

# Scholarship Schemes

## Department of Health Standard

QH-IMP-460-1

### 1. Statement

The Department of Health (the Department) and Hospital and Health Services (HHSs) will ensure Queensland Health (QH) scholarship schemes are conducted in accordance with the agreed governance framework.

### 2. Scope

This standard applies to all employees, contractors and consultants managing QH scholarship schemes within the Department's divisions and business units.

### 3. Requirements

#### 3.1. Responsibilities and accountabilities

The Responsible Accountable Consulted Informed (RACI) matrix outlines the accountabilities and responsibilities of respective stakeholders in managing scholarship schemes and is to be used to guide the Department and HHSs processes.

The following responsibilities relate to the management of scholarship schemes.

Responsible position	Accountability/ Responsibility
Assistant Deputy Director-General, Workforce Strategy, Clinical Planning and Service Strategy Division ( <b>ADDGWS CPSS</b> )	The accountable officer for: <ul style="list-style-type: none"> <li>approval of an approach to complex debts when a scholarship holder breaches their scholarship contract.</li> <li>approval of approach to contract variations.</li> <li>endorsement of contract addendums.</li> </ul>
Deputy Director-General, Healthcare Purchasing & System Performance Division ( <b>DDG HPSP</b> )	The accountable officer for: <ul style="list-style-type: none"> <li>termination of a contract.</li> <li>execution of an addendum to a contract or contract variation.</li> <li>six monthly reporting on scholarship schemes to the Department's executive.</li> </ul>

<p>Clinical Leads (Chief Allied Health Officer, Chief Dental Officer, Chief Nursing Officer, Chief Midwifery Officer, Chief Medical Officer, Chief Health Officer, or Executive Director, Rural and Remote)</p>	<p>Clinical leads are accountable and responsible for (as outlined in the RACI matrix):</p> <ul style="list-style-type: none"> <li>• selection of new scholarship holders.</li> <li>• endorsement of new scholarship holders.</li> <li>• issuing new contracts.</li> <li>• development of contracts in consultation with the Department's, Legal unit.</li> <li>• execution of contracts.</li> <li>• acceptance of remedy under breach processes.</li> <li>• identifying breaches of contract terms and conditions by scholarship holders.</li> <li>• identifying scholarship holders who have withdrawn from a scholarship scheme.</li> <li>• providing documentation of withdrawals.</li> <li>• recommending termination of a scholarship holder's scholarship.</li> <li>• identifying the need for a contract variation.</li> <li>• facilitating the employment of scholarship holders in line with the QH Health Service Directive Scholarship schemes.</li> <li>• communicating with scholarship holders concerning Return of Service (RoS) placements.</li> <li>• monitoring RoS service periods served by scholarship holders.</li> <li>• approval of RoS placements outside of usual locations and placements in non-public sector locations.</li> <li>• endorsement of proposals for non-public sector RoS placements for ADDGWS CPSS approval.</li> <li>• written notification to scholarship holders approving non-public sector RoS placements.</li> </ul>
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### 3.2. Contract variations

- Are to be approved by the ADDGWS CPSS.
- The number of contract referrals longer than six months for an individual scholarship holder, is at the discretion of the ADDGWS CPSS or approved delegate but should be limited to no more than two deferrals for each scholarship holder, as per the terms and conditions of the respective scholarship contract.
- The number of contract variations for specialty advanced skills training, where required, is at the discretion of the ADDGWS CPSS but should be limited to no more than two contract variations for each scholarship holder.
- No new service deferral deeds for scholarship holders to undertake specialty training will be approved.
- Scholarship holders who have not been granted a deferral will commence their RoS obligations as per the terms and conditions of their respective scholarship contract.

### 3.3. Return of service obligations

- RoS may be performed in the non-public sector if approved by the ADDGWS or approved delegate.
- RoS hours in the non-public sector will be based on full-time employment (consistent with the requirements for full-time employment in the relevant and then current industrial contract relating to such employment) as per the terms and conditions of the respective scholarship contract.
- Overtime hours will also be considered as RoS if the scholarship holder can provide sufficient evidence, verified by their employer, of the on-duty overtime hours worked.
- Where RoS is performed in the non-public sector, the Department may request a statement of service, certified by the employer, confirming the working arrangements of the scholarship holder.
- The Department may also request a Statutory Declaration accompanying the statement of service to confirm the working arrangements in the non-public sector.
- Monitoring of RoS obligations is to be undertaken in line with the Scholarships schemes RACI matrix.
- Queensland Health Allied Health Prosthetics and Orthotics Scholarships (QHAHPOS) RoS locations should be guided by the decision of the Chief Allied Health Officer.

### 3.4. Contract breaches

- Scholarship holders who fail to meet contractual obligations will breach their scholarship contract. The breach will be reported to the DDGHPSP or approved delegate by the Clinical lead on the endorsed template.

- Scholarship holders who do not complete their studies will be required to repay the scholarship debt incurred, calculated as per the terms and conditions of their respective scholarship contract.

## 4. Aboriginal and Torres Strait Islander considerations

The Department must consider any implications for Aboriginal and Torres Strait Islander stakeholders in the application of this standard.

## 5. Human rights

Human rights are not engaged by this standard.

## 6. Legislation

- *Assisted Students (Enforcement of Obligations) Act 1951*
- *Public Sector Act 2022*
- *Public Records Act 2002*
- *Right to Information Act 2009*
- *Human Rights Act 2019*

## 7. Supporting documents

- Department of health Scholarship Schemes policy QH-POL-460:2023
- RACI matrix

## 8. Definitions

Term	Definition
Assistant Deputy Director-General, Workforce Strategy, Clinical Planning and Service Strategy	Accountable officer for Queensland Health scholarship schemes.
Contract variation	An amendment of a contract with the consent of all existing parties to the contract which modifies some of the rights or obligations of the parties without amounting to a rescission of the original contract and formation of a new one.

Term	Definition
Deputy Director-General, Healthcare Purchasing and System Performance	Responsible for the execution of contract related functions of the scholarship contract.
Non-public sector	Employer who does not fall under the Queensland government.
Return of service	Refers to the service or work period of the scholarship holder as outlined in their scholarship contract.
Scholarship contract	The contract entered into by the scholarship holder and Queensland Health
Scholarship debt	Following termination of the scholarship contract, the scholarship holder is liable to pay an amount to Queensland Health as stipulated in the scholarship contract.
Service deferral deed	Varies the original scholarship contract (and any previous variations to it). The service deferral deed becomes effective on the commencement date, outlined in the deed itself. Deferral or extension of the study period or return of service is a variation to the scholarship contract that requires contract variation documentation
Scholarship holder	A person who has signed a scholarship contract with Queensland Health.

## 9. Approval and implementation

Policy Custodian	Policy Contact Details	Approval Date	Approver
Workforce Strategy Unit	<a href="mailto:Workforcestrategy-corro@health.qld.gov.au">Workforcestrategy-corro@health.qld.gov.au</a>	23 July 2023	Deputy Director-General, Clinical Planning and Service Strategy

## Version control

Version	Date	Comments
1	7 September 2018	Created
2	23 July 2023	Standard reviewed and updated