

Recruitment and Selection

Policy Number: B1 (QH-POL-212)

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Purpose: The purpose of this policy is to specify the mandatory requirements for recruitment and selection specific to Queensland Health vacancies in addition to Public Service Commission (PSC) Directive 15/13 – Recruitment and Selection (extended to Queensland Health via the Public Service Regulation 2018) - <https://www.qld.gov.au/gov/documents/directive/1513/recruitment-and-selection>.

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

The recruitment and selection principles in this policy apply to the filling of roles at senior officer (SO), district senior officer (DSO) level and above. The Recruitment and Capability team, Human Resources Branch, must be contacted to discuss additional requirements for all 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.

This policy does not apply to Queensland Ambulance Service employees. Instead, Queensland Ambulance Service employees are to refer to their local policy/procedure.

Delegation: The 'delegate' is as listed in the relevant Department of Health Human Resource (HR) Delegations Manual or Hospital and Health Services Human Resource (HR) Delegations Manual, as amended from time to time.

Legislative or other authority:

- *Affirmative Action (Equal Employment Opportunity for Women) Act 1986 (Cth)*
- *Aged Care Act 1997 (Cth)*
- *Age Discrimination Act 2004 (Cth)*
- *Anti-Discrimination Act 1991*
- *Australian Human Rights Commission Act 1986 (Cth)*
- *Child Employment Act 2006*
- *Disability Discrimination Act 1992 (Cth)*
- *Hospital and Health Boards Act 2011*
- *Human Rights Act 2019*
- *Industrial Relations Act 2016*
- *Information Privacy Act 2009*
- *Multicultural Recognition Act 2016*



- *Public Service Act 2008*
- Public Service Regulation 2018
- *Racial Discrimination Act 1975 (Cth)*
- *Right to Information Act 2009*
- *Sex Discrimination Act 1984 (Cth)*
- *Workers' Compensation and Rehabilitation Act 2003*
- *Working with Children (Risk Management and Screening) Act 2000*
- Nurses and Midwives (Queensland Health and Department of Education) Certified Agreement (EB10) 2018
- Medical Officers' (Queensland Health) Certified Agreement (No.5) 2019 (MOCA5)
- Queensland Public Health Sector Certified Agreement (No. 9) 2016 (EB9)
- Queensland Health Building, Engineering and Maintenance Services Certified Agreement (No. 6) 2016
- Health Practitioners and Dental Officers (Queensland Health) Certified Agreement (No.2) 2016
- Queensland Government Standing Offer Arrangement (SOA) No. 200
- PSC Directive 03/17 – Appeals
- PSC Directive 01/17 – Conversion of casual employees to permanent employment
- PSC Directive 04/18 – Early Retirement, Redundancy and Retrenchment
- PSC Directive 7/11 – Employment Screening
- PSC Directive 15/13 – Recruitment and Selection
- PSC Directive 17/16 – Supporting employees affected by workplace change
- PSC Directive 08/17 – Temporary employment
- PSC (IR) Directive 10/16 – Transfer within and between Classification Levels and Systems
- PSC Directive 05/12 – Workforce Establishment Management Program
- 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
- Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016-2027
- Queensland Health Workforce Diversity and Inclusion Strategy 2017-2022
- Nursing and midwifery classification evaluation methodology HR Policy B7 (QH-POL-179)
- Health Professionals Registration: Medical officers, nurses, midwives and other health professionals HR Policy B14 (QH-POL-147)
- Job Evaluation – Roles covered by the classification and remuneration system 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)
- Employment screening HR Policy B40 (QH-POL-122)
- Secondment HR Policy B42 (QH-POL-224)
- Citizenship, Residency, Visas and Immigration HR Policy B46 (QH-POL-250)
- Conversion of temporary employees to permanent status HR Policy B52 (QH-POL-119)
- Health practitioners – Job evaluation HR Policy B68 (QH-POL-194)
- Flexible working arrangements HR Policy C5 (QH-POL-242)
- Determining Salary Levels Upon Appointment HR Policy C59 (QH-POL-245)
- Transfer and Appointment Expenses HR Policy D4 (QH-POL-245)

- Workplace conduct and ethics HR Policy E1 (QH-POL-113)
- Conflicts of interest guideline (QH-GDL-113-1)
- Anti-discrimination and vilification HR Policy E2 (QH-POL-101)
- Employee Complaints HR Policy E12 (QH-POL-140)
- Diversity and inclusion HR Policy G2 (QH-POL-132)
- 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)
- Queensland Health Implementation Standard for Vaccination of Healthcare Workers (QH-IMP-321-9)
- Guideline: Disclosure of pre-existing conditions under the Workers Compensation and Rehabilitation Act 2003 (QH-GDL-212-1)
- Guideline for Transfers and Movements in Queensland Health
- Visa Entitlement Verification Online (VEVO) guideline
- Developing Role Descriptions Guideline
- Role description template
- Identified (lawful discrimination) role template

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1 Recruitment and selection in Queensland Health

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

The appropriate delegate is responsible for authorising and approving decisions related to recruitment activities and appointments. A delegate can elect to be on the selection panel, however delegations for all decisions related to the recruitment will shift up to the delegate’s line manager (the ‘one up’ rule).

This policy sets out additional requirements and standard processes specific to Queensland Health and must **be read in conjunction with PSC Directive 15/13 – Recruitment and Selection** - <https://www.qld.gov.au/gov/documents/directive/1513/recruitment-and-selection>.

Part I – Workforce planning and job design

2 Workforce planning and job design

The [PSC 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.

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

- when the role key accountabilities/duties change
- when a vacancy occurs in that position (prior to advertising)
- when organisational change significantly impacts on the role.

Organisational cultural fit and/or specific personal qualities are to be articulated in the role description to ensure merit is transparently and appropriately assessed. When designing a job or reviewing a role description, managers should consider how role design embeds and encourages workforce flexibility, diversity and inclusion. Once reviewed, and if warranted, e.g. the role changes significantly, a role evaluation should then occur.

