Recruitment and Selection

Policy Number: B1 (QH-POL-212)

Publication date: June 2014


Application: This policy applies to the recruitment of all positions within Queensland Health including positions within:

- the Department of Health
- non-prescribed Hospital and Health Services
- prescribed Hospital and Health Services,

To the following categories of employment:

- permanent (includes full-time or part-time)
- temporary (includes full-time or part-time)
- apprenticeships and traineeships
- casual staff
- clinical appointments (including Visiting Medical Officers (VMOs)).

The recruitment and selection principles in this policy apply to the filling of roles at SO, DSO level and above. The Executive Policy and Contracts team, HR Services Branch are to be contacted to discuss additional requirements for senior roles.

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.

Delegation: The ‘delegate’ is as listed in the Department of Health Human Resource (HR) Delegations Manual and the Hospital and Health Services Human Resource (HR) Delegations Manual – HRM Functions of the Director-General, as amended from time to time.
Legislative or other authority:

- Aged Care Act 1997 (Cth)
- Anti-Discrimination Act 1991
- Child Employment Act 2006
- Commission for Children and Young People and Child Guardian Act 2000
- Disability Discrimination Act 1992 (Cth)
- Hospital and Health Boards Act 2011
- Human Rights and Equal Opportunity Commission Act 1986 (Cth)
- Industrial Relations Act 1999
- Information Privacy Act 2009
- Right to Information Act 2009
- Public Service Act 2008
- Public Service Regulation 2008
- Racial Discrimination Act 1991 (Cth)
- Sex Discrimination Act 1984 (Cth)
- Workers’ Compensation and Rehabilitation Act 2003
- Nurses and Midwives (Queensland Health) Certified Agreement (EB8) 2012
- Medical Officers’ (Queensland Health) Certified Agreement (No.3) 2012 (MOCA3)
- Queensland Public Health Sector Certified Agreement (No. 8) 2011 (EB8)
- Queensland Health Building, Engineering and Maintenance Services Certified Agreement (No. 5) 2011
- Queensland Government Standing Offer Arrangement (SOA) No. 200
- Directive 15/13 – Recruitment and Selection
- Directive 6/13 – Employees Requiring Placement
- Directive 11/13 – Transfer within and between Classification Levels and Systems
- Directive 11/12 – Early Retirement, Redundancy and Retrenchment
- Directive 5/12 – Workforce Establishment Management Program
- Directive 7/11 – Employment Screening
- Directive 19/10 – Appeals
- Code of Conduct for the Queensland Public Service
- Health Executive Services Terms and Conditions of Employment Document

Related policy or documents:

- PSC Lobbyist Disclosure Policy
- Commission Chief Executive Guideline 02/13: Evidence of attribute – Aboriginal and/or Torres Strait Islander identified roles
- Nursing and Midwifery Classification Structure HR Policy B7 (QH-POL-179)
- Health Professionals Registration - Medical Officers, Nurses and other Health Professionals HR Policy B14 (QH-POL-147)
- Job Evaluation HR Policy B29 (QH-POL-159)
- Appointment of Permanent Relief Staff to Non-Relieving Positions - Administrative Stream HR Policy B31 (QH-POL-102)
- Employees requiring placement HR Policy B36 (QH-POL-237)
- Criminal History Checking HR Policy B40 (QH-POL-122)
- Secondment HR Policy B42 (QH-POL-224)
- Citizenship, Residency, Visas and Immigration HR Policy B46 (QH-POL-250)
- Transfer and Appointment Expenses HR Policy D4 (QH-POL-245)
- Employee Complaints HR Policy E12 (QH-POL-140)
- Reasonable Adjustment HR Policy G3 (QH-POL-210)
- Separation of Employment HR Policy H1 (QH-POL-227)
- Indemnity for Queensland Health’s Medical Practitioners HR Policy I2 (QH-POL-153)
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SCHEDULE ONE    Identified (Lawful Discrimination) Roles
1 Recruitment and Selection in Queensland Health

Directive 15/13 – Recruitment and Selection specifies the minimum requirements applying to the recruitment and selection of public service employees and health service employees.

This policy sets out additional requirements and standard processes specific to Queensland Health 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.


Part I – Workforce planning and job design

2 Workforce planning and job design

Directive 05/12 – Workforce Establishment Management Framework sets out the principle that service wide workforce management strategies align with government priorities. This supports the Government’s commitment to a public service that delivers effective, efficient and responsive services to the community.

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.

2.1 Role descriptions

In addition to the requirements outlined in Directive 15/13 – Recruitment and Selection, role descriptions are also to indicate any potential locations, or range of locations, and the potential basis for employment (e.g. part-time or full-time). 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 [Instructions for Developing Role Descriptions](http://www.psc.qld.gov.au/publications/directives/assets/2013-15-Recruitment-and-Selection.pdf).
2.1.1 Identified (Lawful Discrimination) roles

Mandatory requirements of a role can include attributes required for appointment to an identified position. An identified role is a position in which it is lawful to discriminate in favour of a person possessing one or more of the attributes set out in section 7 of the Anti-Discrimination Act 1991 for the purpose contained in section 25, 104 and 105 of that Act. Refer to Schedule One of this policy for the requirements and processes for identified positions within Queensland Health.

