Performance and development

Policy Number: G9 (QH-POL-189)

Publication date: June 2017

Purpose: To support improved individual, team and organisational performance by:

- clarifying the work standards and behaviours expected of employees
- focusing on mutual responsibility and regular conversations between managers and employees
- collaboratively identifying how employees will be supported in performing their role and how they can be developed to support the future workforce requirements of the Department of Health.

Application: This policy applies to all employees working for the Department of Health.

Delegation: The ‘delegate’ is as listed in the relevant Department of Health Human Resource (HR) Delegations Manual, as amended from time to time.

Legislative or other authority:
- Hospital and Health Boards Act 2011
- Public Service Act 2008

Related policy or documents:
- Recruitment and Selection HR Policy B1 (QH-POL-212)
- Health Practitioners Professional Development Allowance and Leave HR Policy C42 (QH-POL-146)
- Study and Research Assistance Scheme (SARAS) HR Policy G10 (QH-POL-223)
- Performance Improvement HR Policy G11 (QH-POL-190)

Policy subject:

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Attachment One   Career success plan
1 Performance development conversations

There are six key elements of performance development conversations as described in the performance development framework. These are:

1. **Set and clarify expectations** - Establish and clarify performance expectations, ensuring that employees understand what success is within the context of their role.
2. **Regular conversations** - Ongoing two-way conversations between managers and employees to discuss work, receive feedback and plan development.
3. **Plan and review** - Regularly review work plans, progress and realign performance priorities to embrace change and ensure that work is aligned to overall objectives.
4. **Develop** - Identify and develop individual capabilities to meet current and future organisational needs.
5. **Recognise** - Recognise and celebrate performance achievements to support a culture where our people feel valued and appreciated.
6. **Resolve performance issues** - Part of regular conversations is to resolve issues and provide feedback in a timely manner to avoid escalation to performance management procedures.

2 Performance development components

Performance development conversations are to be recorded in a career success plan (CSP) for reporting purposes. To support the recording process, the Department of Health has developed an online tool, for the recording of performance development conversations. The use of the online career success planning tool is not mandatory. Local systems and processes can be used to record a CSP; however this needs to be reportable for audit purposes.

The minimum requirements of the performance development process include:

1. All employees and managers are required to participate in performance development conversations on a regular basis. Minimum requirement is a six monthly review.
2. To meet audit and reporting requirements the recording of performance development conversations is mandatory.
3. CSPs are to be progressively updated to reflect current tasks and work priorities, individual development needs, and career and project achievements.
4. If necessary, poor or under-performance is managed in accordance with the Performance Improvement HR Policy G11.

3 Governance and accountability

Chief Executives are responsible for actively monitoring the performance development process within their Division/commercialised business units (CBU) ensuring that all departmental employees have a current plan in place.

Definitions:

<table>
<thead>
<tr>
<th>Chief Executives</th>
<th>For the purpose of this policy, Chief Executives include:</th>
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<tbody>
<tr>
<td></td>
<td>• Deputy-Director Generals</td>
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<td>• Chief Information Officer, eHealth</td>
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<td>• Chief Executive, Health Support Queensland.</td>
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### History:

<table>
<thead>
<tr>
<th>Date</th>
<th>Updates</th>
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<tbody>
<tr>
<td>June 2017</td>
<td>• Policy:</td>
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<tr>
<td></td>
<td>− formatted as part of the HR Policy review</td>
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<tr>
<td></td>
<td>− amended to update references and naming conventions</td>
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<tr>
<td></td>
<td>− application extended to casual employees</td>
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<tr>
<td></td>
<td>− updated to incorporate the online performance and development tool, Career Success Plan.</td>
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<tr>
<td>June 2014</td>
<td>• Updated naming conventions.</td>
</tr>
<tr>
<td>November 2013</td>
<td>Updated as part of the HR policy simplification project. Policy amendments include:</td>
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<tr>
<td></td>
<td>− limited the application of this policy to Department of Health employees</td>
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<td>− updated governance and accountability requirements of Chief Executives</td>
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<td></td>
<td>− removed duplication of child care professional’s requirements – refer to Child Safety – Health Professionals Capability Requirements and Reporting Responsibilities HR Policy E7</td>
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<td>− updated references and naming conventions.</td>
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<tr>
<td>June 2011</td>
<td>• Amended to reflect Directive 21/10 including that application is to all Queensland Health employees excluding casuals. Change of terminology to Performance and Development Plan.</td>
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<tr>
<td>July 2008</td>
<td>• Amended to reflect Public Service Act 2008.</td>
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<tr>
<td>June 2008</td>
<td>• Developed as a result of the HR Policy Framework consolidation project.</td>
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<td>Previous</td>
<td>• IRM 8.2 Performance Appraisal and Development.</td>
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Attachment One – Career success plan

The following information is provided as the minimum mandatory standard practice, procedure or process to enable satisfactory compliance with this Department of 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 attachment, and ensure employee entitlements continue to be met.

1 Career Success Plan

In addition to regular informal feedback, all employees and managers are to ensure that they develop a CSP and conduct regular reviews. The minimum requirement for review is six monthly. The process should align with the Department of Health’s strategic, divisional/CBU and branch priorities and link to business planning cycles.

2 Inclusions in the plan

The plan is to encompass the range of dimensions and performance indicators required to perform the role, and to include reference to the following:

- Performance objectives including corporate, strategic and operational objectives e.g. Queensland Health Strategic Plan, Advancing Health 2026 and Department of Health operational plans. The process is to provide a mechanism for linking the Department of Health’s service objectives and deliverables to employee performance.
- Ethical principles, the department’s cultural success factors, organisational values and behaviours (i.e. interpersonal objectives) e.g. Code of Conduct for the Queensland Public Service.
- Role description and technical capability objectives e.g. satisfactory completion of technical aspects of the role such as provision of legal advice, procurement of services, delivery of pathology services.
- Evaluation of technical aspects for clinicians’ roles may be supported by credentialing and scope of practice processes for specific professional groups.
- Personal capability development needs including developmental aspects of the role e.g. individual learning needs, participation in teaching and/or research, mentoring, coaching, etc.