2.1 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 sections 25, 104 and 105 of that Act. Refer to Attachment One of this policy for the requirements and processes for identified positions within Queensland Health.

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.

Classification Stream	Job/work level evaluation methodology
Administrative, Operational, Technical and Professional	<p>Job Evaluation Management System (JEMS) is the standard generic role evaluation methodology used in the Queensland Government.</p> <p>For more information on the JEMS process, refer to job evaluation roles covered by the Job Evaluation – Roles covered by the classification and remuneration system HR Policy B29.</p> <p>Operational stream – additional information</p> <p>The Operational Services Manual identifies the various methods to be used for supervisory, managerial 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.</p> <p>Professional and technical streams – additional information</p> <p>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.</p>
Building and engineering	Classification levels are determined by competency levels contained under the relevant Queensland Health Building, Engineering and Maintenance Services Certified Agreement (No.6) 2016.
Dentists and Dental Specialists	Refer generic level statements outlined in Schedule 4 of the Health Practitioners and Dental Officers (Queensland Health) Award – State 2015.
Health practitioner	Health practitioner classification levels 1 to 8 are evaluated through work level statements contained within the Health Practitioners and Dental Officers (Queensland Health) Certified Agreement (No. 2) 2016. Refer to Health practitioners – Job evaluation HR Policy B68.
Medical	General medical position classification definitions are contained within the Medical Officers (Queensland Health) Award – State 2015 and the Medical Officers' (Queensland Health) Certified Agreement (No.5) 2018 (MOCA5).

Nursing and midwifery	The Nursing and midwifery classification evaluation methodology HR Policy B7 sets out the process to support the evaluation and re-evaluation of nursing and midwifery positions. Nursing and midwifery role evaluation is based on Schedule 2 of the Nurses and Midwives (Queensland Health) Award – State 2015, which contains generic level statements of the accountability/responsibility of nursing and midwifery roles from Grade 1 to Grade 13, across five domains of practice.
Senior Officer/District Senior Officer Senior Executive Service/Health Executive Service	Senior officer and executive service roles must be evaluated by Mercer Pty Ltd or Queensland Shared Services (Shared Service Agency) unless the specific use of these authorised service providers is waived by the relevant delegate for the purposes of JEMS evaluation. In instances where the specific use of Mercer Pty Ltd or Queensland Shared Services (Shared Service Agency) is waived by the relevant delegate, senior officer and executive service roles must be JEMS evaluated in accordance with the other provisions of the Job Evaluation – Roles covered by the classification and remuneration system HR Policy B29.

Part II – Filling vacancies

3 Employees affected by workplace change

Prior to advertising any permanent vacancies or temporary vacancies of greater than 12 months (with the exception of clinical and/or frontline roles), employees affected by workplace change must be considered for placement in accordance with [PSC Directive 17/16 – Supporting employees affected by workplace change](#).

Clinical and/or front-line roles are to be checked in the Vacancy Advertising Database for Effective Recruitment (VADER) and the panel chair will be alerted to any matches in the same way as non-frontline roles.

Under the [NDIS workforce strategy \(2015–2019\)](#), additional vacancies, **including specified frontline roles** of at least 12 months duration, have been identified under Section 12.1 of PSC Directive 17/16. Impacted locations will be progressively advised of the vacancies that must be referred for consideration of displaced employees as the strategy is implemented.

Refer to the Employees requiring placement HR Policy B36 for further information regarding employees affected by workplace change.

4 Transfer/movement at level

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 affected by workplace change.

Transfer/movement at level requires the employee being transferred to be permanent at that level, or meet eligibility for transfer across classification streams, but not necessarily the same employment status e.g. a full-time employee may seek transfer/movement at level to a part-time role.

Refer to [Transfers and movements in Queensland Health Guideline](#) for further information.

5 Secondments

Refer to the Secondments HR Policy B42 for further information.

6 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.

Staff interchange arrangements require an interchange agreement to outline work arrangements and ensure the continuity of indemnity and entitlements for Queensland Health employees. Refer to sections 183 and 184 of the *Public Service Act 2008* (extended to health service employees through the Public Service Regulation 2018).

7 Direct appointments

Applications for all categories of direct appointments are to be considered on a case-by-case basis. At the **discretion** of the appropriate delegate, direct appointment may be approved in accordance with sections 7.1 to 7.3 of this policy or to positions that have been exempt from advertising in accordance with section 8.2 of this policy.

In all situations of direct appointment, consideration is to be given to improving and retaining the workforce diversity of the immediate team.

This section does not apply to a health practitioner eight (HP8) classification level appointment. All appointments to the HP8 classification level will be by advertisement and merit selection process.

7.1 Direct appointment of 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 affected by workplace change 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.

7.2 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 PSC Directive 15/13 – Recruitment and Selection and the temporary employee demonstrated their merit in the open merit 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 employees has first been considered in accordance with provisions contained in the PSC directive and policy relating to employees affected by workplace change.

7.3 Direct appointment to roles at a higher level

This section does not apply to senior executive roles, senior officer roles, or appointments at the HP8 classification level.

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
- 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 PSC Directive 15/13 – Recruitment and Selection. The occupant of the role is required to have demonstrated their merit in an open merit 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 if the role in question is again evaluated at a higher classification level. An open merit selection process is to be undertaken.

7.4 Temporary and casual conversion to permanent status

An eligible temporary employee may be converted to permanent status in accordance with the PSC Directive 08/17 – Temporary employment and Conversion of temporary employees to permanent status HR Policy B52.

An eligible casual employee may request to be converted to permanent status in accordance with the PSC Directive 01/17 – Conversion of casual employees to permanent employment.

These conversion processes are separate to direct appointment, however, remain an option for managers to fill vacant roles.