2.1.2 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 Blueprint for better healthcare in Queensland.

Organisational change may affect the title or designation, key responsibilities, 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.

2.2 Role evaluation methodology

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

<table>
<thead>
<tr>
<th>Classification</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td>General medical position classification definitions are contained within the relevant Medical Officers’ Awards and the Medical Officers’ (Queensland Health) Certified Agreement (No.3) 2012(MOCA3).</td>
</tr>
<tr>
<td>Nursing</td>
<td>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.</td>
</tr>
<tr>
<td>Building and engineering</td>
<td>Classification levels are determined by competency levels contained under the relevant Queensland Health Building, Engineering and Maintenance Services Certified Agreement (No.5) 2011.</td>
</tr>
<tr>
<td>Operational</td>
<td>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 are to be submitted via the Public Hospitals Oversight Committee (PHOC) Secretariat for approval by PHOC.</td>
</tr>
<tr>
<td>Health practitioner</td>
<td>Health practitioner classification levels 1 to 8 are evaluated through work level statements contained within the Health Practitioners (Queensland Health) Certified Agreement (No.2) 2011.</td>
</tr>
<tr>
<td>All other AO, OO, TO and PO roles not identified above</td>
<td>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 B29. Levels 1 and 2 of the professional and technical streams are not required to be evaluated because, by definition, these levels exist for the purpose of fulfilling prerequisite education and training prior to appointment to the level of practising professional or technical officer at level 2.</td>
</tr>
</tbody>
</table>

Part II – Filling vacancies

3 Mandatory obligations for filling vacancies

In an effort to better manage public sector costs, the government initiated an Establishment Management Program (EMP) across the whole-of-government to assure greater scrutiny over hiring decisions associated with non-frontline positions. As a result, Queensland Health established processes and parameters for decisions relating to recruitment (including higher duties and extensions) to ensure these align to the government’s priorities.

The EMP is designed to ensure critical frontline positions continue to be filled as a matter of priority, to ensure there is no detrimental impact to frontline service delivery for clients.

Guidelines are available for the separate processes within the Department of Health and Hospital and Health Services.

With the exception of critical frontline positions, all permanent substantively vacant positions or temporary positions of greater than 12 months must be referred to the Public Service Commission (PSC). These positions will be held by the PSC while there are employees requiring placement being managed in accordance with Directive 06/13 – Employees Requiring Placement.

3.1 Suitability of Queensland Health employees requiring placement

Prior to filling a temporary vacancy of greater than 12 months, or a permanent vacancy, Queensland Health is to ensure employees formally registered as employees requiring placement are assessed under suitability guidelines to determine whether they are suitable for deployment or redeployment. When there is more than one employee requiring placement that has been matched to the vacancy, then the most suitable officer will be placed. Refer to Directive 6/13– Employees Requiring Placement for further information.

Exemption from Open Merit for Positions Reclassified from AO2 to AO3 (in accordance with Queensland Public Health Sector Certified Agreement (No. 8) 2011 (EB8)) and recruitment using specified advertising does not require employees requiring placement to be considered for appointment.

Employees requiring placement checks are not required when filling a vacancy through transfer/movement at level; however it is still necessary to comply with the EMP guidelines for permanent filling of vacancies.
3.2 Suitability assessment – employees requiring placement

Assessing suitability for employees requiring placement requires an assessment against the key role attributes on the basis that an employee requiring placement be suitable given reasonable induction and training. Documentation of the assessment and recommendation to appoint or not appoint the employee requiring placement is to be provided to and retained by the case manager.

The matching is based on the skills and experience of the employee requiring placement to the role description supplied. Employees have an obligation to participate in the process as prescribed in Directive 6/13 - Employees Requiring Placement. Recruiting managers are required to undertake suitability assessments within seven days of being notified of a match to their vacancy.

4 Direct appointments

When the option of direct appointment is being considered, managers or supervisors are to consult with their local people and culture/HR units. The appropriate paperwork is then to be sent to the local recruitment services unit for processing.

Applications for all categories of direct appointments are to be considered on a case-by-case basis. Direct appointment may be approved at the discretion of the appropriate delegate in accordance with sections 5.1 to 5.3 of this policy or to positions that have been exempt from advertising in accordance with section 7.2 of this policy.

4.1 Direct appointment to a temporary or casual employee, apprentice or trainee to a permanent entry-level role

The appropriate delegate may direct appoint a temporary or casual employee, apprentice or trainee to a permanent entry-level role if all of the following requirements are met:

- the applicant has been appointed on a temporary or casual basis via a merit process (i.e. minimum two selection techniques, employees requiring placement check undertaken)
- the employee has been assessed as having demonstrated performance of a sufficiently high standard that advertising the role would be unlikely to yield a superior candidate.

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

4.2 Direct appointment of a temporary employee to tenured status at level to a permanent non entry-level role

The appropriate delegate may convert a temporary employee to tenured status at level if all of the following requirements are met:

- the temporary role must have been advertised according to the provisions of sections 9.1 to 9.5 of Directive 15/13 – Recruitment and Selection to enable other suitable applicants to be considered. The temporary employee is required to have demonstrated their merit in a competitive process.
- the temporary employee must have undertaken the duties of the role for a continuous period of not less than one year
- 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
• the suitability of the agency’s own registered and unregistered deployees has first been considered in accordance with provisions contained in the directive and policy relating to employees requiring placement.

