Health Internet site for updates.