8 Advertising

8.1 Advertising vacancies

The minimum vacancy advertising requirements are outlined in PSC Directive 15/13 – Recruitment and Selection.

In addition to the options outlined in the PSC Directive, consideration is to be given to advertising in a way that will attract a diverse pool of applicants.

The following additional advertising requirements may be considered:

Multi-disciplinary positions

Multi-disciplinary positions are those that may be occupied by a suitably qualified and experienced incumbent from different professional disciplines. For example, the Nurse Grade 7/Health Practitioner 5 (NG7/HP5) dual classification, which was endorsed through an agreed process.

Vacancy advertising - targeted (closed merit)

Targeted advertising limits the invitation to apply for a vacancy to, at minimum, public sector employees who are currently employed by Queensland Health. Current 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, for example, members of a particular community targeted under a regional employment initiative.

All Queensland Health employees are bound by the Code 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 covered by this policy must, at a minimum, comply with the advertising requirements under sections 9.1 to 9.5 of PSC 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 how 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.

8.2 Exemptions from advertising

In addition to the exemptions from advertising listed in PSC 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. 9) 2016 (EB9).

In addition to exemptions from advertising, the relevant delegate may elect to limit advertising in accordance with section 9.7 of [PSC Directive 15/13 Recruitment and Selection](#). Documentation requirements when approving exemptions under section 9.7 of [PSC Directive 15/13 Recruitment and Selection](#) are outlined in section 15.2 of this policy.

Specific exemptions approved by the Public Service Commission include:

Streams	Classifications	Reference
Administration, operational, professional and technical	AO1 - AO2 OO1 - OO2 OO3* PO1 - PO2 TO1 - TO2	All considered entry-level. *Operational officer level 3 - trade equivalent non-supervisory
Building Engineering and Maintenance Services	Group HBEA12 and group HBEA10	Relevant Queensland Health Building, Engineering & Maintenance Services Certified Agreement (No. 6) 2016, provided these roles maintain their relativity with the entry-level roles under wage group C12 and wage group BW1 (a) respectively under the Building, Engineering and Maintenance Services Employees (Queensland Government) Award – State 2016
Health practitioners	Note: There are no entry-level roles for HP.	Health Practitioners and Dental Officers (Queensland Health) Award – State 2015
Medical	Medical interns at salary level RMO1 (L1) intern	Medical Officers (Queensland Health) Award - State 2015
Nursing and midwifery	Assistants in nursing, enrolled nurses and nurse grade 5 roles	Nurses and Midwives (Queensland Health) Award – State 2015

8.3 Recurring vacancies

In addition to the requirements in [PSC Directive 15/13 – Recruitment and Selection](#), if the existing pool is supplemented or a late application is accepted within 12 months after the closing date of the initial vacancy, the original panel is to be reconvened (or at least two of the original members) to assess the new applicants. By using similar selection techniques as the first applicant pool, the existing order of merit can be supplemented with additional meritorious applicants. Recurring vacancies can only use the order of merit if they are covered by the same role description.

8.4 Administrative, operational, professional and technical streams

Section 11.5 of Queensland Public Health Sector Certified Agreement (No. 9) 2016 (EB9) provides separate processes for eligible temporary and casual administrative, operational, professional and technical stream employees to be considered for permanent vacancies as follows.

8.4.1 Advertising of permanent base grade positions

Permanent base grade positions will initially be by a closed merit process restricted to casual or temporary employees with four years or more service with the Department of Health or a Hospital and Health Service (HHS) at the site where the vacancy exists.

Advertising of vacant positions more broadly for base grade positions will only occur once the pool of casual or temporary employees with two years or more service from within the same site has been used via a closed merit process. Preference within the casual or temporary pool will be provided to those casual employees with greater than four years' service.

8.4.2 Advertising of non-base grade positions

A closed merit process for non-base grade positions will be applied where appropriate, particularly in relation to temporary or casual employees with two years or more of continuous service.

8.4.3 Order of merit

An order of merit to be established for employees up to and including OO4 or its equivalent with three years of continuous service in a temporary or casual position for vacancies at level. This is on the basis of assessment at three years, and preference for those assessed as suitable in vacancies at level vis a vis externals and applications from lower levels.

Part III – Merit and panel formation

9 Merit

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

Organisational fit is a key dimension of merit (i.e. the skills, personal qualities, etc. necessary for the appointee to operate effectively in the specific organisational environment) and must be assessed along with role related requirements.

Open merit does not apply to the appointment of an employee affected by workplace change. A suitability assessment is required (refer section 3 of this policy).

10 Panel responsibilities

10.1 Selection panel

Panels must be comprised of at least two members with a minimum of one external panel member. An external panel member must be from outside the employing branch or work area and may be from another specialty area, division, HHS or Queensland Government agency. All members must understand the requirements of the role, and at least one member must have detailed knowledge.

The panel chair must be trained in conducting recruitment and selection activities, including training on bias, prior to commencing the hiring process. It is highly recommended that panel members also complete this training.

Panel composition must be planned to reflect:

- the role (e.g. identified or directly working with people from a non-English speaking background)
- applicants (e.g. equal employment opportunity target groups), or
- community in which the role serves (e.g. Aboriginal and Torres Strait Islander people).

In these instances, one member of the panel must possess the attribute that is the basis for the role. This may require a specialist panel member from another government department/agency/community group selected for their knowledge of the skills required for the role.

In the case of health practitioner and dental officer roles, at least one member of the panel must be from a discipline of the advertised vacancy.

Panel members should 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.

10.2 Declarations – Potential conflict of interest/prior knowledge of applicant

To support transparency of recruitment processes, all parties involved in a recruitment process (including panel members, panel chairs and delegates) must ensure any prior knowledge of applicants is declared and any conflicts of interest (whether actual or perceived) are identified, disclosed and managed in the public interest.