4.3 Direct appointment to roles at a higher level

This section does not apply to senior executive or senior officer roles.

The appropriate delegate may, without advertising, direct 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 cases above, the employee:

• must have undertaken the role in question for a total of not less than one of the preceding two years and
• 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 level, the temporary role must have been advertised according to the provisions of sections 9.1 to 9.5 of Directive 15/13– Recruitment and Selection to enable other suitable applicants to be considered. The occupant of the role is required to have demonstrated their merit in a competitive process.

In relation to direct appointment to roles which have been reclassified, all of the following requirements must be met:

• the employee must be the substantive occupant
• reclassification must not be higher than one classification level above the employee’s substantive classification level.

An employee who has been appointed to a higher classification level via direct appointment is not eligible for further appointment under the provisions of that section in the event that the role in question is again evaluated at a higher classification level.

4.4 Reporting requirements for direct appointments

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.

5 Options for filling vacancies

Other recruitment options are available to reduce time to fill, costs and improve flexibility prior to advertising a vacancy. These options include:
5.1 Transfer/movement at level

Transfer/movement at level may be considered to fill a permanent vacancy as an alternative recruitment methodology when reasons exist which make it more appropriate to appoint through transfer/movement. The appropriate delegate may transfer a permanent employee to another permanent role at level in accordance with the relevant legislation/directives – refer to:

- section 133 to 134 of the *Public Service Act 2008* (extended to health service employees and modified through the *Public Service Regulation 2008*)
- section 78 of the *Hospital and Health Boards Act 2011*
- Directive 11/13 - Transfer within and between classification levels and systems (extended to Health Service employees via *Public service Regulation 2008*).

Transfer/movement at level can be considered prior to advertising or after the vacancy has been advertised, e.g. when considering the pool of applicants. Transfer/movement at level is at management discretion and may be considered on a case-by-case basis. Transfer/movement at level can proceed even if there are registered employees requiring placement.

Appointment across classification streams is possible when an employee who is seeking a transfer:

- has a current pay level which is within the minimum and maximum of the salary range of the classification level of the stream or classification system to which the employee is seeking to be transferred
- and
- has the relevant qualifications, and if applicable, registration and recency of practice, for appointment to the stream (as required by a relevant Certified Agreement or Award).

In addition, for employees who are engaged under the District Health Services Employees Award – State 2012:

- when no equal or higher classification is deemed appropriate, the employee is to maintain a personal classification equal to the paypoint from which they were appointed. The personal classification is to be maintained until the employee obtains a higher position through a merit selection process or until the Award or Certified Agreement rate equals or surpasses the personal classification.
- an employee is then to advance when applicable, to the next available increment in the classification level after 12 months, or on the due date of their next increment, whichever occurs sooner.

Existing permanent employees can be considered for transfer/movement 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).

Transfers/movement at level are assessed on the basis of suitability in the same way that employees requiring placement are considered (refer to section 4.2 of this policy). A merit process is only required when there is more than one transfer/movement at level application.

A permanent employee from other Queensland Government departments or agencies can also be considered for transfer/movement at level.

Refer to the Transfers and Movements in Queensland Health Guideline for further information.
5.2 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, for periods of up to 12 months and may or may not be subject to a merit process – refer to the Secondments HR Policy B42 for further information.

5.3 Staff interchange/Work Arrangements

Formal staff interchange and work 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 183 and 184 of the Public Service Act 2008(extended to health service employees through the Public Service Regulation 2008). The interchange agreements are to outline the arrangements applying to the staff interchange and work arrangements and ensure the continuity of indemnity and entitlements for the Queensland Health employees.

Part III – Advertising

6 Advertising

6.1 Advertising vacancies

Advertising requirements differ according to the nature of the vacancy, i.e. permanent or temporary, entry-level or non-entry-level. For any permanent vacancies or vacancies of 12 months or longer, existing registered suitable employees requiring placement are to be considered for deployment or redeployment through the active matching process conducted by Queensland Health.

All vacancies must be advertised in accordance with Directive 15/13 – Recruitment and Selection and the provisions outlined below. Approval of non-standard advertising is the responsibility of the delegate.

Media advertising outside of the standard corporate templates requires Department of Premier and Cabinet approval. Significant advertising campaigns over $50,000 for any recruitment activity also require Department of Premier and Cabinet approval. Requests for these activities are to be submitted through local marketing/media units.

The classification level used for advertising an entry-level role must be consistent with the classification level determined during evaluation. A role cannot be evaluated at more than one classification level therefore roles are to be advertised in accordance with the work value attributed to their role under the Job Evaluation Methodology System (JEMS) e.g. AO1 or AO2, OO1 or OO2, not AO1/AO2 or OO1/OO2.

6.1.1 Expression of interest (EOI)

An 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 a referee report. 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.

The appropriate delegate is to be aware 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-entry-level role
- extension of engagement in a non-entry-level vacancy beyond a 12 month period.

The appropriate delegate is to be aware of and comply with the requirements of local in-house relief policies prior to advertising EOI for administration staff.

6.1.2 Temporary vacancies – entry-level roles

Temporary entry-level 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) 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/s, or Hospital and Health Service (HHS)/Department of Health (DoH)/Commercialised Business Unit (CBU).
- 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, where applicable, (i.e. professional registration) are to be met.

6.1.3 Temporary vacancies – non entry-level roles

Temporary non entry-level 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) 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/s, or HHS/DoH/CBU.
- 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, where applicable, (i.e. professional registration) are to be met.
Consecutive non-entry-level temporary appointments are not to exceed 12 months unless the role has been externally advertised.

Temporary non entry-level vacancies of more than 12 months are to be advertised in accordance with the same requirements for permanent non entry-level vacancies (refer section 7.1.4 of this policy).

Recruiting managers are to be aware of and comply with the requirements of local in-house relief policies prior to advertising EOI for administration staff.

6.1.4 Permanent vacancies – entry-level roles

External advertising for entry-level roles 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 entry-level permanent roles:

- The recruiter is to ensure that existing registered suitable employees requiring placement are considered for deployment or redeployment through the active matching process.
- If no suitable employees requiring placement are identified, the recruiter can invite applicants from temporary or casual pools to apply for permanent vacancies.
- 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.
- Other sources for entry-level recruitment can be through:
  - the Queensland Government SOA which is only applicable to AO1 and AO2 entry-level roles (refer Queensland Government Standing Offer Arrangement (SOA) No. 200)
  - Queensland Health clinical talent pools via local recruitment hubs (for clinical entry-level positions).
- If external advertisement (outside Queensland Health) of entry-level vacancies has occurred, appointments are to be notified in the Health Services Bulletin and/or Government Gazette as appropriate.
- For filling of operational stream entry-level roles, the OO selection tools approved and issued by the Director-General are to be used.

6.1.5 Vacancy advertising – general (permanent non entry-level roles)

In addition to the requirements in Directive 15/13 – Recruitment and Selection, all roles (except targeted vacancies) will be advertised on the Work For Us website.

Vacancies are not to be routinely advertised in state and national print media.

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.

Advertised applicant pools can be supplemented by other means for the purpose of filling the vacancy.

The use of existing talent pools to fill a vacancy without advertising require appropriate HR delegate and financial delegate approval, e.g. transfer/movement at level, EOIs, employees
requiring placement, Queensland Health clinical talent pools and targeted and specified vacancies.

6.1.6 Vacancy advertising – oral health roles

The Dental Board of Australia has determined only those persons registered as ‘oral health therapists’ can use this title. When a vacancy occurs, the HHS is to determine whether they are recruiting for an oral health therapist or a dental therapist position.

A role description for an oral health therapist must state that registration as an oral health therapist is a mandatory requirement.

A role description for a dental therapist is to state that while a degree or equivalent is preferred, persons with a certificate qualification will also be considered.

When the advertising of a dental therapist role does not produce a suitable candidate, the role may be modified and re-advertised as an oral health therapist.

Queensland Health does not employ health practitioners in roles titled ‘dental hygienist’. There are no provisions in Queensland Health’s industrial instruments to facilitate the employment of dental hygienists and no role is to be advertised as such.

6.2 Exemptions from advertising

In addition to the exemptions from advertising listed in Directive 15/13 – Recruitment and Selection, 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 Queensland Public Health Sector Certified Agreement (No. 8) 2011 (EB8)).

- **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. Prior to approval, consultation and agreement must be reached with the Chief Human Resource Officer HR Services Branch for positions within the Department of Health, or the Health Service Chief Executive for positions in a Hospital and Health Service.

- **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. Prior to approval, consultation and agreement must be reached with the Chief Human Resource Officer HR Services Branch for positions within the Department of Health or the Health Service Chief Executive for positions in a Hospital and Health Service.

* When determining exemptions from advertising for clinical roles and non-clinical roles, the delegate must consider the justification for exemption in accordance with section 9.7 of Directive 15/13 – Recruitment and Selection.
Specific exemptions approved by the Public Service Commission include:

<table>
<thead>
<tr>
<th>Assistants in nursing, enrolled nurses and nursing officer grade 5 roles</th>
<th>Queensland Health Nurses and Midwives Award – State 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group HBEA12 and group HBEA10</td>
<td>Relevant Queensland Health Building, Engineering &amp; Maintenance Services Certified Agreement (No. 5) 2011, provided these roles maintain their relativity with the entry-level roles under wage group C12 of the Engineering Award - State 2012 and wage group BW1 (a) under the Building Trades Public Sector Award - State 2012 respectively.</td>
</tr>
<tr>
<td>OO3</td>
<td>Operational officer level 3 - trade equivalent non-supervisory.</td>
</tr>
<tr>
<td>Medical interns at salary level RMO1 (L1) intern</td>
<td>District Health Services Senior Medical Officers’ and Resident Medical Officers’ Award - State 2012.</td>
</tr>
<tr>
<td>AO1 - AO2 OO1 - OO2 TO1 - TO2 PO1 - PO2</td>
<td>All considered entry-level. Note: There are no entry-level roles for HP.</td>
</tr>
</tbody>
</table>

6.3 Recurring vacancies

In addition to the requirements in Directive 15/13 – Recruitment and Selection, 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 as 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.