10.2.1 Prior knowledge of applicant

Prior knowledge refers to existing knowledge of an applicant's work performance or ability to meet the requirements of the role being applied for.

Prior or current professional knowledge does not prevent a supervisor from participating on a panel and assessing a position within their control, or employees who work for them, currently or in the past, when their knowledge of the applicant has been gained through normal on-the-job activities.

A panel chair, panel member or appointment delegate may be nominated as a referee.

Panel members and panel chairs are required to identify and disclose their prior knowledge of applicants to the other panel members during a recruitment process. This includes situations where they have been nominated as a referee for an applicant. Details of the prior knowledge must be documented in the selection report, with due consideration of any real or perceived bias as a result of that person being part of the panel. The information is to be factual and able to be verified so that its influence in the selection recommendation is transparent.

This requirement also applies when an appointment delegate has prior knowledge of, or is the nominated referee for, the recommended applicant/s. The delegate is to declare their prior knowledge and document details in the selection report, with due consideration of any real or perceived bias, as part of the appointment approval.

Where any prior knowledge of a panel member, panel chair or appointment delegate gives rise to an actual, perceived or potential conflict of interest, this is to be managed appropriately (refer section 10.2.2).

Where the prior knowledge of an applicant is adverse, natural justice must be afforded and the applicant must be provided with the details of the adverse information and be given an opportunity to comment on the information.

10.2.2 Conflict of interest

A conflict of interest occurs when there is a conflict between our role in the public service, and our personal/private interests. Conflicts of interest in recruitment processes can occur through personal relationships or associations with others, such as family members and friends, or any tendency toward favour or prejudice resulting from friendship, animosity or other personal involvement that could bias your judgement or decisions.

It is the individual responsibility of panel members, panel chairs and delegates to identify and declare any conflicts of interest they may have in a recruitment process.

Panel members who identify a conflict of interest are required to disclose the conflict of interest to the panel chair. The panel chair is responsible for ensuring the conflict is managed appropriately, including determining whether the panel member should be precluded from participating in the process.

Panel chairs who identify a conflict of interest are required to disclose the conflict of interest to the delegate. The delegate is responsible for ensuring the conflict is managed appropriately, including determining whether the panel chair should be precluded from participating in the process.

Delegates who identify a conflict of interest are required to disclose the conflict of interest to their line manager. The line manager is responsible for ensuring the conflict is managed appropriately, including determining whether the delegate should be the decision-maker for the process.

All conflicts of interest identified in a recruitment process must be recorded in writing on the selection report, including the steps taken to manage the conflict.

Panel members and panel chairs who have a personal relationship with an applicant for the position, including but not limited to a partner or relative (either current or past) will excuse themselves from the panel and any decision-making to avoid allegations of perceived conflict of interest.

Delegates who have a personal relationship with the recommended applicant for the position, including but not limited to a partner or relative (either current or past) will not exercise a delegated authority where there is a perceived conflict of interest. The appointment delegate is to inform their line manager of the conflict and refer the appointment recommendation to them for consideration.

For further information in relation to managing conflicts of interest refer to the [Conflicts of Interest guideline](#) or your local conflict of interest policy or procedure.

10.3 Role of chair

The panel chair is responsible for leading the selection process in an open and transparent way in accordance with policy and legislation. The chair must be a Queensland Health employee appointed by the appropriate delegate and be of a higher classification level than the vacancy. The chair cannot also be the delegate for appointment of the role. Refer to Section 1 of this policy for more detail.

10.4 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.

10.5 Diversity and inclusion

Queensland Health is committed to greater workforce diversity and inclusion. Queensland Health has committed to targets for the diversity of the workforce, as per the Queensland Health Workforce Diversity and Inclusion Strategy 2017-2022 (the strategy).

The recruitment process is a primary vehicle for enabling this commitment. Selection panels are to consider the elements of diversity and inclusion in undertaking recruitment processes to achieve the targets under the strategy.

10.6 Unconscious bias

Unconscious bias, in the context of recruitment, occurs when a panel member makes assumptions of a candidate's competence or otherwise based on their own personal experiences, background and cultural context (e.g. stereotyping). Unconscious bias can hamper objective decision-making, result in unintended discrimination and impact on recruiting a diverse workforce.

10.7 Reasonable adjustment

Reasonable adjustment may be required as part of the recruitment and selection process to support an applicant e.g. wheelchair access, sign language interpreter. It is the responsibility of the panel chair to ensure reasonable adjustments are provided where practicable. Refer to the Reasonable adjustment HR Policy G3 for further information.

Part IV – Selection

11 Selection strategy

11.1 Selection strategy

The selection panel must implement a selection strategy that directly relates to competencies and cultural behaviours required so that the most meritorious applicant is selected through a transparent and defensible approach. The selection strategy must be applied equally, consistently and fairly.

The panel is responsible for choosing a **minimum** of two selection techniques, one of these must be a referee report/s. Selection techniques must be tailored to the position to clearly assess the capability of applicants and their alignment to organisational values. In addition to a referee report/s, other selection techniques may include:

- Phone screen
- Eligibility screen – using questions that are mandatory requirements for the role
- Written application/task
- CV/resume

- 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.

Advice on selection techniques is available from local recruitment units.

11.2 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 must consider each applicant's personal qualities and behaviours and, if relevant, potential against the key attributes.

While panel members may differ in their assessment, wide variations are to be scrutinised and consensus reached on which applicant best meets the requirements of the role. Where a clear recommendation and decision cannot be reached, the selection information must be reviewed and additional selection techniques used to separate applicants.

11.3 Assessment of applicants submitted by a recruitment agency

The delegate may choose not to consider applications submitted by a recruitment agency. If a delegate decides to progress the applicant, full terms and conditions, including cost of placement, must be negotiated with the agency prior to doing so.

12 Referee checking

The following requirements for referee checking are in addition to the requirements outlined in [PSC Directive 15/13 – Recruitment and Selection](#):

Use of referee reports

- Referee reports are to be completed for all appointments regardless of the nature or duration of the appointment.
- At least one referee report is to be completed for the preferred applicant, however medical roles require a minimum of two reports which must be conducted by the medical superintendent, or appropriate delegate.
- Referees must be informed that their comments will be made available to the applicant if requested.
- When appointing from an order of merit for a recurring vacancy, an updated referee report is required where the original referee report is older than three months. The updated referee report must be obtained and considered before any offer of appointment is made.

Identifying referees

- The referee is to be (or have been) in a recent supervisory relationship, i.e. within the past two years, 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 written/witnessed verbal consent has been given by the applicant.
- A panel member can act as a referee for an applicant (refer section 10.2.1 of this policy).
- 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 should be discussed with the applicant and arrangements made which are acceptable to the applicant.

12.1 Selection report

The selection report provides all essential information to the appropriate delegate to assist them 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 on the order of merit who are **not suitable** for appointment). It should be noted that an order of merit or ranking is confidential and should not be shared with other employees or applicants. There is no obligation to use the order of merit for future appointments.
- a recommendation for an external appointee to a specific pay point within a classification as determined by the panel (refer section 12.2 of this policy)
- confirmation and evidence that all appropriate referee, identification, qualification checks, employment screening checks, visa status and other required pre-employment 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.

12.2 Pay point recommendation

Internal applicants are to be appointed to the relevant classification and pay point as may be prescribed by the specific award, agreement, other industrial instrument or administrative arrangement applying to their occupational group (refer to Determining salary levels upon appointment HR Policy C59).

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 pay point (increment) within the classification level upon the panel's recommendation, and appropriate delegate approval.

Recommendations to a higher paypoint are to include supporting rationale.

Part V - 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 e.g. employment screening checks to ensure the process applied was completed fairly and able to withstand appropriate scrutiny, including panel composition, and integrity and merit based assessments and decision-making
- dealing with matters of contention
- making decisions relating to the appointment recommendations made in the selection report by approving/not approving the recommendations
- ensuring appointment is within staffing and budget allowances and appointees have met all pre-employment screening requirements.

The appropriate delegate must ensure decisions made regarding a selection, particularly when there is contention or a recommendation is not approved, are documented clearly, including any reasoning used in making the decision.

13.2 Early retirement (ER), voluntary separation program (VSP) and voluntary redundancy (VR) status checks

Prior to making an appointment, the chair must check the ER, VSP and VR status of all former public sector employees, including for temporary and casual appointments. It is recommended that the chair ask the question directly to the applicant or check the application form.

If the applicant is currently within the benefits period of an ER, VSP or VR package issued by a Queensland Government agency, the chair 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 [PSC Directive 04/18 – Early Retirement, Redundancy and Retrenchment](#).

13.3 Proof of identity

All preferred applicants must provide proof of identity prior to commencing employment.

Current employees who are transferred or engaged in another position within Queensland Health, and there is no break in service which triggers a termination payment, will not be required to provide all proof of identity documents prior to re-commencement. Consideration should be given to employment screening requirements for the employee's new role e.g. vaccine preventable disease, professional registration, mandatory qualifications.

The panel chair/hiring manager is to seek current original or certified copies (must be certified by a justice of the peace, commissioner of declarations, barrister, solicitor, or notary public) of three identity documents to satisfy proof of an applicant's name, date of birth and signature.

The **three** identity documents, from the following list, must include at least one type of photographic ID, and one type of identification that contains a signature and date of birth:

- Australian citizenship certificate
- Australian driver's licence
- Australian student photo ID
- Australian proof of age card
- Birth certificate
- Passport
- Health care card

- Medicare card
- Pension concession card
- Utility bill (e.g. water, gas, electricity)
- Working with children check (Blue Card).

Where an Aboriginal and Torres Strait Islander person is unable to provide proof of identity documentation, (e.g. an older person who does not have a birth certificate or those living in remote communities), consideration is to be given to alternative confirmation of proof of identity documents, including a statement by an authorised referee. Examples of acceptable authorised referees include: chairperson, Secretary or CEO of an incorporated indigenous organisation; school principal; minister of religion; treating health professional or manager Aboriginal medical service; other government employee of at least five years.

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).

For overseas applicants, local documents issued by equivalent overseas authorities can be accepted.

If a document is not in English, an English translation from a translator approved by the National Accreditation Authority for Translators and Interpreters (NAATI) is required to be provided by the applicant.

When these documents are requested for employment screening purposes, an additional copy is to be forwarded with the employment screening check application.

13.4 Employment screening

Appointment approval and offers of employment must not be made until the appropriate employment screening checks are completed. New staff must not commence employment until all clearances have been received.

Once identified by the panel, preferred candidates should be contacted to initiate required employment screening processes to allow for clearances prior to delegate approval.

The panel chair/hiring manager is responsible for requesting, and where required, undertaking these checks.

Depending on the role being recruited to, applicants must undergo the following employment screening:

- general criminal history check (mandatory for all roles, except where an aged care check or corrective services check is conducted)
- internet search (mandatory for all medical practitioners, including those medical officers employed via recruitment agencies, as contractors or as locums)
- aged care criminal history check
- aged care key personnel check
- Corrective Services criminal history check
- working with children check (blue card)
- professional registration/membership/qualification check
- radiation licensing safety check
- biosecurity fit and proper person check
- security background check

- citizenship and visa check
- vaccination check
- serious discipline history check.

Employment screening checks are only to be conducted on the preferred candidate.

Refer to the Employment screening HR Policy B40 and Citizenship, Residency, Visas and Immigration HR Policy B46.

13.5 Curriculum vitae (CV)/resume

All applicants 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.

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/professional membership purposes.