6.4 Vacancy advertising – targeted

Targeted advertising limits the invitation to apply for a vacancy to, at minimum, public service employees who are currently employed by the agency. Current employees include employees seconded from other agencies as at the closing date of the vacancy, and employees of the agency who are on secondment to other agencies. The invitation may also be extended to employees of other agencies or selected external candidates, for example members of a particular community targeted under a regional employment initiative.

Agencies are bound by codes of conduct to uphold respect for persons and economy and efficiency principles. The appropriate delegate may approve targeted advertising 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.

Advertising which targets employees of agencies covered by this policy must, at minimum, comply with the advertising requirements under 9.1 to 9.5 of Directive 15/13 – Recruitment and Selection. The vacancy advertisement must be posted under “Targeted vacancies” on the Smart Jobs and Careers website and must clearly state the agencies whose employees are invited to apply.

The appropriate delegate may determine the means by which an invitation to apply will be extended to external candidates.

Only employees who are covered by the invitation to apply are eligible to appeal a promotion decision.

6.5 Vacancy advertising – specified

Specified advertising is an invitation for specific permanent employees or groups of permanent employees to apply for particular vacancies. The aim of specified advertising is to minimise the potential displacement of existing employees or disruption to the provision of services resulting from organisational change.

Specified advertising requires written agreement between the appropriate delegate and the relevant industrial organisation of employees. A specified advertising process which does not have the written agreement of the relevant industrial organisation of employees is a breach of this policy and all promotions made under such a process are invalid.

A copy of 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.

Part IV – Process applications

7 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 which 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.

Open merit does not apply to the appointment of an employee requiring placement. A suitability assessment is required (refer section 4.2 of this policy).
8 Process applications

8.1 Assessment of applicants submitted by a recruitment agency

It is at the discretion of the panel whether they accept applications submitted on behalf of an applicant by a recruitment agency. Selection panels are able to respond to the recruitment agency advising that they are not accepting applications submitted in this manner. Should the panel wish to consider the applicant, they need to be aware they are agreeing to the recruitment agency terms and conditions and may be liable for the payment of a placement fee should the applicant be successful.

8.2 Selection panel

The panel is to be comprised of at least two members. One member is to be external to the immediate work area\(^1\) 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 must be trained in conducting recruitment and selection activities.

When there are a number of applicants from any one particular 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 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.

8.3 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 appropriate delegate and is to be a Queensland Health employee.

8.4 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.

\(^1\) Please seek clarification from your local people and culture/HR unit if unsure about ‘external to the immediate work area’
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 firsthand 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 and 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.

8.5 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 appropriate 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/appropriate 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.

8.6 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 to the relevant Reasonable Adjustment HR Policy for further information.

Part V – Selection

9 Selection strategy

9.1 Selection strategy

The selection panel is to implement a selection strategy that directly relates to the key responsibilities and 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 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 responsibilities 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 15/13 – Recruitment and Selection and be sufficient to assess the merits of applicants. It is essential that the selection strategy be applied equally, consistently and fairly.

### 9.2 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)
- 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/HR unit. Refer to the Queensland Health Recruitment and Selection Guidelines for further information on selection techniques.

### 9.3 Assessment process

The panel is to determine the form of assessment and set the standards for all assessment related activities. Qualitative or quantitative methods of assessment may be used. 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.

### 9.4 Shortlisting

Shortlisting 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, the panel should verify the 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.

9.5 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 shortlisting, 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.

9.6 Close assessment

Following shortlisting, if determined necessary by the panel, 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.

10 Referee checking

The following requirements for referee checking are in addition to the requirements outlined in Directive 15/13 – Recruitment and Selection:

Use of referee reports

- 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 12 of this policy). 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.

Identifying referees

- 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.
• A panel member can act as a referee for an applicant (refer section 9.4 of this policy 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/HR unit before this action is taken.

Conducting referee checks
• 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 HR Services Branch 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.

11 Medical practitioner internet search and referee checking

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.

11.1 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. 3) 2012
• medical practitioners engaged through recruitment agencies
• contracted medical staff (e.g. independent contractors)
• medical practitioners engaged as locums.

11.2 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, as contractors or as 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 officer’s 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
• Title (i.e. 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 (EDMS) and kept on the medical officer’s personnel 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 EDMS to the Health Service Chief Executive immediately.

The EDMS 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 Health Service Chief Executive and Credentialing Committee
- ensuring a copy of the internet search is kept on the medical officer’s personnel file
- ensuring the outcomes of any investigations are recorded on the medical officer’s personnel file
- ensuring the internet search is completed prior to the medical officer commencing employment with Queensland Health.
- ensuring the applicant is afforded natural justice in the event of any identified adverse information.

11.3 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 delegate. The referee checks are to be relevant to the role in question.

11.4 Professional registration 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.

12 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 10.1 of this policy. 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.

12.1 Selection report

The selection report provides all essential information to the appropriate 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 appropriate 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 shortlisting and a qualitative summary statement of each shortlisted 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 (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 13.2 of this policy)
- 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 appropriate 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 appropriate delegate and/or their local people and culture/HR unit.

12.2 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.
- skills, knowledge and abilities of the applicant.
- 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 appropriate delegate. The supporting evidence to justify such a recommendation is to be included in the selection report for the appropriate delegate’s 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 appropriate 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/HR 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 C59 for further information).

12.3 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 section 7.3 of this policy for further information).