When a health professional or other person is employed by any other means, such as direct application through a recruitment company, disability employment service, etc., it is the responsibility of the appropriate delegate to ensure the CV/resume certification requirement is met.

13.6 Vaccine preventable diseases (VPD)

This section applies to workers (refer definitions).

Contractors, volunteers and students engaged by HHSs are subject to the same requirements set out in this section as per the Health Service Directive and Protocol for VPD screening for contractors, students and volunteers.

On and from 1 July 2016, applicants seeking to be engaged for or on behalf of Queensland Health must provide documentary evidence to verify that they are either vaccinated against or that they are not susceptible to any of the VPDs listed in Table 1 prior to an offer of engagement.

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

Employees engaged prior to 1 July 2016 are not subject to the new conditions of employment unless they are engaged in a role with VPD requirements in another Queensland Health entity. A Queensland Health entity includes HHSs and the Department of Health.

Table 1: VPDs for which pre-engagement vaccination evidence is required

Risk criteria	Vaccine preventable diseases
Roles that have direct contact with patients or who, in the course of their work, may be exposed to blood/body fluids or contaminated sharps	Hepatitis B

<p>Roles that have contact that would allow acquisition and/or transmission of measles, mumps, rubella, varicella or pertussis. This applies to roles in which:</p> <ul style="list-style-type: none"> work requires face to face contact with patients, or normal work location is in a clinical area such as a ward, emergency department or outpatient clinic, or work frequently requires them to attend clinical areas. 	<p>Measles, mumps, rubella (MMR) Varicella (chicken pox) Pertussis (whooping cough)</p>
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In addition to the VPDs listed in Table 1, the Director-General (or delegate) or a Health Service Chief Executive, may require applicants seeking to be engaged for or on behalf of Queensland Health to provide documentary evidence to verify that they are either vaccinated against or not susceptible to the VPDs listed in Table 2. The rationale and decision to mandate applicants to provide documentary evidence that they are either vaccinated against or that they are not susceptible to these VPDs must be clearly documented.

Table 2: Additional VPDs for which pre-engagement evidence may be required

Risk criteria	Vaccine preventable diseases
<p>Roles that involve any of the following:</p> <ul style="list-style-type: none"> work in remote Indigenous communities or with Aboriginal or Torres Strait Islander children work in early childhood education and care work as plumbers or in regular contact with untreated sewage work caring for persons with developmental disabilities 	Hepatitis A
Roles that may be at high risk of exposure to drug-resistant cases of tuberculosis	Tuberculosis
Roles that are assigned to the outer Torres Strait Islands for a total of 30 days or more during the wet season	Japanese encephalitis

Workers will be required to maintain their vaccination status as per Tables 3 and 4.

Table 3 Minimum required dosages for vaccines

Vaccine preventable diseases	Pre-offer of engagement	Continuing engagement
Measles, mumps, rubella (MMR)	Minimum one dose	Second dose must be administered within three months of commencement

Varicella (chicken pox)	Minimum one dose	Second dose (if required) must be administered within three months of commencement
Hepatitis B	Minimum two doses	Third dose must be administered within six months of commencement
Pertussis (whooping cough)	One dose	One dose every ten years

Table 4 Required dosages for additional VPD's

Vaccine preventable diseases	Pre-offer of engagement	Continuing engagement
Hepatitis A (where relevant)	Dosages to be determined in accordance with the recommendations in <i>The Australian Immunisation Handbook</i> as updated from time to time and in consultation with the office of the Communicable Diseases Branch.	
Tuberculosis (where relevant)		
Japanese encephalitis (where relevant)		

For all required VPDs, documentary evidence of vaccination and ongoing vaccination must be submitted to the line manager in a timely manner as a condition of continued engagement. The documentary evidence must be in an acceptable form determined by the employer. Guidance on acceptable forms of evidence is provided in the Vaccine preventable diseases evidence requirements guide.

All vaccinations required as per this section must be documented in the:

- contract of employment
- position role description
- standing offer arrangements or contract terms and conditions
- student deed
- volunteer agreement
- any other relevant engagement documentation.

There are some circumstances when the most meritorious candidate for a position cannot be safely vaccinated in order to satisfy the VPD requirements for their position due to:

- a medical condition
- a pregnancy
- shortage of vaccinations.

In these circumstances, a risk assessment must be completed by local experts (e.g. Infectious Diseases Physician, Infection Control Unit, Workplace Health and Safety) to determine the level of risk of the worker contracting/transmitting VPDs in their role. Where there is a medium/high risk, the worker should be temporarily deployed to a position of lower risk.

If the worker is temporarily deployed to another role, they should be transferred into the initial role once they are able to satisfy the requirements of the role they were appointed to.

When offering a position to a candidate in this circumstance, the relevant engagement documentation must clearly state that ongoing engagement is subject to the person satisfying the VPD requirement. A HHS's ability to accommodate a worker in this manner would be subject to the availability of alternative roles.

In circumstances where the delay in the commencement of a worker would directly impact on clinical care and/or services, the Director-General (or delegate) or a Health Service Chief Executive may temporarily exempt a position from the requirements of this section of the policy. The letter of engagement for the worker must specify the period of exemption and require the worker to provide documentary evidence to verify that they are either vaccinated against or not susceptible to the relevant VPDs prior to the end of the exemption period as a condition for ongoing engagement. All exemptions must be reported to the Director-General in the VPD exemption report template.

13.7 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 VI – Appointment

14 Appointment

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

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

After shortlisting, the panel may advise non-shortlisted candidates via e-mail that they were unsuccessful and that their application is no longer being considered.

Unsuccessful applicants who progressed past the shortlisting stage, i.e. those candidates who will appear in the selection report, must first be verbally advised that they were unsuccessful.

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

All senior executive and senior officer appointments made from an advertised vacancy and all appealable non entry-level appointments must be published in the Health Services Bulletin (all Department of Health/HHS roles), or the Queensland Government Gazette (public service roles only) when applicable. Refer to the [PSC Directive – 03/17 Appeals](#) and your local recruitment services unit for further information.