Part VI - Pre-appointment

13 Pre-appointment

13.1 Delegate responsibilities

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

13.2 Professional registration 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 and credentials. Prior to permitting a person to commence any clinical duties, the supervisor or manager is to sight proof of the health professional’s registration with AHPRA (or a certified copy of their qualification/s for non-AHPRA registered professions), and match the name on the registration certificate to other documentation submitted, and independently verify that the registration submitted is current. Certified copies of qualification/s and registration must be obtained to submit with commencement of duty forms.
The manager is to also confirm that the qualification/s and registration are 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).

13.3 Voluntary early retirement (VER), Voluntary Separation Program (VSP) and Voluntary Redundancy (VR) status checks

Prior to making an appointment, it is the chairperson’s responsibility to check the VER, VSP and VR 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 their local people and culture/HR unit about the need to potentially recover funds from the applicant. For more information refer to Directive 11/12 – Early Retirement, Redundancy and Retrenchment.

13.4 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 - refer to Citizenship, Residency and Visas and Immigration HR Policy B46.

13.5 Proof of identity

All Queensland Health employees are to provide proof of identity prior to commencing employment. The selection panel is to seek suitable proof of identity and forward certified copies to the local recruitment services unit. Proof of identity documentation is to provide satisfactory proof of a person’s:

- name
- date of birth
- signature.

The preferred form of proof of identity includes a photograph and signature. Suitable proof of identity documents are:

- current driver’s licence/proof of age card or current passport, including photograph and signature

or a combination of at least two of the following:

- birth certificate (or extract)
- marriage certificate
- Australian naturalisation, citizenship or immigration documentation
- government financial benefit card
- credit card, account card or passbook from a bank, building society or credit union (showing name and signature)
- Australian student identification card
- recent income tax assessment
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.

13.6 Pre-employment checks

An offer of employment cannot be made until the appropriate pre-employment checks are completed. The selection panel (with the applicant’s written consent) is responsible for requesting pre-employment 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 pre-employment 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 pre-employment check at the time of interview. Pre-employment checks are only to be conducted on the recommended applicant.

Refer to the Criminal History Checking HR Policy B40, or the local HR/People and Culture unit for further information.

13.7 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 Principal House Officer (PHO) positions in the following specialities:

- Anaesthetics
- Obstetrics and Gynaecology
- General medicine
- Emergency medicine
- Mental health
- Intensive care
- Paediatrics
- General surgery
- Orthopaedics.
Offers of employment can be made subject to the completion of a PESCI with a ‘suitable for employment’ outcome.

Refer to http://qheps.health.qld.gov.au/rapts/team/placement.htm or contact the RAPTS Program, Office of the Principal Medical Officer for further information.

13.8 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 website are required to declare their CV/resume is true and correct at the time their application is lodged.

When a health professional is employed by any other means, it is the responsibility of the appropriate 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

13.9 Hepatitis B vaccination

Hepatitis B vaccination or proof that an individual is not susceptible to hepatitis B is a condition of employment for all Queensland Health staff who have direct contact with patients or who in the course of their work may be exposed to blood/body fluids or contaminated sharps.

It is the responsibility of the chairperson/line manager to ensure the applicant meets the hepatitis B vaccination requirements of the position. Documentary evidence of hepatitis B vaccination or that an individual is not susceptible to hepatitis B is to be collected from the applicant by the chairperson prior to any offer of appointment to such a position.

Evidence of vaccination or proof an individual is not susceptible to hepatitis B can be provided by a:

- letter from a medical officer, infection control practitioner, or vaccine service provider with details of vaccine given or a statement that the individual is not susceptible to hepatitis B or
- copy of vaccine record book with details of vaccine given or
- pathology testing result showing a positive anti-HBs (i.e. anti HBs >10IU/L).

If the chairperson/line manager requires clarification of evidence of vaccination or immunity submitted by the applicant, they can contact their local infection control practitioner/nurse.

Refer to the Queensland Health Guideline for the Vaccination of Healthcare Workers, or contact the Centre for Healthcare Related Infection Surveillance and Prevention (CHRISP) for further information.

13.10 Employment of school-aged or young children

Employers must not require or permit a school-aged or young child to perform work unless the employer has:
• a parent’s consent form for the school-aged or young child
or
• if the child is a school-aged child and does not have a parent’s consent form, a special circumstances certificate authorising the school-aged child to perform work when the school-aged child is not required to attend school.

Refer to section 10 of the *Child Employment Act 2006* for further information.

**Part VII – Appointment**

14 **Appointment**

14.1 **Verbal appointment notification**

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

14.2 **Other notifications**

It is the responsibility of the panel chair to verbally advise the other applicants who progressed past the shortlisting stage that they were unsuccessful. In addition, the chair is to send the correct documentation to the local recruitment services unit who are to notify all unsuccessful applicants in writing.

When applicable, an appeal period of 21 days commences from the date that the appointment is published in the relevant publication. 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.

All senior executive and senior officer appointments from an advertised vacancy and all appealable non entry-level appointments must be published in the Health Services Bulletin (all QH /HHS roles), and the Queensland Government Gazette (public service roles only) when applicable. Refer to the *Directive - 19/10 Appeals* and your local recruitment services unit for further information.

14.3 **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 the local recruitment services unit 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 13.2 of this policy).
Where relevant, the appointment letter is to include details of the probationary period. This is essential when a probationary period is to be longer than three months.

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 Offer form to the local recruitment services unit.

The selection report signed by the appropriate delegate is the authorisation for appointment and for advising the local recruitment services unit 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.

14.4 Acceptance of offer

The appointment letter is to contain a request to the applicant to sign and return the Acceptance of Offer form. Upon receipt of an appointment letter, a prospective employee may take the following action:

- sign the Acceptance of Offer form and return it to the local recruitment services unit
- seek additional information regarding the offer of employment
- refuse the offer by indicating non-acceptance on the Acceptance of Offer form.

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

Where probation is for a period longer than three months, it is essential the applicant’s written acceptance is received prior to their commencement.

Acceptance of offer does not apply to Casual engagements.

14.5 Timing of offer

The local recruitment services unit is to advise the panel chair if a reply has not been received within seven calendar days of sending the appointment letter.

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 the local recruitment services unit regarding the outcome of the contact with the appointee and any further action required (e.g. sending an amended appointment letter).

14.6 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 HHSs or the Department of Health 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

15 Post appointment

15.1 Post selection feedback

Applicants are to be advised in the unsuccessful letter that they can request feedback from a panel member. Feedback is to be provided to any applicant who seeks it. 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 shortlisting 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 at 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.

15.2 Documentation and confidentiality

All documentation relating to recruitment and selection exercises is to be held by the local recruitment services unit. 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.

Queensland Health is required to report each financial year to the PSC Chief Executive the number, type and classification level of the following appointments:

- targeted vacancies
- specified vacancies
- exemptions from the advertising requirements of general or targeted vacancies where advertising would demonstrably result in significant detriment to the achievement of service delivery outcomes, or unfair treatment of an employee
- direct appointment to roles at a higher level
- appointment of a temporary employee to permanent status at level.

For audit and reporting purposes, these records are to be retained for at least three years. In relation to exemptions from advertising, the record is also to include the detriment to business outcomes or unfair treatment which formed the basis for the decision to exempt the vacancy from advertising.

Definitions:

<p>| Agency | A department or public service office as defined in the Public Service Act 2008. |
| Curriculum vitae (CV)/resume | A summary of skills, experience and education provided by the applicant. |
| Deployee | An employee requiring placement who has been appointed at level into a public sector vacancy, either within Queensland Health, or to another |</p>
<table>
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<tr>
<th><strong>Direct appointments</strong></th>
<th>Refer to section 5 of this policy.</th>
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| **Entry-level roles** (also known as base grade level positions) | Roles defined as:  
• 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  
Note: There are no entry-level roles for HP. |
| **Expression of interest (EOI)** | Refer to section 7.1.1 of this policy. |
| **Externally advertised** | Advertised (as a minimum) on the Smart Jobs and Careers, and Work For Us website. |
| **Identified role** | A position in relation to which it is lawful to discriminate in favour of a person possessing one or more of the attributes set out in s. 7 of the Anti-Discrimination Act 1991, e.g. gender, race, age, impairment, sexuality, religious belief or religious activity, for any of the purpose contained in section 25 of that Act. |
| **Identical or similar role** | A role which shares the same title, remuneration, classification level and role description as another role. |
| **Job evaluation methodology system (JEMS)** | 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 8 of this policy for definition of merit. |
| **Moderation** | 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 (entry-level) and externally (non-entry-level) 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. |
| **Promotion** | Employment of a public service officer at a higher level other than temporarily (as per schedule 4 of the Public Service Act 2008). |
| **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
<table>
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<tr>
<th><strong>Facilities or equipment etc.</strong></th>
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<td><strong>Recurring vacancy</strong></td>
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<td><strong>Vacancy</strong></td>
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<td><strong>Voluntary early retirement (VER)</strong></td>
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<td><strong>Voluntary redundancy</strong></td>
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## History:

### June 2014
- Policy formatted as part of the HR Policy Simplification project.
- Policy amended to:
  - include sections on targeted advertising, specified advertising and direct appointment that were removed from superseded Directive 01/10 – Recruitment and Selection
  - incorporate Identified (Lawful Discrimination) Positions HR Policy B58 into section 2.1.1 and Schedule One
  - incorporate Transfers in Queensland Health HR Policy B41 into section 6.1
  - summarise secondment information in section 6.2
  - incorporate Staff Interchange HR Policy G7 in section 6.3
  - update advertising requirements in section 7.1 and 15.2
  - update requirements for exemption for advertising in section 7.2
  - summarise qualitative and quantitative methods of assessment in section 10.3
  - add Voluntary Redundancy status checks to section 14.3
  - add pre-existing injury/illness disclosure requirement to section 14.6
  - summarise citizenship/visa requirements checks in section 14.4
  - update references, naming conventions and definitions section.

For history prior to February 2014, refer to the December 2012 version of this policy.

### Previous
- 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
- Transfers in Queensland Health HR Policy B41(QH-POL-246)
- Identified (Lawful Discrimination) Positions HR Policy B58 (QH-POL-151)
- Staff Interchange HR Policy G7 (QH-POL-234)
Recruitment and Selection– Schedule One
Identified (Lawful Discrimination) Roles

The following information is provided as the minimum mandatory standard practice, procedure or process to enable satisfactory compliance with this Queensland Health HR policy.