14.3 Appointment offer

All new employees must accept an offer of appointment **prior** to commencing duty.

To support this requirement, panel chairs must complete all paperwork and submit to the local Recruitment Services in a timely manner to ensure all probation and other conditions within the letter of offer can be upheld.

Existing employees must accept an offer of appointment for permanent appointments; however, an employee movement form is deemed the offer and acceptance for a temporary engagement or secondment.

Preferred applicants will have seven calendar days from the date of receiving the offer to accept.

Queensland Health standard appointment letters, including relevant terms and conditions of employment, must be 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. Appointment letters must also state the appropriate pay rate according to award conditions, the delegate approved paypoint recommendation (refer section 12.2 of this policy) and where relevant include details of the probationary period.

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

Acceptance of offer does not apply to casual or secondment engagements.

14.4 Work location

Appointments may be made to the Department of Health or HHSs, but the employee is to be advised at which principal facility or work unit they will be based or located.

Although appointment to Queensland Health is to a specific location, employees may be required to work at an alternative location. Employees are to be consulted with respect to any change to their work location, in accordance with the applicable industrial instruments.

If an employee does not agree to the change in work location, they are entitled to lodge a grievance according to the Employee complaints HR Policy E12.

Part VIII – Post appointment

15 Post appointment

15.1 Selection feedback

Applicants must be advised that they can request feedback from a panel member. Factual, constructive and sensitive feedback must be provided in a timely manner to any applicant who seeks feedback. When post-selection feedback is provided, it is recommended that the panel member document this feedback.

Information such as the identity of other applicants and personal information is not to be disclosed by the panel.

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 stated under the Queensland State Archives general retention and disposal schedule for administrative records for roles at senior officer level and below.

For audit and reporting purposes, these records are to be retained for at least seven years. In the case of senior executive officers, selection documents are kept indefinitely.

In relation to an exemption from advertising (refer section 8.2), the record is also to include the detriment to business outcomes or unfair treatment that formed the basis for the decision to exempt the vacancy from advertising.

Definitions:

Agency	A department or public service office as defined in sections 7 and 21 of the <i>Public Service Act 2008</i> .
Certified documents	Documents certified to be true copies of the original by a justice of the peace, commissioner of declarations, barrister, solicitor or notary public.
Closed merit	A merit selection exercise where the applicant pool for a vacancy is restricted through limited advertising or notification to a certain group or groups of existing employees.
Curriculum vitae (CV)/resume	A summary of skills, experience and education provided by the applicant.
Department of Health (the Department)	The Department of Health includes: <ul style="list-style-type: none"> • Aboriginal and Torres Strait Islander Health Division • Clinical Excellence Queensland • Corporate Services Division • Healthcare Purchasing and System Performance Division • Strategy, Policy and Planning Division • Prevention Division • Office of the Director-General • Health Support Queensland • eHealth Queensland • any successor agency of those listed above however so named.

Deployee	An employee requiring placement who has been appointed at level into a public sector vacancy, either within Queensland Health, or to another department or agency.
Direct appointments	Refer to section 7 of this policy.
Employee affected by workplace change	Employees affected by workplace change are those employees who have been unable to be substantively allocated to a role following workplace change (i.e. a surplus employee). It does not include persons who need or are seeking alternative placements as a result of decisions under Sections 178 (mental or physical incapacity) or 188 (discipline action) of the <i>Public Service Act 2008</i> or following a transfer request.
Entry-level roles (also known as base grade level positions)	Roles classified as: <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 grade 1 (AIN), nursing grade 2 (undergraduate students in midwifery/nursing), nurse grade 3 (enrolled nurse), nurse grade 5 (registered nurse/registered midwife) Medical intern level 1 Health building and engineering apprentice HBEA 10 – 12 Note: There are no entry-level roles for Health Practitioners.
Externally advertised	Advertised (as a minimum) on the Smart Jobs and Careers websites.
Identical or similar role	A role which shares the same or similar title, remuneration, classification level and role description as another role.
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 section 7 of the <i>Anti-Discrimination Act 1991</i> , e.g. gender, race, age, impairment, sexuality, religious belief or religious activity, for any of the purposes contained in section 25 of that Act.
Job evaluation methodology system (JEMS)	The framework adopted across Queensland Health to assess and establish the relative work value of roles within the administration, operational*, professional, technical, senior officer and executive streams. JEMS forms the basis on which the classification and remuneration level of roles within these streams are determined. * Refer to the Operational Services Manual
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	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 including if relevant: <ul style="list-style-type: none"> the way in which the person carried out any previous employment or occupational duties the extent to which the person has potential for development.
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.

One up rule	If the normal delegate for a recruitment process wishes to be on the selection panel, the delegate required to approve the appointment will be the next highest delegate.
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, and advertising in the open market. Open merit does not include internal expressions of interest.
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 classification level other than temporarily (as per schedule 4 of the <i>Public Service Act 2008</i>).
Reasonable adjustment	The requirement to make 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.
Recruitment	The process of seeking and attracting a pool of applicants from which the best candidate for job vacancies can be selected.
Recurring vacancy	A vacancy that is identical to the original vacancy in terms of title, remuneration, classification level and role description, provided the appointment is made within 12 months of the closing date of the original vacancy. A recurring vacancy also means a similar vacancy provided that the classification level, remuneration and key capabilities are the same as the original vacancy, the role requirements are similar and the advertisement included a note that applications may be used to appoint to similar vacancies for a specified period up to 12 months after the closing date of the initial vacancy.
Referee checks	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	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.
Secondment	The temporary engagement of a permanent employee, either at their substantive classification level or at a higher classification level within or external to Queensland Health. 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.
Selection	The process of choosing the most meritorious applicant based on assessment.
Staff interchange	Staff interchange and work arrangements exist between Queensland Government departments/agencies and Federal Government/local authorities where employees in one sector may be engaged on temporary assignments in another sector. The objective is to promote sharing of knowledge and business practices and processes across the public sectors and encourages the professional and personal development of employees.