Local guidelines/procedures may be developed to facilitate implementation of this policy. Any local guidelines/procedures must be consistent with this policy and schedule and ensure employee entitlements continue to be met.

1 Identified roles requirements and processes

Appointments to identified roles within Queensland Health are to be in accordance with the recruitment and selection requirements contained in Directive 15/13 - Recruitment and Selection and this policy. Additional requirements include:

1.1 Identifying the role

An application for an identified position is to be submitted via the identified role template to the appropriate delegate with a copy of the draft role description.

There is to be sound justification for designating an identified role. The particular attribute required (as listed in section 7 of the Anti-Discrimination Act 1991 (the Act)) is to be identified and supported by documentary evidence or information insisted on the possession of a particular attribute.

An identified role can be justified on the basis of a combination of factors.

1.2 Advertising

A targeted advertising strategy is to be developed to attract a suitable pool of applicants who possess the required attribute/s applicable to the identified role.

As a minimum, identified vacancies filled via open merit selection are to be advertised on the Smart Jobs and Careers website. Any advertisement for an identified role is to state the vacancy is an identified role and the mandatory attribute/s required for appointment.

When advertising an identified role in the press, standalone advertisements are to be used. This enables a targeted advertisement to be written. Consideration is to be given to targeted advertising through media and networks likely to attract applicants with the required attribute/s.

The advertisement is to make potential applicants aware of the following:

- the role is identified
- the attributes for identifying the role
- the relevant subsection/s of section 25, 104 or 105 of the Act that are relied upon as the basis for lawful discrimination
- the justification for identifying the role
- how the possession of the identified role’s attribute will be confirmed.

An example of a suitable statement for an identified role under a genuine occupational requirement could be:
Under section 25 of the Act, there is a genuine occupational requirement for the incumbent to be indigenous to the Torres Strait Islander community.

1.3 Selection methodology

The selection process is to be based on a fair and transparent assessment of the applicants’ knowledge, skills, abilities, qualifications, aptitude, experience and personal qualities against the requirements of the position. Selection tools are to be clearly relevant to the responsibilities and requirements of the role.

At least one member of the panel is to possess the attribute that is the basis for the identified role.

1.4 Assessing attributes

Verification that an applicant has the relevant attribute is not necessary when it is evident to the panel. The attribute of race, or cultural background, can be assessed by a reference from an elder or recognised leader from that background if required.

The preferred applicant is to possess the attribute in order to be recommended for appointment to an identified role. The attribute is to be assessed during the selection process in a similar way to any mandatory qualification.

For further information refer to the PSC Guideline: Evidence of attribute – Aboriginal and/or Torres Strait Islander identified roles.

1.5 Backfilling/temporary replacement

When the incumbent of an identified role needs to be backfilled for a period of leave or short-term secondment, it may be reasonable in exceptional circumstances to employ a person who does not possess the relevant attribute if:

- it assists the continuity of a critical program or activity which could not otherwise be continued if the position was not filled
- the duration of the backfilling/temporary replacement does not exceed three months
- the person who does not possess the attribute does not perform 100% of the duties of the position
  or
- a person with the relevant attribute is not available when filling the vacancy.

1.6 Delegate approval and reporting

If required, the appropriate delegate can seek further advice from their local HR/People and Culture unit, Legal Unit, or the Anti-Discrimination Commission of Queensland on the grounds for designating a role as identified (the Commission’s advice is not binding in the case of a complaint to the Anti-Discrimination Tribunal).

Under section 113 of the Act, Queensland Health can formally request the Anti-Discrimination Tribunal of Queensland to grant an exemption from relevant sections of the Act. This means the Commission is not to accept a complaint of unlawful discrimination that is within the scope of an exemption granted by the Tribunal. This exemption can apply for a maximum of five years.

Alternatively, under section 228 of the Act, Queensland Health can formally request the Anti-Discrimination Commission of Queensland seek an opinion from the Anti-Discrimination Commission.
Tribunal, as to whether or not the exemptions contained in sections 25, 104 or 105 of the Act are to apply. This means the Commission is not to accept a complaint of unlawful discrimination against Queensland Health if they have acted within the scope of the Tribunal’s findings.

If a role or group of roles with the same role description is approved by the appropriate delegate to be designated as identified, a record is to be kept for reference in the case of future vacancies. The approval for a role or group of roles to be designated as identified remains current until the role description is reviewed.

Each financial year, Queensland Health is to keep a record of the number, type and classification level of roles approved as identified in accordance with this policy. These records are to be retained until the role is reviewed.

1.7 Appeals and grievance process

A promotion appeal may be lodged with the PSC in relation to recruitment and selection processes as specified in accordance with part 1 of Directive 19/10 – Appeals.

Each financial year Queensland Health is to keep a record of the number, type and classification level of identified roles that are appealed in accordance with the above directives. These records are to be retained for 12 months from the date the appeal is lodged.

During the selection process, and under section 7 of the Act, an applicant may be able to raise the inclusion of an attribute of an identified role with the Anti-Discrimination Commission of Queensland. Conditions under which complaints are heard and the process to follow are outlined in the Act. The Anti-Discrimination Commission of Queensland can provide advice to Queensland Health employees about their complaint rights and processes.