Suitability assessment	An assessment, including a review of the employee's resume, a conversation with the employee and a referee check, to determine the employee's suitability for the role. The assessment is to be undertaken in accordance with the requirements for assessing suitability listed in PSC Directive 17/16 – Supporting employees affected by workplace change .
Vacancy	A position in which no employee is currently appointed.
Voluntary early retirement (VER)	A situation where an employee accepts an early retirement package in exchange for voluntarily terminating their employment.
Voluntary redundancy	The situation where a position or function becomes redundant as a result of workplace change and this leads to a decision by the chief executive to terminate the employee's employment.
Workers	Includes Queensland Health employees (engaged on a permanent, temporary or casual basis), contractors, labour hire, agency staff, service providers, students, work experience placements, locums, visiting medical officers and volunteers.

History:

June 2020	<ul style="list-style-type: none"> • Policy: <ul style="list-style-type: none"> – amended to update references – application amended as a result of changes to the Hospital and Health Boards (Changes to Prescribed Services) Amendment Regulation 2019.
December 2019	<ul style="list-style-type: none"> • Policy formatted as part of the HR Policy review • Policy amended to: <ul style="list-style-type: none"> – update references and naming conventions – clarify role evaluation methodologies (refer section 2.2) – clarify transfer/movement at level requirements (refer section 4) and exclusion of health practitioner eight (HP8) direct appointments (refer section 7) – include Public Service Commission provisions relating to the conversion of casual and temporary employees to permanent status (refer section 7.4) – include multi-disciplinary position advertising and targeted vacancy advertising (refer section 8.1) – reflect enterprise bargaining commitments from Queensland Public Health Sector Certified Agreement (No. 9) 2016 (refer section 8.4) and Health Practitioners and Dental Officers (Queensland Health) Certified Agreement (No. 2) 2016 (refer section 10.1) – clarify panel composition for health practitioner and dental officer roles (refer section 10.1) and declaration requirements for prior knowledge of applicant and conflicts of interest (refer section 10.2) – expand diversity and inclusion (refer section 10.5), unconscious bias (refer section 10.6) and reasonable adjustment (refer section 10.7) – update referee reporting requirements (refer section 12) – clarify confidentiality of order of merit or ranking (refer section 12.1), pay point recommendation for internal and external applicants (refer section

	<p>12.2) and proof of identity requirements (refer section 13.3)</p> <ul style="list-style-type: none"> – remove requirement to conduct pre-employment structured clinical interviews (PESCI) for international medical graduates (previously section 13.5) – update definitions of employee affected by workplace change, recurring vacancy and suitability assessment <ul style="list-style-type: none"> • Policy application does not extend to employees of Queensland Ambulance Service.
January 2017	<ul style="list-style-type: none"> • Policy amended to remove reference to Attachment Two in section 10.2
December 2016	<ul style="list-style-type: none"> • Policy: <ul style="list-style-type: none"> – formatted as part of the HR Policy review – amended to update references and naming conventions – updated and clarified the employees affected by workplace change requirements – amended proof of identity requirements – clarified employment screening requirements i.e. general criminal history check and internet search – clarified processes for advising unsuccessful applicants.
July 2016	<ul style="list-style-type: none"> • Policy: <ul style="list-style-type: none"> – formatted as part of the HR Policy review – amended to update references and naming conventions – amended to include health professional memberships – update requirements for evidence and verification of identity and qualifications – amended to include Vaccine Preventable Diseases in section 13.7
June 2014	<ul style="list-style-type: none"> • Policy formatted as part of the HR Policy Simplification project. • Policy amended to: <ul style="list-style-type: none"> – 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. <p>For history prior to February 2014, refer to the December 2012 version of this policy.</p>

Previous	<ul style="list-style-type: none"> • 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)
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Attachment 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 standard practice, and ensure employee entitlements continue to be met.

1 Identified role requirements and processes

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

1.1 Identifying the role

An application for an identified role (refer Definitions) 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 specific attribute required (as listed in section 7 of the *Anti-Discrimination Act 1991*) is to be identified and supported by documentary evidence or information insisting on the possession of a particular attribute.

An identified role can be justified based on a combination of factors e.g. a role working within a particular community which has a high population of a certain ethnicity may benefit being filled by a person from that background who understands cultural norms and language.

1.2 Advertising

An 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.

Consideration is to be given to 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 *Anti-Discrimination Act 1991* 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 *Anti-Discrimination Act 1991*, 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 advertised requirements of the position as outlined in the role description. 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 to be recommended for appointment to an identified role. The attribute is to be assessed during the selection process in a similar manner to any mandatory qualification.

For further information refer to the [PSC Guideline: 2/13 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 Queensland Human Rights Commission on the grounds for designating a role as identified (the Commission's advice is not binding in the case of a complaint to the Tribunal).

Under section 113 of the Anti-Discrimination Act, Queensland Health can formally request the Tribunal to grant **an exemption** from relevant sections of the Anti-Discrimination 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 Anti-Discrimination Act, Queensland Health can formally request the Queensland Human Rights Commission seek **an opinion** from the Tribunal, as to whether or not the exemptions contained in sections 25, 104 or 105 of the Anti-Discrimination 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 PSC Directive 03/17 – 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 PSC directive. 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 Anti-Discrimination Act, an applicant may be able to raise the inclusion of an attribute of an identified role with the Queensland Human Rights Commission. Conditions under which complaints are heard and the process to follow are outlined in the Anti-Discrimination Act. The Queensland Human Rights Commission can provide advice to Queensland Health employees about their complaint rights and processes.